_{-om} 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2016

Open to Public

Department of the Treasury

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

Inter	mal Revenu	Je Service	► Information about Form 990 and its instructions is at www.ir	rs.gov/torm99	0.	Inspection		
A	For the	2016 cale	ndar year, or tax year beginning January 1st, 2016, and endi	ing Decem	ber 31st	, 20 16		
В	Check if a	applicable	C Name of organization The Haitian Project, Inc.		D Employer identification number			
	Address		Doing business as			22-2700013		
$\overline{\Box}$	Name cha		Number and street (or P O. box if mail is not delivered to street address) Room/s	suite	E Telepho			
$\overline{\Box}$	Initial retu	_	PO Box 6891			401-351-3624		
\exists			City or town, state or province, country, and ZIP or foreign postal code			401-331-3024		
H		n/terminated			• • • • • • • • • • • • • • • • • • • •			
님	Amended		Providence, RI 02940		G Gross re			
ш	Application	I	F Name and address of principal officer Patrick Moynihan, President	I		subordinates? Yes No		
			same as above			s included? Yes No		
<u> </u>	Тах-ехеп	npt status	✓ 501(c)(3)	If "N	o," attach a	list (see instructions)		
J	Website:	<u></u> ► wwv	w.haitianproject.org	H(c) Group	exemption	number ▶		
K	Form of o	rganization [✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form	ation 1986	M State	of legal domicile RI		
Р	art I	Summ	ary		_			
	1	Briefly de	escribe the organization's mission or most significant activities: The H	laitian Project	through i	its support of		
ø		Louvertur	e Cleary School, a free, Catholic, co-educational boarding school in Haiti,	provides for 1	he educa	tion of academically		
ă	1		and motivated students from Haitian families who cannot afford the cost of					
E	1 .	 -	is box ▶□ if the organization discontinued its operations or disposed					
Š	1		of voting members of the governing body (Part VI, line 1a)	01 771070 1710.	3	16		
O ax	1		of independent voting members of the governing body (Part VI, line 1b		4			
S			nber of individuals employed in calendar year 2016 (Part V, line 2a)	,,		15		
Activities & Governance					5	10		
Ę			nber of volunteers (estimate if necessary)		6	50		
×			elated business revenue from Part VIII, column (C), line 12		7a	0		
	b	Net unrel	ated business taxable income from Form 990-T, line 34		7b	0		
Revenue				Prior Ye	ear	Current Year		
	8	Contribut	tions and grants (Part VIII, line 1h) . The property of the pr	,377,682	1,220,794			
	9	Program	service revenue (Part VIII, line 2g)	13,211	5,750			
ě	10	Investme	nt income (Part VIII, column (A), lines-3,-4, and 7d)		18,502	75,306		
æ	11 -	Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) i		0	0		
	1		enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	,409,395	1,301,850		
			nd similar amounts paid (Part IX, column (A), lines 1-3)		0	0		
	1		paid to or for members (Part IX, column (A), line 4)		0	0		
			other compensation, employee benefits (Part IX, column (A), lines 5–10)		654,623	595,121		
Expenses	1		anal fundraising fees (Part IX, column (A), line 11e)		034,023	393,121		
ē	1			Take A. C. Sanga				
Ä				A STATE POLICE	040.050			
	1		penses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u> </u>	618,859	547,168		
	1	•	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		,273,482	1,142,289		
		<u>Revenue</u>	less expenses. Subtract line 18 from line 12	<u> </u>	135,913	159,561		
Net Assets or Fund Balances				Beginning of Cu	rrent Year	End of Year		
Set	20		ets (Part X, line 16)	3	3,254,925	<u>3,489,347</u>		
A P	21	Total liab	ilities (Part X, line 26)		55,733	55,875		
		Net asset	ts or fund balances. Subtract line 21 from line 20		3,199,192	3,433,472		
Pa	art II	Signat	ture Block					
			ry, I declare that bave examined this return, including accompanying schedules and stat			ny knowledge and belief, it is		
tru	e, correct,	, and comple	ete. Declaration of preparer (other than officer) is based on all information of which prepare	er has any knowl	edge.			
Sig	an I	Signa	ature of officer	Da	ite	101.4		
He	-		Marisa Grandin, Treasurer		5	19117		
	-	Type	or print name and title					
				Date	Τ	PTIN		
Pa			Paris a different		Check [
Pr	eparei				self-em	DIOYEC		
Us	e Only			Fim	n's EIN ▶			
	=		ddress >	Pho	ne no			
Ma	iv the IR	> discuss	s this return with the preparer shown above? (see instructions)			☐ Yes ☐ No		

