Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2016

Open to Public Inspection

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.

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

ns is at www.irs.gov/form990.

<u>A</u>	For the	2016 cale	ndar year, or tax year beginning, 2016, and ending		<u>, 20 </u>	
В	Check if	applicable	C Name of organization Endure International Inc	D Employ	yer identification nu	ımber
	Address	change	Doing business as		20-2299045	
	Name ch	-	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telepho	one number	
$\overline{\Box}$	Initial reti	•	PO Box 5562		919-681-6153	
$\overline{\Box}$		m/terminated	City or town, state or province, country, and ZIP or foreign postal code		010 001 0100	
$\overline{\Box}$	Amended		Cary, NC 27512-5562	G Gross r	receipts \$	930,025
				a group return for	r subordinates? Yes	
				- :	es included? Yes	_
_	Tax-exer	not status			a list (see instructio	
<u>.</u>	Website:			oup exemption	n number ▶	
<u>K</u>			Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation 20		e of legal domicile	NC
_	art I	Summ		05 1 111 0141	e or regar dormone	
	1		escribe the organization's mission or most significant activities: Endure Internation	anal evicte	to acciet Christis	
0	1	-				
Š	1		and churches throughout the Middle East and North Africa in their life and witness \	ve accomp	iish that through	
Governance			ching, leadership training, physical assistance, and Bible translation	on 050/ of	f .to oot oooto	
Š			is box \ ighthat if the organization discontinued its operations or disposed of more the		its net assets.	
Ğ			of voting members of the governing body (Part VI, line 1a)		 	10
80	l .		of independent voting members of the governing body (Part VI, line 1b)		 	7
ij			nber of individuals employed in calendar year 2016 (Part V, line 2a)	5	 	4
Activities &	1		nber of volunteers (estimate if necessary)	. 6	 	15
Ř			elated business revenue from Part VIII, column (C), line 12	. 7a	 	0
	b	Net unre	ated business taxable income from Form 990-T, line 34	. 7b		0
			<u> </u>	Year	Current Ye	ear
<u>•</u>			tions and grants (Part VIII, line 1h)	752,470)	601,889
Ę	9	Program	service revenue (Part VIII, line 2g)	339,426	<u>; </u>	327,760
Revenue	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)	241		376
Œ	11	Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0)	0
	12	Total reve	enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,092,137		930,025
	13	Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)	71,124	ı T	154,186
	14	Benefits	paid to or for members (Part IX, column (A), line 4)		,	0
Ø	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	282,042		286,643
Expenses	t .		onal fundraising fees (Part IX, column (A), line 11e)	0		
ē	1		draising expenses (Part IX, column (D), line 25) ▶ 13,545			
ŭ	1		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	490,588		548,327
			penses. Add lines 13-17 (must equal Part IX course (A) / ne 25)	843,754		989,156
	19	Revenue	less expenses. Subtract line 18 from line 12:	248,383		(59,131)
- s	+		(C) (V) Beginning of	Current Year		
ssets or Balances	20	Total ass	ets (Part X, line 16)	529,614	 	479,905
S E	21		ulities (Part X, line 26)	54,951		
Net A			ts or fund balances. Subtract line 21 from the 2005 N. U.T.	474,663		64,373 415,532
-	art II		ture Block	4/4,003	71	413,332
			ry, I declare that I have examined this return, including accompanying schedules and statements, and	to the best of	mu knowledge, and	boliof it is
			ete Declaration of preparer (other than officer) is based on all information of which preparer has any kn		my knowledge and	beller, it is
			ACTO.	11/11/	12017	
Sig	ın	Sign	ature of officer	Date	1017	
He		J Sign	HANNA SHAHIN, PIZESÍDENT	Date		
rie		Typ	e or print name and title			
		1.7.	pe preparer's name Preparer's signature Date		PTIN	
Pa	id	''''''	pe proporor a marite Treparer a aignature Date	Check	□ #	
Pr	epare				nployed	
Us	e Onl			Fırm's ElN ▶		
14				Phone no		
ма	y the IF	15 discus	s this return with the preparer shown above? (see instructions)		∐Yes	i 🔲 No

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	🗸
1	Briefly describe the organization's mission:	
	Endure International exists to assist Christian believers and churches throughout the Middle East and North Africa in their witness. We accomplish that through Bible teaching, leadership training, physical assistance, and Bible translation. We also	
	work with other organizations to produce and distribute Bible teaching programs by radio, TV, and internet	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	es 🗹 No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?	es 🗀 No
	If "Yes," describe these changes on Schedule O.	_
4	Describe the organization's program service accomplishments for each of its three largest program services, as mexpenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation the total expenses, and revenue, if any, for each program service reported.	easured by s to others,
4a	(Code:) (Expenses \$ 326,768 including grants of \$ 0) (Revenue \$ 327	7,760)
	Radio and TV Broadcasting Endure International works with radio stations and Internet TV in the Middle East	
	to broadcast Christian teaching programs to share the Word of God with people in that area. Other Christian organizations programs and help to pay a portion of the production and broadcasting costs.	
4b	(Code:) (Expenses \$ 296,207 including grants of \$ 0) (Revenue \$	
	Discipling Ministry Endure International is very actively engaged across the region through its local missionaries and staff to provide follow-up, counseling, and spiritual, emotional, and physical assistance to listeners	
	of Christian radio and television broadcasts and others interested in learning what the Bible teaches	
4c	(Code:) (Expenses \$ 262,996 including grants of \$ 154,186) (Revenue \$	0)
	Supporting Local Churches Endure International is actively involved with helping local churches across the region	
	The support includes working with other ministries to fund a Christian bookshop in a North Africa country, importing Christian resource materials for the spiritual growth and benefit of local Christian communities, making the Bible	
	available to the general public, and providing financial and other support to needy Christians	
	Other program services (Describe in Schedule O.)	
 -u	(Expenses \$ 45,783 including grants of \$ 0) (Revenue \$ 0)	
4e	Total program service expenses ▶ 931,754	000 /22
	Foi	m 990 (2016)