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

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Part	Ш	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	<u> </u>
1		efly describe the organization's mission:		
	The	Haitian Project through its support of Louverture Cleary School, a free, Catholic, co-ec	ducational boarding schoo	l in Haiti,
		vides for the education of academically talented and motivated students from Haitian f		
		Idren's education in order to maximize their potential and enable them to work toward b	building a Haiti where Justic	ce and peace
2	thriv Did	ve. I the organization undertake any significant program services during the year whic	h were not listed on the	
_		or Form 990 or 990-EZ?		☐Yes ☑No
	•	Yes," describe these new services on Schedule O.		
3		I the organization cease conducting, or make significant changes in how it	conducts, any program	
•		vices?		☐ Yes ☐ No
		Yes," describe these changes on Schedule O.		
4		scribe the organization's program service accomplishments for each of its three l	argest program services,	as measured by
	ехр	penses. Section 501(c)(3) and 501(c)(4) organizations are required to report the ar	mount of grants and alloc	cations to others,
	the	total expenses, and revenue, if any, for each program service reported.		
4a	(Cod	ode:) (Expenses \$ 890,861 including grants of \$		5,570)
		Haitian Project, Inc. supports Louverture Cleary School, a boarding school in Port au		
		19 who otherwise could not afford secondary education, and serving 110+ graduates wi		
	sma	all chidren from the school's neighborhood through a early child development_program	on the school's campus.	
				· · · · · · · · · · · · · · · · · · ·
4b	(Co	ode:) (Expenses \$including grants of \$) (Revenue \$	<u> </u>
40				
			·	
4c	(Co	ode:) (Expenses \$including grants of \$) (Revenue \$)
4 -1	O-11	hav avagram convices (Decembe in Schedule O)		
4d		her program services (Describe in Schedule O.) kpenses \$ including grants of \$) (Revenue \$	1	
4e		kpenses \$ including grants of \$) (Revenue \$ tal program service expenses ▶ 890,861	ı	
	. 01	70. F. 23. 20. 23. 100 20F211222 2 030'00 I		

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		/
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		√
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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		1
	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	12a		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	1	Ė
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		▼
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		▼

Part	V Checklist of Required Schedules (continued)									
			Yes	No						
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓_						
þ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b								
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or									
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II									
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on									
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓						
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	}								
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J									
	employees? If "Yes," complete Schedule J									
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		✓						
	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?	24d								
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit									
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓						
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior]								
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, 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	./							
		26	<u> </u>							
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled									
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1						
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21		<u> </u>						
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):									
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1						
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			}						
	Schedule L, Part IV	28b		1						
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	}								
	was an officer, director, trustee, or direct or indirect owner? 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	✓_	ļ						
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified									
	conservation contributions? If "Yes," complete Schedule M	30		✓						
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I]		,						
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		✓_						
JZ	complete Schedule N, Part II	32	}	1						
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		-						
~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	}	1						
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			 						
•	or IV, and Part V, line 1	34	1	1						
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1						
b	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	1						
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]	1						
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>								
-	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1	}							
	Part VI	37)	1						
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and									
	19? Note. All Form 990 filers are required to complete Schedule O.	38	1							

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rail				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
12	Enter the number reported in Pay 2 of Form 1006. Enter 0 of not applicable		res	140
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b		[
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
0-	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
_	Statements, filed for the calendar year ending with or within the year covered by this return 2a 10		-,-	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	√	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	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)?	4a	✓	
b	If "Yes," enter the name of the foreign country: ► Haiti	ŀ		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	ĺ		
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓_
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
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?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	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			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		l
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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:	1		ĺ
а	Gross income from members or shareholders			ł
b	Gross income from other sources (Do not net amounts due or paid to other sources			ļ
	against amounts due or received from them.)			1.
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.			L
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			[
b	Enter the amount of reserves the organization is required to maintain by the states in which			İ
	the organization is licensed to issue qualified health plans			}
¢	Enter the amount of reserves on hand			}
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		Γ .

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S							
	Check if Schedule O contains a response or note to any line in this Part VI			. 🔽				
Secti	on A. Governing Body and Management			<u> </u>				
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 16							
	If there are material differences in voting rights among members of the governing body, or							
	if the governing body delegated broad authority to an executive committee or similar							
	committee, explain in Schedule O.							
р 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 15 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with							
_	any other officer, director, trustee, or key employee?	2		\				
3	Did the organization delegate control over management duties customarily performed by or under the direct			 				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	✓					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5_		√				
6	Did the organization have members or stockholders?	6		✓				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_						
	one or more members of the governing body?	7a		/				
b	stockholders, or persons other than the governing body?	7b		1				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	70		 •				
Ū	the year by the following:	·						
а	The governing body?	8a	1	'				
b	Each committee with authority to act on behalf of the governing body?	8b	✓					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at							
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>				
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	<u>ue Co</u>	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		1				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	.00		 				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		ļ				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	√					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	√	ļ				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<u>✓</u>					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	,	İ				
13	Did the organization have a written whistleblower policy?	13	-	-				
14	Did the organization have a written document retention and destruction policy?	14	7	 -				
15	Did the process for determining compensation of the following persons include a review and approval by							
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	✓_	<u> </u>				
b	Other officers or key employees of the organization	15b		/				
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement							
100	with a taxable entity during the year?	16a		1				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	.00						
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	Ĺ						
	organization's exempt status with respect to such arrangements?	16b						
	on C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed n/a	E011	-\/O\	د اسم				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(₍₎ (3)S	only)				
	✓ Own website ✓ Another's website ✓ Upon request ☐ Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of into	erest r	oolicy	v, and				
•	financial statements available to the public during the tax year.			,,				
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	cords	•					
	Marisa Grondin, Treasurer, The Haitian Project, 650 Ten Rod Road, North Kingstown, RI 02852							

	$\alpha \alpha \alpha$	(201	c١
-OHII	330	1201	e) i

Form **990** (2016)

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

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

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

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

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

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

				- (0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average		(do not check more than one				Reportable	Reportable	(F) Estimated	
Name and Tige	hours per		box, unless person is both an officer and a director/trustee)		compensation	compensation from	amount of			
	week (list any		т—		_		 -	from	related	other
	hours for related	₽₩	ıstıtı	Officer	Key employee	nghe	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ecto	utio	4	dtu	est c	4	(W-2/1099-MISC)	(1, 2, 1990 1, 1997)	organization
	below dotted	١٩Ē	nali		loye) m				and related
	line)	Individual trustee or director	Institutional trustee		ñ) ens				organizations
		"	ee	1		Highest compensated employee	ĺ	ì		
	<u> </u>						_			
(1) Gerald Brauneis	As needed									
Director		✓						0	0	0
(2) Patrick Brun	As needed						İ]		
Director, 1st Vice Chair of the Board	<u> </u>	✓						0	0	0
(3) Elizabeth Bowman	As needed									
Director		✓						0	0	0
(4) John Fiorenza	As needed									
Director, 2nd Vice Chair of the Board		✓						0	o	0
(5) Timothy Flanigan	As needed									_
Director		✓		_				0	o	0
(6) Steve Holmes	As needed				'					
Director		✓						0	0	0
(7) Scott LeGrand	As needed									
Director, Chair of the Board		✓_		_	L.	<u> </u>		0	0	0
(8) M. Aimee Maier	As needed									
Director	<u> </u>	✓			L	<u> </u>		0	О	0
(9) Deacon Patrick Moynihan	40]			[
Director, President		✓_		✓	1	✓	<u>_</u>	75,646	0	17,824
(10) Patricia Newell	As needed				['					
Director	L	✓		L			L_	0	ОО	0
(11) Adam Osielski	As needed				[(
Director, Secretary		/		✓			<u> </u>	0	0	0
(12) Dean B. Reineking, Sr.	As needed									
Director		✓			<u> </u>		L_	0	o	0
(13) James Reulbach	As needed									
Director		✓		<u> </u>	<u> </u>			0	0	0
(14) Brian Rhodes	As needed									
Director		✓						0	o	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
					(0	C)				<u> </u>		
	(A)	(B)				ition			(D)	(E)	(1	F)
	Name and title	Average	١,				than c is both		Reportable	Reportable		nated
		hours per					or/trust		compensation	compensation from	1	unt of
		week (list any hours for	익물	اق	Q	8	en H	Fo	from the	related organizations		her ensation
		related	를	(# I	Officer	y e	ghe	Former	organization	(W-2/1099-MISC)		n the
		organizations	cto	Institutional	7	린	st co	4	(W-2/1099-MISC)			ızatıon
		below dotted	ੇ ਵ	i <u>a</u>		Key employee	duc		İ	Ì		elated zations
		,	Individual trustee or director	trustee		"	Highest compensated employee		1			
		1		ő			ated				1	
(15) FI	en Shackford	As needed									1	
Directo		1	1						lo	1		0
(16) Sr	nith Vioselin	As needed										
Directo			✓						0)	0
(17) M	ark Bowker	40							1	-	1	
Vice P	resident				✓	1			57,879		<u> </u>	17,824
(18) M	risa Grondin	40	1						1			
Treasu	rer		ļ	Ш	✓	V		<u> </u>	51,079)	17,824
(19)			-			ĺ			1			
(00)			├	\vdash	_	-						
(20)			{					ĺ	[
(21)			-		_	-		-	 		 	
<u>12.17</u>]]	
(22)			-		_	_		-	 			
<u> </u>			1					1				
(23)												
3		†]						}			
(24)											1	
J		†	i									
(25)]					
			L			<u> </u>	<u> </u>	L_				
1b	Sub-total								184,604		<u> </u>	53,472
С	Total from continuation sheets to Part						•	•	0)	0
<u>d</u>	Total (add lines 1b and 1c)							<u> </u>	184,604		<u> </u>	53,472
2	Total number of individuals (including bu		d to th	nose	list	ted :	above	e) w	ho received m	ore than \$100,0	000 of	
	reportable compensation from the organ	ization >							0			
3	Did the organization list any former of	ficer direc	tor o	or tr	uet	00	kov o	mr	Novee or high	nest compansat	ted [Yes No
3	employee on line 1a? If "Yes," complete										3	
4	For any individual listed on line 1a, is the							n a	and other comm	nensation from		- • -
•	organization and related organizations											
	individual										. 4	
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	fro	m any	un/	related organi	zation or individ		
	for services rendered to the organization										. 5	1
Section	on B. Independent Contractors											
1	Complete this table for your five highest											
	compensation from the organization. Rep	oort compe	nsatı	on fo	or tl	he c	alend	lar y	year ending wit	th or within the	organizatio	n's tax
	year.											
	(A)	J							(B) Description of s		(C)	
	Name and business add							├-		Services	Compensa	
n/a								\vdash				
								\vdash				
								+				
								-				
	Total number of independent contractor	ors (includii	ng bi	ut n	ot	limit	ted to	th	nose listed ab	ove) who		
_	received more than \$100,000 of compens								0			