Form 99	, 00 (2016)		ı	age 3
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	2	✓	
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		1
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	!	✓
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		1
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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	0		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	1	
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		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	!	1
13 14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	✓	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	√	
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	_	1
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	1	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		1
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		1
		Forr	п 99 0	(2016)

Part I	V Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		✓_
ь 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	-		<u> </u>
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		✓
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			,
04-	employees? If "Yes," complete Schedule J	23_		✓
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		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d		·
25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		_
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	00		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		
21	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a	✓	
b	Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		_
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
21	conservation contributions? <i>If "Yes," complete Schedule M </i>	30	 	√
31	Part I	31	ŀ	1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<u> </u>		<u> </u>
	complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	04	ľ	,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		1
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		<u> </u>	
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ĺ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		'	
	Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<u> </u>		<u> </u>
	19? Note. All Form 990 filers are required to complete Schedule O.	38	1	
		Forr	ո 990	(2016)

Part				<u></u>
	Check if Schedule O contains a response or note to any line in this Part V	· · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		✓
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b_	_	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			1
b	account)?	4a		
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	'n		
	(FBAR).			!
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		√
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√ _
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			 -
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7-		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		✓_
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	"		
	required to file Form 8282?	7c		✓_
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g		<u> </u>
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	-	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
ь 10	Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		'	
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders	-		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
U	the organization is licensed to issue qualified health plans		Ï	
С	Enter the amount of reserves on hand			r d
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		ĻĪ
		Forr	n 990	(2016)

Part	VΙ	Governance, Management, and Disclosure For each "Yes" response to lines 2 three	•			
		response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
Sacti	on A	Check if Schedule O contains a response or note to any line in this Part VI Governing Body and Management	<u> </u>	: :	<u> </u>	. ✓
Secti	UII A	doverning body and Management		-	Yes	No
1a	Ente	r the number of voting members of the governing body at the end of the tax year	1a 10			
		ere are material differences in voting rights among members of the governing body, or	10	1	•	
		e governing body delegated broad authority to an executive committee or similar		ŀ		
		mittee, explain in Schedule O.			l	Ì
b	Ente	r the number of voting members included in line 1a, above, who are independent	1b 7		ĺ	1
2		any officer, director, trustee, or key employee have a family relationship or a business re		İ	ĺ	
		other officer, director, trustee, or key employee?	•	2	1	
3	Did	the organization delegate control over management duties customarily performed by or u	nder the direct			
	supe	rvision of officers, directors, or trustees, or key employees to a management company or other	person? .	3		1
4	Did t	he organization make any significant changes to its governing documents since the prior Form 990) was filed?	4	1	İ
5	Did t	he organization become aware during the year of a significant diversion of the organization	n's assets?.	5		1
6	Did t	the organization have members or stockholders?		6		1
7a		the organization have members, stockholders, or other persons who had the power to e				
		or more members of the governing body?		7a	<u></u>	✓
b		any governance decisions of the organization reserved to (or subject to approval				
		kholders, or persons other than the governing body?		_7b	L	1
8		the organization contemporaneously document the meetings held or written actions und rear by the following:	ertaken during			
а	The	governing body?		8a	1	1
ь		committee with authority to act on behalf of the governing body?		8b	1	
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot				
	the c	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		✓
Secti	ion B	Policies (This Section B requests information about policies not required by the	Internal Reven	ue C	ode.)	
			-		Yes	No
10a		he organization have local chapters, branches, or affiliates?		10a	L	✓
b		es," did the organization have written policies and procedures governing the activities of				
- 4		ates, and branches to ensure their operations are consistent with the organization's exemp		10b	<u> </u>	
11a		he organization provided a complete copy of this Form 990 to all members of its governing body before	filing the form?	11a	✓	
ь		cribe in Schedule O the process, if any, used by the organization to review this Form 990.		<u> </u>		<u> </u>
12a				12a	<u> </u>	
b		officers, directors, or trustees, and key employees required to disclose annually interests that could give		12b	✓	
С		the organization regularly and consistently monitor and enforce compliance with the po- ribe in Schedule O how this was done	olicy? If "Yes,"	12c	✓	
13	Did t	he organization have a written whistleblower policy?		13	1	
14	Did t	he organization have a written document retention and destruction policy?		14	1	
15		the process for determining compensation of the following persons include a review an				
	inde	pendent persons, comparability data, and contemporaneous substantiation of the deliberation a	and decision?			
а	The	organization's CEO, Executive Director, or top management official		15a	\	
b		r officers or key employees of the organization		15b		
_		es" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a		the organization invest in, contribute assets to, or participate in a joint venture or similar	_			
		a taxable entity during the year?		16a		✓
b		es," did the organization follow a written policy or procedure requiring the organization				
	parti	cipation in joint venture arrangements under applicable federal tax law, and take steps to	safeguard the			<u> </u>
		nization's exempt status with respect to such arrangements?	· · · · · · · · · · · · · · · · · · ·	16b		
		. Disclosure				
17		the states with which a copy of this Form 990 is required to be filed None	4 000 T 'C ::		-\/6\	
18		ion 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an able for public inspection. Indicate how you made these available. Check all that apply.	u 990-1 (Section	1 501(၁)(૩)s	only)
	_	•	(- O)			
10		Own website		orest:	nali-	ا مدا
19		cribe in Scriedule O whether (and it so, now) the organization made its governing document is a control of the public during the tax year.	is, cominct or int	erest	JUNCY	, and
20		e the name, address, and telephone number of the person who possesses the organization	ale books and			
20		e the name, address, and telephone number of the person who possesses the organization ia Shahin, PO Box 5562, Cary, NC 27512-5562 919-681-6153	is dooks alid fe	JUI CIS		
	ı ıaı II	a Sharini, i O Dox 3302, Gary, NO 27312-3302 313-001-0133		Form	990	(2016)
						()