Part	VIII	Statement of Reve Check if Schedule O		a rest	onse or note to	any line in this	Part VIII		D
		Onedkii Gonedale G	<u>oomano</u>	<u></u>		(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	3	1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	0				İ
S, G	С	Fundraising events .		1c	0				
Sift lar	d	Related organizations		1d	0			İ	
ş <u>E</u>	е	Government grants (con		1e	0				
ri S	f	All other contributions, gi				İ			
ig g		and similar amounts not incl		1f	1,220,794				
dat	g	Noncash contributions includ	ied in lines 1a	-1f. \$	59,829				
g g	h	Total. Add lines 1a-1	f	<u> </u>		1,220,794			
Je i					Business Code				
šver	2a	2a Student Fees			900099	5,750	5,750	0	0
e R	b								
Σįς	C								
Sei	d	*							
ram	e								
Program Service Revenue	f	All other program sen							
	g	Total. Add lines 2a-2 Investment income				5,750	 1		
	3	and other similar amo		aiviai		44 204	ا		41 201
		Income from investment	•			41,391	0	o	41,391 0
	4				· -	0	0	0	0
	5	Royalties	(i) Real		(II) Personal				<u> </u>
	6a	Gross rents	(7 1.02.	0	0				
	b	Less: rental expenses		0					
	C	Rental income or (loss)		0					
	d	Net rental income or ((loss)			0	0	0	0
1	7a	Gross amount from sales of	(i) Secunt		(ıi) Other				
		assets other than inventory	1,20	2,097	15,411				
	b	Less cost or other basis							
		and sales expenses .	1,18	3,593	o	1			
	С	Gain or (loss)	1	8,504	15,411				
	d	Net gain or (loss) .			▶	33,915	0		33,915
Other Revenue	8a	Gross income from fuevents (not including \$		_0					
æ		of contributions reporte							
Jer		See Part IV, line 18 .							
₹		Less: direct expenses							
		Net income or (loss) f			events .			0	0
	ya	Gross income from ga See Part IV, line 19 .							
		Less: direct expenses							
	b	Net income or (loss) f					0	0	
	_	Gross sales of in	-	-			<u>_</u>		
	100	returns and allowance			اه				
	ь	Less: cost of goods s							
		Net income or (loss) f					0	0	0
	<u> </u>	Miscellaneous F			Business Code		<u>×</u>	_	
	11a	n/a							
	``b	100							
	C								
	d	All other revenue .							
	е	Total. Add lines 11a-	-11d			0			
	12	Total revenue. See	nstructions	s	<u> ▶</u>	1,301,850	5,570	0	
									Form 990 (2016)

Form 990 (2016)