Form	aan	(2016)	

Part VII	Compensation of Officers	Directors,	Trustees,	Key Employees,	Highest Co	mpensated	Employees	and
	Independent Contractors							

Check if Schedule O contains a response or note to any line in this Part VII.									\Box
Check if Schedule O contains a response of note to any line in this Falt VIII.		 •	•	•	•		•	•	\Box

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this have if parther the organization per any related organization componented any overest efficer director, or trustee

☐ Check this box if neither the organization no	or arry relate	a org	anız			ompe	ensa	ited any currer	it officer, directo	r, or trustee.
		•			C)					
(A)	(B)	(do n	ot ob		ition	e than		(D)	(E)	(F)
Name and Title	Average hours per week (list any	box,	unles er and	s pe	rson Irect	ıs bott or/trus	an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Ronald Schmidt	2]		l		
Chairman and Board Member	1	✓		✓				0	0	0
(2) Hanna Shahin	50						l			
President and Board Member		✓_		✓				64,669	0	42,918
(3) Juerg Loeliger	2									
Treasurer and Board Member		✓		✓				0	0	. 0
(4) Thomas King	2									
Secretary and Board Member		✓_		✓				0	0	0
(5) Leigh King	2					ļ		ļ		
Board Member		✓		<u> </u>				0	0	0
(6) Milad Massoud	2									
Board Member	<u>_</u>	✓						0	0	0
(7) Edward Suffern	2									
Board Member	<u> </u>	1					<u> </u>	0	0	0
(8) Cındı Suffern	2				l					
Board Member		✓_						0	0	0
(9) Robb Provost	2									
Board Member		✓_			_		_	0	0	0
(10) Richard Smyth	2									
Board Member		✓_					ļ	0	0	0
(11)	-									
(12)		_				_				
(13)							-			
(14)	-			-	_		-			

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, ar	nd F	lighe	st C	ompensated E	mployees (conti	nued)	
	(A) Name and title	(B) Average hours per	box,	unles	Pos neck is pe	rson	e than our both	n an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of	
		week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensatio from the organization and related organization	n i
(15)												
(16)												
(17)										_		
(18)									_			
(19)							-					
(20)									-			
(21)					!	-						
(22)												
(23)				_								
(24)		-				-						
(25)							!		J	 .		
1b c	Sub-total	t VII, Sectio	n A					>	64,669	0	4	42,918
_ <u>d</u>	Total (add lines 1b and 1c)	it not limited						e) w	ho received m			42,918
3	Did the organization list any former of employee on line 1a? If "Yes," complete									nest compensat		
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re greater th	porta an \$	ble 150,	con ,000	npe)? <i>[</i>	nsatio f "Ye	on a	and other comp complete Sch	nedule J for su	ch	√
5	Did any person listed on line 1a receive for services rendered to the organization	or accrue c	ompe	nsa	tıon	fro	m any	y un	related organiz	zatıon or indıvidı	ual	√
Section	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Re year.											ax
	(A) Name and business ad	dress							(B) Description of s	services	(C) Compensation	
NONE								-				
			-					F				
2	Total number of independent contract received more than \$100,000 of compen							o th	nose listed ab 0	ove) who		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u> </u>							Form 99 0	(2016

Part	VIII	Check if Schedule O contains a response or note	to any line in this	Part VIII		
		Ondook ii Goriousia o Goriiusia a respense di nete	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b				
s, C Am	С	Fundraising events 1c		1		
Gift Iar,	d	Related organizations 1d				1
imi	е	Government grants (contributions) 1e				
tior sr S	f	All other contributions, gifts, grants,		j		
ibr.		and similar amounts not included above 1f 601,88		1		
do	g	Noncash contributions included in lines 1a-1f: \$ 22,20	0		!	
ည်း	h	Total. Add lines 1a–1f	601,889			
Program Service Revenue		Business Code	<u> </u>			
Yer	2a	Radio and TV broadcasting 515100	327,760	327,760		
age of	b					
ξi	С					
ઝ્રે	d					-
a	е					
ğ	f	All other program service revenue .				
<u>~</u>	g	Total. Add lines 2a–2f	327,760			
	3	Investment income (including dividends, interest,				
	_	and other similar amounts)	376			376
	4	Income from investment of tax-exempt bond proceeds	<u> </u>			
	5	Royalties				
		<u> </u>	- 1			
	6a	Gross rents	-			
	b	Less: rental expenses	-			1
	C	Rental income or (loss)				
	d	Net rental income or (loss)	1			
	7a	Gross amount from sales of assets other than inventory	-			
	ь	Less: cost or other basis	-			
		and sales expenses				
	C	Gain or (loss)	 			<u></u>
	d	Net gain or (loss)			-	
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a				
Ě	ь	Less: direct expenses b				
O	С	Net income or (loss) from fundraising events . >		!		
		Gross income from gaming activities. See Part IV, line 19				
	ь	Less: direct expenses b	7			
	С	Net income or (loss) from gaming activities ▶				
	10a	Gross sales of inventory, less returns and allowances a				
	b	Less: cost of goods sold b	7			
	С	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11a					
	ь					
	С					
	d	All other revenue				
	е	Total. Add lines 11a–11d ▶				
	12	Total revenue. See instructions	930,025	327,760	0	376
						Form 990 (2016)

Part IX	Statement of Functional Expenses		
Section 50:	1(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A	I).	_

	Check if Schedule O contains a respon-			<u> </u>	<u> </u>
	t include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	154,186	154,186		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	107,587	91,448	5,380	10,759
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 8	Other salaries and wages	156,595	134,408	22,187	0
9	Other employee benefits	19,615	19,615	0	0
10	Payroli taxes	2,846	1,149	1,697	0
11	Fees for services (non-employees):	2,0401	1,143	1,037	
	Management				
	· · · · · · · · · · · · · · · · · · ·			_	
þ	Legal		 -		
C	Accounting	4,900	0	4,900	0
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	13,028	11,408	805	815
14	Information technology	1,448	1,073	125	250
15	Royalties				
16	Occupancy	12,291	11,391	300	600
17	Travel	31,119	28,680	2,325	114
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				<u></u>
19	Conferences, conventions, and meetings	5,540	157	5,145	238
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	5,292	5,292	0	0
23	Insurance	1,287	1,094	64	129
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If	.,,=5.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		100
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Radio broadcasting	291,632	291,632	0	0
b	Follow-up ministry	94,717	94,717	0	0
С	Children's ministry	23,987	23,987	0	0
d	Theological training	58,886	57,317	929	640
е	All other expenses	4,200	4,200	0	0
25	Total functional expenses. Add lines 1 through 24e	989,156	931,754	43,857	13,545
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)				

P	art X	Balance Sheet			_	
		Check if Schedule O contains a response or	note to any line in this Par	t X		🗸
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		58,397	1	55,928
	2	Savings and temporary cash investments	F	350,391	2	300,766
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		71,176	4	45,734
	5	Loans and other receivables from current and	former officers, directors,			
		trustees, key employees, and highest co				
		Complete Part II of Schedule L	[5	
	6	Loans and other receivables from other disqualified pers	sons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), ar				
		sponsoring organizations of section 501(c)(9) volun				
şţ	l	organizations (see instructions). Complete Part II of Sche	1 –		6	
Assets	7	Notes and loans receivable, net	<u></u>	8,531	7	0
⋖	8	Inventories for sale or use	}-		8	
	9	Prepaid expenses and deferred charges	,,	23,891	9	65,541
	10a	Land, buildings, and equipment: cost or				
		other basis. Complete Part VI of Schedule D	10a 28,333		10	
	b	•	10b 16,397	17,228		11,936
	11	Investments—publicly traded securities			11	
	12 13	Investments—other securities. See Part IV, line	—		13	
	14	Investments—program-related. See Part IV, line	<u> </u>		14	
	15	Intangible assets		15		
	16	Total assets. Add lines 1 through 15 (must equal		529,614		479,905
	17	Accounts payable and accrued expenses		54,951		64,373
	18	Grants payable	F	34,351	18	04,373
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities	T		20	
	21	Escrow or custodial account liability. Complete	 		21	
S	22	Loans and other payables to current and for				
Liabilities		trustees, key employees, highest comper	sated employees, and			(
abi	ĺ	disqualified persons. Complete Part II of Schedu	ule L		22	
Ï	23	Secured mortgages and notes payable to unrela	ited third parties		23	
	24	Unsecured notes and loans payable to unrelated	d third parties		24	
	25	Other liabilities (including federal income tax,			1 1	
	l	parties, and other liabilities not included on lines			1 1	
		of Schedule D	<u>\</u>		25	
	26	Total liabilities. Add lines 17 through 25	 	54,951	26	64,373
Ses		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 an				
au	27	Unrestricted net assets	[327,106	27	304,681
Ba	28	Temporarily restricted net assets		147,557	28	110,851
힏	29	Permanently restricted net assets			29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 9 complete lines 30 through 34.	58), check here ► 🔲 and			
ţŞ	30	Capital stock or trust principal, or current funds			30	
Se	31	Paid-in or capital surplus, or land, building, or en	quipment fund		31	
Ä	32	Retained earnings, endowment, accumulated in			32	
Š	33	Total net assets or fund balances		474,663		415,532
_	34	Total liabilities and net assets/fund balances .	<u> </u>	529,614	34	479,905
						Form 990 (2016)