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons				
	t include amounts reported on lines 6b, 7b, , 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	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors,	0	0		
6	trustees, and key employees	196,368	90,057	65,677	40,634
7	Other salaries and wages	311,086	267,281	28,195	15,610
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	311,000	0	0	13,010
9	Other employee benefits	51,181	27,433	15,406	8,342
10	Payroll taxes	36,486	25,512	6,851	4,123
11	Fees for services (non-employees):				
а	Management	. 0	0	0	0
b	Legal	2,281	1,924	357	
C	Accounting	221	0	221	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	13,599	3,630	9,969	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				_
40	- · · ·	5,425	4,535	890	0
12 13	Advertising and promotion	0 20 270	0 612	8,153	0
13	Office expenses	30,270	9,612 1,976	1,098	12,505 37
15	Royalties	3,111	0	1,098	<u>5/</u> 0
16	Occupancy	23,200	16,487	5,734	979
17	Travel	40,914	25,264	9,004	6,646
18	Payments of travel or entertainment expenses	10/013	20,201		
	for any federal, state, or local public officials	o	o	o	0
19	Conferences, conventions, and meetings	2,448	0	1,176	1,272
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization . [30,103	30,103	o_	0
23	Insurance	5,624	653	4,971	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
•	University Scholarship Program	164,020	164,020	0	0
a b	Food	77,009	77,009	0	
C	Facility Maintenance	47,097	47,097	0	0
ď	Community/School Programs & Outreach	30,491	29,427	1,064	
e	All other expenses	71,355	68,841	2,514	
25	Total functional expenses. Add lines 1 through 24e	1,142,289	890,861	161,280	90,148
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2016)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year Cash—non-interest-bearing 35.016 22,537 2 2 86,294 171,307 3 738,429 3 544,470 4 4 277 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 5 99 69 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 0 0 7 Notes and loans receivable, net 492 2,970 Inventories for sale or use 0 8 0 9 9 Prepaid expenses and deferred charges 0 0 Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 1.044.865 465,468 10c 10b b Less: accumulated depreciation 613,949 430,916 Investments—publicly traded securities 1,928,850 11 11 2,317,078 0 12 12 Investments—other securities. See Part IV, line 11. 0 Investments—program-related. See Part IV, line 11. 13 13 0 0 0 14 14 Intangible assets 0 0 15 15 Other assets. See Part IV, line 11 0 3,254,925 16 16 Total assets. Add lines 1 through 15 (must equal line 34). 3,489,347 Accounts payable and accrued expenses 17 17 55,222 55,658 18 0 18 0 0 19 19 0 0 20 20 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 0 21 0 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 0 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 0 0 24 Unsecured notes and loans payable to unrelated third parties . . . 511 24 217 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 0 0 26 Total liabilities. Add lines 17 through 25 55,733 55,875 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 2,010,128 27 2,281,563 347,356 28 28 303,001 841,708 29 848,908 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds. 33 3,199,192 33 3,433,472 3,254,925 3,489,347

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Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			. 🗸
1	Total revenue (must equal Part VIII, column (A), line 12)		1,30	01,850
2	Total expenses (must equal Part IX, column (A), line 25)		1,14	42 <u>,2</u> 89
3	Revenue less expenses. Subtract line 2 from line 1		15	59,56 <u>1</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		3,19	99,1 <u>92</u>
5	Net unrealized gains (losses) on investments			85 <u>,176</u>
6	Donated services and use of facilities			4,771
7	Investment expenses			0
8	Prior period adjustments		_	5,589
9	Other changes in net assets or fund balances (explain in Schedule O)		(2	<u>0,817)</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
D .	33, column (B))		3,43	33 <u>,472</u>
Part	XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII			
1	Accounting method used to prepare the Form 990: Cash Accrual Other		Yes	No
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		-
Lu	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	Za		
	reviewed on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		-
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			_
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
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Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2016

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization 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.

Inspection

Employer identification number

he	Haitian	Project, Inc.					22-27		
	irt I	Reason for Public Char		_				ns.	
he	_	zation is not a private founda		,		•	•		
1		church, convention of church							
2		school described in section							
3		hospital or a cooperative hos						719 F.A. H.	
4		medical research organization ospital's name, city, and state	•	onjunction with a nosp	onal desc	nbea in s	section 170(b)(1)(A)(illy. Enter the	
5	☐ Ar	n organization operated for section 170(b)(1)(A)(iv). (Com	the benefit of a	college or university	owned o	r operate	ed by a government	al unit describ	ed in
6		federal, state, or local govern	•	mental unit described	ın secti o	on 170(b)	(1)(A)(v).		
7	✓ Ar	n organization that normally escribed in section 170(b)(1)	receives a subs	tantial part of its sup				the general p	oublic
8	□ A	community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)				
9	or	n agricultural research organi r university or a non-land-gra niversity:							
10	re su	n organization that normally r ceipts from activities related ipport from gross investment cquired by the organization a	to its exempt fuilt income and uni	nctions—subject to co related business taxal	ertain exc ole incom	ceptions, ne (less se	and (2) no more that ection 511 tax) from	n 331/3% of its	oss
11	☐ Ar	n organization organized and	operated exclus	sively to test for public	safety.	See sect i	ion 509(a)(4).		
12	of	n organization organized and one or more publicly suppo heck the box in lines 12a thro	orted organization	ns described in secti	on 509(a)(1) or se	ection 509(a)(2). Se	section 509	(a)(3).
•	a 🗌	Type I. A supporting organ the supported organization supporting organization. You	(s) the power to	regularly appoint or e	lect a ma	jority of t	÷		ving
(b []	Type II. A supporting organization(s). You must	the supporting o	rganization vested in	the same				
(c 🗆	Type III functionally integ its supported organization(ally integrated	with,
•	di 🗀	Type III non-functionally it that is not functionally integrequirement (see instructionally in	grated. The orga	nization generally mus	st satisfy	a distribu	ition requirement an		
(e 🗆	Check this box if the organ functionally integrated, or 1						e II, Type III	
1		er the number of supported o							
		vide the following information me of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount	
	(i) ivai	ne or supported organization	(11) 2114	(described on lines 1–10 above (see instructions))	listed in you	ur governing ment?	support (see instructions)	(vi) Amount of other support (instructions	see
					Yes	No			
A)									
B)									
C)									
D)									
E)									
ot						 			