	99 (2016)			Page	e 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u></u> .		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		930	,025
2	Total expenses (must equal Part IX, column (A), line 25)	2		989	<u>,1</u> 56
3	Revenue less expenses. Subtract line 2 from line 1	3		(59,	131
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		474	
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7_			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		<u>4</u> 15	,532
Par	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	cplain in			
	Schedule O.				
2a	the state of an analysis and a state of the		2a	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or			
	reviewed on a separate basis, consolidated basis, or both:				
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	train the organization of interior contact and the area of an interpolation according to		2b		1
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for c			}	
	of the audit, review, or compilation of its financial statements and selection of an independent according		2c	1	
	If the organization changed either its oversight process or selection process during the tax year, e.	xplaın ın			-
	Schedule O.				
3 a	, , , , , , , , , , , , , , , , , , , ,	forth in			
	the Single Audit Act and OMB Circular A-133?		3a),	/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				_
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ıudits.	3b		

Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

0MB No 1545-0047 2016

Open to Public Inspection

Name of the organization Employer identification number Endure International Inc Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 ☐ An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and	(2, 23.2		(-)			.,
•	membership fees received. (Do not						
	include any "unusual grants.")	621,423	589,298	559,811	752,470	601,889	3,124,891
2	Tax revenues levied for the			- "			· ·
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	621,423	589,298	559,811	752,470	601,889	3,124,891
5	The portion of total contributions by						
	each person (other than a	-	ļ				
	governmental unit or publicly	İ					
	supported organization) included on			i			
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						1,128,494
6	Public support. Subtract line 5 from line 4						1,996,397
Secti	on B. Total Support						
Caler	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	621,423	589,298	559,811	752,470	601,889	3,124,891
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar					İ	
	sources	30	30	47	241	376	724
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10						3,125,615
12	Gross receipts from related activities, etc.					12	1,175,474
13	First five years. If the Form 990 is for the	_					
	organization, check this box and stop her						▶ _
Sect	ion C. Computation of Public Suppor					, , , , , , , , , , , , , , , , , , ,	
14	Public support percentage for 2016 (line 6			1, column (f))		14	64 %
15	Public support percentage from 2015 Sch	nedule A, Part	II, line 14 .			15	64 %
16a							
	box and stop here. The organization qua						
b	331/3% support test - 2015. If the organi	zation did not	check a box o	n line 13 or 16	a, and line 15	is 331/3% or me	ore, check
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test - 20	016. If the orga	anization did n	ot check a bo	x on line 13, 1	6a, or 16b, and	l line 14 is
	10% or more, and if the organization me	ets the "facts	-and-circumst	ances" test, cl	neck this box a	and stop here.	Explain in
	Part VI how the organization meets the "						
	organization						
b	10%-facts-and-circumstances test -20	015. If the org	anization dıd r	ot check a bo	x on line 13, 1	6a, 16b, or 17a	a, and line
	15 is 10% or more, and if the organiza	ation meets th	e "facts-and-o	circumstances	" test, check	this box and s	top here.
	Explain in Part VI how the organization in						
	supported organization						
18	Private foundation. If the organization di						
	instructions			<u></u>		· · · · ·	· · 🟲 [_

Part							
	(Complete only if you checked the						ider Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part	II.)	
	on A. Public Support		·				
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge			_			
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		İ				
с 8	Add lines 7a and 7b						
Secti	on B. Total Support		li				
$\overline{}$	dar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	<u>(u)</u> / _	(2) 20:0	(0) 2011	(4, 2010	(0) 2010	(1) 1 014.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the				-		
	organization, check this box and stop her		<u> </u>	<u></u>			> 🗀
<u>Secti</u>	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8		•	. ,,,		15	%
16	Public support percentage from 2015 Sch			<u> </u>	<u></u>	16	%
	on D. Computation of Investment Inc						
17	Investment income percentage for 2016 (I					17	%
18	Investment income percentage from 2015					18	%
19a	331/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization .						

b 33½% support tests – 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½%, and line 18 is not more than 33½%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P	<u>art V</u>	.)	
Secti	on A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		Yes	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	-	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

Part	W. Composition Opposite tions (continued)			<u> </u>
Fair	Supporting Organizations (continued)		V	
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	NO
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			ĺ
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		<u> </u>
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			·
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			ŀ
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			i i
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		 -
2	Did the organization operate for the benefit of any supported organization other than the supported	- '-		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	<u> </u>		
Section	on D. All Type III Supporting Organizations	1		
	on other market and organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		7.00	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
3		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			l
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			-,-
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ın	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		162	140
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	<u></u>		ļ
2	-	2b		
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard	3h		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	trus ızati	st on Nov. 20, 1970 (expl ons must complete Sect	ain in Part VI). See ions A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7	<u></u>	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b	-	
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	-	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	· ,	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	-	
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		_
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	ly int	egrated Type III support	ing organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish	exempt purposes		_
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	_
4	Amounts paid to acquire exempt-use assets			_
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	sponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6	7.7		
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7:			
a	Applied to underdistributions of prior years			
<u>b</u> _	Applied to 2016 distributable amount	-	<u></u>	
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
с	Excess from 2014			
d	Excess from 2015			
<u>e</u>	Excess from 2016			
			Schedule	A (Form 990 or 990-EZ) 2016