Part	Support Schedule for Organization (Complete only if you checked the						
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
Secti	on A. Public Support		-				
Calen	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.")	1,102,744	1,055,114	2,008,334	1,377,682	1,220,794	6,764,668
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	o	o	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	o	o	0	o	0	0
4	Total. Add lines 1 through 3	1,102,744	1,055,114	2,008,334	1,377,682	1,220,794	6,764,668
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						813,108
6	Public support. Subtract line 5 from line 4						5,951,560
	on B. Total Support	· · · · · · · · · · · · · · · · · · ·				T	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 8	Amounts from line 4	1,102,744	1,055,114	2,008,334	1,377,682	1,220,794	6,764,668
	sources	35,964	46,060	45,061	34,744	41,391	203,220
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	o	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	o	o	0	0	0
11	Total support. Add lines 7 through 10						6,967,888
12	Gross receipts from related activities, etc	•	-		L	12	69,423
13 Secti	First five years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	re					
14	Public support percentage for 2016 (line	`		1 column (fl)		14	85 %
15 16a	Public support percentage from 2015 Sci 331/3% support test—2016. If the organi	nedule A, Part I	l, lıne 14 .			15	87 %
	box and stop here. The organization qua	lifies as a publi	cly supported	organization			▶ ☑
b	331/3% support test—2015. If the organithis box and stop here. The organization						•
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization meets the "organization	eets the "facts- facts-and-circu	and-circumsta imstances" te	inces" test, ch st. The organiz	eck this box a atton qualifies	nd stop here. as a publicly s	Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization of Explain in Part VI how the organization of supported organization	ation meets the neets the "fact:	e "facts-and-c s-and-circums	ircumstances" stances" test. 1	test, check t The organization	his box and son qualifies as	t op here. a publicly
1Ω	Private foundation If the organization di						_

Part III	Support Schedule for	Organizations	Described in Section	n 509(a)(2)

(Complete or	ly if you checked the box	on line 10 of Part I or if the organization failed to qualify under Part	II.
If the organiz	ation fails to qualify under	the tests listed below, please complete Part II.)	

Secti	on A. Public Support						
Calen	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			<u></u>]		
_	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	1					
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities	1					
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
_	·		-				
b	Amounts included on lines 2 and 3		1				
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
_	royalties and income from similar sources .		-	_			
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
_	Add lines 10a and 10b		+			l	
11	Net income from unrelated business		 				
• •	activities not included in line 10b, whether		İ				
	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,		1				
	and 12.)						
14	First five years. If the Form 990 is for the						
	organization, check this box and stop he				<u> </u>		<u> ▶ □</u>
	on C. Computation of Public Suppor		_	0		145	
15 16	Public support percentage for 2016 (line 8						%
16 Secti	Public support percentage from 2015 Sci on D. Computation of Investment In			· · · · ·	• • • • •	10	<u>%</u>
17	Investment income percentage for 2016 (v line 13. coliu	mn (fl)	17	%
18	Investment income percentage from 2015						
19a	331/3% support tests—2016. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2015. If the organiz		-			_	
	line 18 is not more than 331/3%, check this	box and stop h	nere. The organ	ization qualifies	as a publicly s	upported organ	nization 🕨 📋
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions 🕨 🗌

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.)

ecu	on A. All Supporting Organizations	- т		
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
•	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.	1		,
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	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.			
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).	4c		
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		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (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 .	6		
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.)	10a		