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name (f the organization		Employer identification number
<u>Endu</u> r	e International Inc		20-2299045
Pai	Organizations Maintaining Donor Adv Complete if the organization answered '		ds or Accounts.
	Complete if the organization answered	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		(-), and an account
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the benef	and donor advisors in writing that gran	nt funds can be used or any other purpose
Par	Conservation Easements.		
	Complete if the organization answered '		
1	Purpose(s) of conservation easements held by the		
	☐ Preservation of land for public use (e.g., recreat	_	a nistorically important land area
	Preservation of open space	☐ Preservation of	a certified historic structure
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the form of a conservation
_	easement on the last day of the tax year.	sid a quamica conscivation contributio	Held at the End of the Tax Year
а	•		
b	Total acreage restricted by conservation easement		
c	Number of conservation easements on a certified h		
d	Number of conservation easements included in historic structure listed in the National Register .	(c) acquired after 8/17/06, and not	on a
3	Number of conservation easements modified, transtax year ▶		
4	Number of states where property subject to conser	rvation easement is located ▶	
5	Does the organization have a written policy required violations, and enforcement of the conservation ea	garding the periodic monitoring, insp	
6	Staff and volunteer hours devoted to monitoring, inspect	ting, handling of violations, and enforcing o	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspectin \$ \)	ng, handling of violations, and enforcing	conservation easements during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of organization's accounting for conservation easement	of the footnote to the organization's fin	
Par			Other Similar Assets.
	Complete if the organization answered '		
1a	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the formal services are serviced as a service of the formal services.	assets held for public exhibition, ed	lucation, or research in furtherance of
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar public service, provide the following amounts relati	assets held for public exhibition, eding to these items:	lucation, or research in furtherance of
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, following amounts required to be reported under S	historical treasures, or other similar	assets for financial gain, provide the
a	Revenue included on Form 990, Part VIII, line 1 .		> \$

Page	2
Page	~

3	Using the organization's acquisition,	accession and of	L							ued)
	collection items (check all that apply):	accession, and or	ner recor	ds, chec	k any of th	e follov	ving that are a s	ignificar	t use	of its
а	☐ Public exhibition		d [☐ Loan	or exchang	ge prog	rams			
b	☐ Scholarly research		е [☐ Other						
C	☐ Preservation for future generations									
4	Provide a description of the organizat XIII.	tion's collections a	and expla	in how ti	ney further	the org	ganization's exei	npt purp	ose ir	n Parl
5	During the year, did the organization assets to be sold to raise funds rather	than to be mainta						_	es_[] No
Part	Complete if the organization 990, Part X, line 21.	answered "Yes"							n For	m
	Is the organization an agent, trustee, included on Form 990, Part X?							_	es [] No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able:		A	mount		
C	Beginning balance					10	:			
d	Additions during the year					10	1			
е	Distributions during the year					16				
f	Ending balance					11				
2a	Did the organization include an amoun] No
b	If "Yes," explain the arrangement in Pa	art XIII. Check her	e if the ex	planation	n has been	provid	ed on Part XIII .]
Part										
	Complete if the organization	answered "Yes					<u> </u>			
		(a) Current year	(b) Prid	or year	(c) Two year	rs back	(d) Three years bac	k (e) Fou	ır years	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of t	he current year er	nd balanc	e (line 1g	, column (a	a)) held	as:	•		
а	Board designated or quasi-endowment									
b	Permanent endowment ▶	%								
c										
	The percentages on lines 2a, 2b, and		00%.							
3a	Are there endowment funds not in the			zation tha	at are held	and ac	lministered for ti	ne		
	organization by:								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii	+	
b	If "Yes" on line 3a(ii), are the related o							3b		
4	Describe in Part XIII the intended uses								-	•
Part										
	Complete if the organization		on For	m 990, l	Part IV. line	e 11a.	See Form 990	Part X	line 1	10.
	Description of property	(a) Cost or of (investment)	ther basis	(b) Cost of	or other basis ther)	(c)	Accumulated epreciation		ok valu	
1a	Land	.								
b	Buildings			-		752.14	CONTRACTOR SOURCE STATE OF THE			
c	Leasehold improvements									
_	Equipment				28,333		16,397			11,936
A		· L				!	10,337			11,330
d e	Other						į.			