Part	V Supporting Organizations (continued)	_		
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
L	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above? 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.	11b 11c		
	on B. Type I Supporting Organizations	110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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	_	
Secti	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).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	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).	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.			
Secti	on E. Type III Functionally Integrated Supporting Organizations	3		
1				
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstru	ctions	5).
a b	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ 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 (s	see in:	structi	ions)
		••••		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			ĺ
	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.	0.		
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b		
о a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		ļJ
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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

Part	Type III Non-Functionally Integrated 509(a)(3	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	rted	
	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 which	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.	J	· · · · ·	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			· - · · · ·
		-	(ii)	(iii)
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
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:			
а				
b				
C	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	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:			
а				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			
е	Excess from 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)

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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Name of the organization Employer identification number The Haitian Project, Inc. 22-2700013 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 4 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Schedul	le D (Form 990) 2016					Page 2
Part	III Organizations Maintaining	Collections of	Art, Historical	Treasures, or O	ther Similar Ass	ets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and oth	ner records, chec	ck any of the follow	wing that are a sig	inificant use of its
а	☐ Public exhibition		d Loan	or exchange prog	rams	
b	Scholarly research		e 🗌 Othe		·	
С	Preservation for future generations	3				
4	Provide a description of the organizat XIII.		ind explain how t	they further the Org	ganization's exem	ot purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather					
Part	IV Escrow and Custodial Arra	ingements.				
	Complete if the organization	answered "Yes"	on Form 990,	Part IV, line 9, or	reported an amo	ount on Form
	990, Part X, line 21.					
1a	Is the organization an agent, trustee,				r other assets not	
	included on Form 990, Part X?					☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following t	able:		
					Am	nount
C	Beginning balance			10	;	
d	Additions during the year			10	ı	
е	Distributions during the year			16	•	
f	Ending balance			11	f	
2a	Did the organization include an amour	nt on Form 990, Pa	art X, line 21, for e	escrow or custodia	I account liability?	☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	of the explanation	n has been provid	ed on Part XIII .	<u> </u>
Par						
	Complete if the organization		' on Form 990,			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,928,850	1,684,309	1,331,939	1,224,889	1,085,642
b	Contributions	311,595	401,959	384,861	3,357	10,339
C	Net investment earnings, gains, and				,	
	losses	142,510	(72,601)	41,184	166,553	140,619
d	Grants or scholarships		(10,000)	(10,000)	0	0
е	Other expenditures for facilities and					
	programs	(60,000)	(60,000)	(50,000)	(50,000)	0
f	Administrative expenses	(13,239)	(14,817)	(13,675)	(12,860)	(11,711)
g	End of year balance	2,309,716	1,928,850	1,684,309	1,331,939	1,224,889
2	Provide the estimated percentage of t	he current year en	d balance (line 19	g, column (a)) held	as	
а	Board designated or quasi-endowmer	nt ▶	<u>6</u> %			
b	Permanent endowment ▶	24%				
С	Temporarily restricted endowment ▶	0%				
	The percentages on lines 2a, 2b, and					
3a	Are there endowment funds not in the	e possession of th	e organization th	at are held and ac	iministered for the	
	organization by:					Yes No
	(i) unrelated organizations					3a(i) ✓
	(ii) related organizations					3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related of					3b
4	Describe in Part XIII the intended uses		n's endowment f	funds.		
Part	VI Land, Buildings, and Equip					
	Complete if the organization	answered "Yes'	' on Form 990,	Part IV, line 11a.	See Form 990, I	art X, line 10.
	Description of property	(a) Cost or oth	1,,,	1 , ,	Accumulated lepreciation	(d) Book value
1a	Land		67,242	0	174	67,242
b	Buildings		694,459	0	480,405	214,054
c	Leasehold improvements		0	0	0	0
d	Equipment		251,365	0	101,745	149,620
е	Other	<u> </u>	31,800	0	31,800	0
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99		n (B), line 10c.) .	•	430,916