Part VII	Investments-Other Securities			
	Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lin	e 11b. See Form 990, Part X, line 12.
	(a) Description of security or categor (including name of security)	y	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial	derivatives			
(2) Closely-h	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)			· 	
(E) (F)			 	
(G)			-	
(H)			· 	
	b) must equal Form 990, Part X, col. (B) line 12.) ▶		· 	
Part VIII	Investments - Program Relate	d.	<u> </u>	
			rm 990. Part IV. lin	e 11c. See Form 990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)				
(2)			 	
(3)			-	
(4)			 	
(5) (6)			-	
(7)		 		
(8)				
(9)				
	b) must equal Form 990, Part X, col. (B) line 13)			
Part IX	Other Assets.	 		
	Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lin	e 11d. See Form 990, Part X, line 15.
		a) Description		(b) Book value
_(1)				
(2)				
(3)				
(4)				
(5)		_		
(6)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, c	ol. (B) line 15.)		
Part X	Other Liabilities.			
	Complete if the organization ans line 25.	wered "Yes" on Fo	orm 990, Part IV, lin	e 11e or 11f. See Form 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal in	come taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	b) must equal Form 990, Part X, col. (B) line 25.)			
	runcertain tax positions. In Part XIII, prov	ide the text of the foot	note to the organization	n's financial statements that reports the
organization'	s liability for uncertain tax positions under	r FIN 48 (ASC 740). Ch	eck here if the text of	the footnote has been provided in Part XIII

Part	ΧI	Reconciliation of Revenue per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, I			Return.	
1	Total	revenue, gains, and other support per audited financial statements			1	-
2		unts included on line 1 but not on Form 990, Part VIII, line 12:				
			2a	1		
a		unrealized gains (losses) on investments	2b			
b		ated services and use of facilities				
C		overies of prior year grants	2c			
d		r (Describe in Part XIII.)	_2d			
е		lines 2a through 2d			2e	<u> </u>
3		ract line 2e from line 1	· ·		3	
4		unts included on Form 990, Part VIII, line 12, but not on line 1:]		
а			4a			
b	Othe	r (Describe ın Part XIII.)	<u>4b</u>	<u> </u>		
С		lines 4a and 4b			4c	
5	Total	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part	XII	Reconciliation of Expenses per Audited Financial Statem			er Retur	n.
		Complete if the organization answered "Yes" on Form 990, I				
1		expenses and losses per audited financial statements			1	
2		unts included on line 1 but not on Form 990, Part IX, line 25:	1	1		
а		ated services and use of facilities	_2a	<u> </u>		
b	Prior	year adjustments	_2b			
С	Othe	r losses	2c			
d	Othe	r (Describe in Part XIII.)	2d			
е	Add	lines 2a through 2d		· · · · · · · ·	2e	
3	Subt	ract line 2e from line 1			3	
4		unts included on Form 990, Part IX, line 25, but not on line 1:			, .	
а		stment expenses not included on Form 990, Part VIII, line 7b	4a		. P.	
b		r (Describe in Part XIII.)		 		
c		lines 4a and 4b			4c	
5		I expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part		Supplemental Information.				
2; Par	t XI, liı	nes 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part		ovide any additional ii		

Schedule D (Fo		Page 5
Part XIII	Supplemental Information (continued)	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

	e International Inc	20-2299045
Part	General Information on Activities Outside the United States. Complete if the organ	ization answered "Yes" on
	Form 990, Part IV, line 14b.	
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants	and other

	Form 990, Part IV, line	140.					
1	For grantmakers. Does the assistance, the grantees' el	igibility for the	e grants or as	sistance, and the selection	criteria used to award the	, _	
	grants or assistance?					✓ Yes	□No
2	For grantmakers. Describe assistance outside the Unite		the organization	on's procedures for monito	oring the use of its gran	ts and oth	ner
3	Activities per Region. (The fo	ollowing Part	l, line 3 table o	an be duplicated if addition	al space is needed.)		
	(a) Region	(b) Number of offices in the	(c) Number of employees, agents, and	(d) Activities conducted in the region (by type) (such as, fundraising, program services	(e) If activity listed in (d) is a program service, describe specific type of	(f) To expenditu	res for

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) Middle East and North Africa	8	26	Program services	Discipling Ministry	260,330
(2) Middle East and North Africa	8	26	Program services	Supporting Local Churches	232,065
(3) Middle East and North Africa	8	26	Program services	Radio and TV Broadcasting	290,203
(4) Middle East and North Africa	8	26	Program services	Church Planting	6,343
(5) Middle East and North Africa	8	26	Program services	Bible Translation	2,706
(6) Middle East and North Africa	8	26	Program services	Internet Ministry	7,216
(7) Europe	1	1	Program services	Supporting Local Churches	1,000
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	9	27			799,863
c Totals (add lines 3a and 3b)	9	27			799,863

Sched	ule F (Form 990) 201	6							Page 2
Par						United States. Cor in be duplicated if a		nization answered "Ye	es" on Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									,
(2)									

	ļ		<u></u>		 appraisal, other)
(1)					
(2)					
(3)					
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(14)					
(15)					
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~	Enter total number of recipient organizations listed above that are recognized as charities by the r	Oreig	gn c	ountry	, recogniz	en as rax-	exemp	JL
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter						•	•
3	Enter total number of other organizations or entities						•	•

Schedule F (Form 990) 2016

	licated if additional space			т	, ———		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, othe
1) Assist needy Christians	Middle East & N Africa	190	154.186	Cash			
2)							
3)							
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Schedule	_	(Cores	OOO	201	
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Part I	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)		☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).		☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)		☑ No

Schedule F (Form 990) 2016

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I Question 2 - The organization's procedures for monitoring the use of its grants and other assistance outside the United States:
Our staff plus a team of volunteers monitor the issuance of grants to the persecuted or displaced Christians and others that we help in the
Middle East and North Africa They make monthly reports to Endure International's president in the USA to report how the grants were
used that month. The staff and volunteers meet regularly with grant recipients to assess their needs, pray with them, counsel them, and
assist them in other ways
Part I Question 3 - Activities per Region
We have a total of 8 offices and 26 employees in the Middle East and North Africa. While the various offices and employees sometimes
have specialties where they do the bulk of their work, such as Bible translation, they each do all of the five ministry activities at various
times They all work together to minister to the needs of the Christians in the Middle East and North Africa in whatever ways the Lord
presents to us and provides to us the skills and resources that we need
We have 1 office and 1 employee in Europe. Our ministry there is primarily to refugees from the Middle East. It started late in 2016, and
we expect the work with refugees in Europe to increase in 2017 and subsequent years
Part III - Grants and Other Assistance to Individuals Outside the United States
As described in the notes about question 3 in part I, our team of staff and volunteers work with many individuals and families
While we help many of the same people for multiple months, the specific people that we help changes from month to month
We reviewed the monthly reports and believe that 190 is a very close estimate of the total number of individuals and families
to whom we provided grants in 2016.

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(8) (9) (10)

Name of the organization

Employer identification number

Endu	re International, Inc									20-2	22 <u>99</u> 0	45		
Par	Excess Bene Complete if the	fit Transaction ne organization	ns (section 501 answered "Ye	(c)(3), s s" on F	section orm 99	501(c)(4), a 0, Part IV, I	nd 50 ine 25	01(c)(29) orga 5a or 25b, or	nızatıons Form 99	only) 0-EZ,	Part	V, line	40b.	
1	(a) Name of disqualified	person	(b) Relationship between disqualified person and			(d) Con	rected?							
		person		organiza	tion		(c) Description of transaction			Yes	No			
(1)														
(2)														<u></u>
_(3)				_										
_(4)			-											<u> </u>
_ (5)														
_(6)					- .									<u> </u>
2	Enter the amount under section 4958											}		
3	Enter the amount of	of tax, if any, on	line 2, above,	reimbu	ırsed by	the organi	zatio	n			▶ \$	<u> </u>		
Par	Complete if th	l/or From Interne organization eported an amo	answered "Ye	s" on F 990, Pa	form 99 art X, line	0-EZ, Part \(\) e 5, 6, or 22	2. ——	38a or Form		art IV,			_	ritten
\-,		with organization		loan from the principal an organization?					(A) In Delault		by board or committee?		agreement?	
				То	From				Yes	No	Yes	No	Yes	No
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(2)		ļ	ļ	├──	ļ					<u> </u>	<u></u>	<u> </u>		
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Total				L	<u> </u>	L	. •	\$ \$				L		<u> </u>
Part	Grants or As	sistance Beneral constants	fiting Interest	ed Per	sons.						`		L.,	
(a)) Name of interested person		ship between inter-		c) Amount	of assistance	((d) Type of assis	tance	(e) Purpo	ose of a	ssistan	ce
(1)							_		_	 				
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(a) Name of interested	d person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh organi reve	zatıc
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Supplemental Provide addition	nal information	for responses to questions	on Schedule L (see	instructions).	-	
	**					
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SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Employer identification number

Endure International, Inc.	20-2299045
Part III, Line 3 - Completed Program	
For several years Endure International has been translating the Bible into an indigenous language of	North Africa
We completed that translation in 2016, therefore, this is the last year that we expect to have expense	s for that program.
Part III, Line 4d - Other Program Services - Endure International has four program services in addition	to the three
listed in Part III, lines 4a, 4b, and 4c. They are	
1 Internet Ministry: Endure International operates a web site in the Arabic language to teach the wor	rd of God This ministry includes
corresponding with users of the site who request help understanding the meaning of God's word	and how to apply it to their lives
In 2016 the cost of this ministry was \$21,938.	
2 Orphanage Ministry. Endure International had assumed partial sponsorship of a worker at an orph	nanage in Morocco.
That worker has now retired in the USA and is receiving retirement benefits from Endure Internation	onal,
The cost of this ministry in 2016 was \$13,656.	
3. Church Planting Endure International actively supports church planting efforts in a number of Mi	ddle Eastern
and North African countries through local missionaries and staff. A good number of house church	nes and Bible
study cell groups have been formed as a result of these efforts. In 2015 the cost of this ministry w	as \$7,142
4 Bible Translation In cooperation with other Christian ministries, Endure International adopted a p	people group
in a North African country. This includes translating the Bible into their language. We completed t	his translation in 2016.
Therefore, our expenses for the project were much smaller in 2016 than in previous years	
The cost of this ministry in 2016 was \$3,047	
Part VI, Line 2 Thomas King, officer and director, and Leigh King, director, have a family relationship	
Part VI, Line 2 Edward Suffern, officer and director, and Cindi Suffern, director, have a family relationship	hip
Part VI, Line 4 Bylaw Changes - At their November 2016 meeting, Endure International made four changes	ges to the bylaws
1 They modified the Job description for the president.	
2 They added a job description for the chairman of the board.	
3. They added a job description for the treasurer	
4. They modified the provision for changing the bylaws to require approval by three fourths of the	members present, instead of