Part VII	Investments—Other Securities. Complete if the organization answered	"Vee" on Form	n 990 Part IV lin	e 11h See Form	990 Part V line 12
	(a) Description of security or category	1es on Fon	(b) Book value		hod of valuation
	(including name of security)		(b) book value		of-year market value
(1) Financial	derivatives	[
	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 Related.				·
- GIT CITI	Complete if the organization answered	"Yes" on Form	n 990. Part IV. Iin	e 11c. See Form	990 Part X line 13
	(a) Description of investment	100 0111 011	(b) Book value		hod of valuation
	(4)		(12)		of-year market value
_(1)		_			
(2)		_			
(3)	- 1				
(4)		·			
(5)				,	
(6)	· ·				
(7)					
(8)	<u>. </u>				
(9)					
	b) must equal Form 990, Part X, col (B) line 13.) ▶				
Part IX	Other Assets.	"\\	- 000 D-+ N/ E-	. 44 4 0	000 5 1 7 1 15
· · · · · · · · ·	Complete if the organization answered (a) Descrip	_	n 990, Part IV, Ilne	e 11a. See Form	(b) Book value
(4)	(a) Descrip	PRIOTI			(b) Book value
<u>(1)</u> (2)					
(3)					
(4)					
(5)				-	
(6)			·		
(7)			· .	- <u>-</u>	
(8)					
(9)			··		
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) li	ine 15.)		.	
Part X	Other Liabilities.				
	Complete if the organization answered	"Yes" on Forr	n 990, Part IV, Iind	e 11e or 11f. See	Form 990, Part X,
	line 25.				<u></u>
1.	(a) Description of liability	(b) Book value			
(1) Federal in	come taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(8)	ı		1		
(8)					
(9)	b) must equal Form 990, Part X, col. (B) line 25) ▶				

Pari	•		r Return.	
	Complete if the organization answered "Yes" on Form 990,		T 4 T	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا م ا		
a b	Net unrealized gains (losses) on investments	2a 2b	-	
	Recoveries of prior year grants		-	
c d	Other (Describe in Part XIII.)		-	
u e			 	
3	Add lines 2a through 2d		2e 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		3	
a	Investment expenses not included on Form 990, Part VIII, line 7b	10		
a b	Other (Describe in Part XIII.)		-	
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Part				· · · · · · · · · · · · · · · · · · ·
	Complete if the organization answered "Yes" on Form 990,		or riotarii	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		•	
_ a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	╡	
C	Other losses		1	
d	Other (Describe in Part XIII.)		7	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)		7	
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5	-
Part	XIII Supplemental Information.			
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and			art X, line
2; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional	nformation.	
Part V	Line 4:	•••••		
The Ha	itian Project, Inc. has three invested accounts: The Board-directed 'General E	ndowment' was established	to support the Pro	ject's
perat	ing expenses. Distributions from this endowment can only be made if the princ	cipal is \$1 million or more.	he separate 'Post-	Graduate
Suppo	rt Endowment' was established to support scholarships for university for alum	ni of the school in Haiti. Th	e principal of this	endowment
s perr	nanently restricted. Distributions from this endowment can only be made if the	principal is over an establi	shed threshold. Th	e third
nvest	ed account is an operating reserve established in 2014. Separate investment p	olicy statements govern the	three invested ac	counts.
nvest	ments are overseen by a Board committee and managed by a professional ass	et management company.		·
				•••••

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2016

Open to Public

Department of the Treasury Internal Revenue Service

▶ 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.

Inspection

Maine (i the organization				-	imployer identification number
The H	aitian Project, Inc.					22-2700013
Par	General Information Form 990, Part IV, line		es Outside	the United States. Comp	olete if the organiza	ition answered "Yes" on
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	igibility for the	e grants or as	sistance, and the selection		
2	For grantmakers. Describe assistance outside the Unite		he organizati	on's procedures for moni	toring the use of	its grants and other
3	Activities per Region. (The fo	ollowing Part I	, line 3 table o	can be duplicated if addition	nal space is needed	(.t
	(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 i a program servi describe specific t service(s) in the re	ce, expenditures for ype of and investments
(1)	Haiti	1	75	Program Services	Boarding School	890,861
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
	Sub-total	1	75			890,861
	sheets to Part I	0	0			0
C	Totals (add lines 3a and 3b)	l 1 ∃	75		· 	890 861

nd Other Assistance to Organizations ne 15, for any recipient who received ന	Page 2	e if the organization answered "Yes" on Form 990,	onal space is needed.
hedule art I	Schedule F (Form 990) 2016	art II Grants and Other Assistance to Organizations or Entities Outside the United Sta	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplic

-	(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)
Ξ									
(2)					:				
(3)									
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(2)									
(9)									
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<u>ම</u>									
(10									
Ξ									
(12)									
(13)									
(45									
(12)									
(16)									
84	Enter total nun	nber of recipier	Enter total number of recipient organizations listed above that		ognized as charitie	are recognized as charities by the foreign country, recognized as tax-exempt	ıtry, recognized as ta	ax-exempt	
က	Enter total nun	nber of other or	by the rips, or for which the grantee of counser has provided a Enter total number of other organizations or entitles		section 30 (c)(s) equivalency letter				

Schedule F (Form 990) 2016

Schedule F (Form 990) 2016

린				11 3: 11 1		T = 700	Page 3
Part III Part III can be duplicated	Grants and Omer Assistance to Individuals Outside Part III can be duplicated if additional space is needed.	als Outside t e is needed.	ine United State:	s. Complete if the	organization answ	Grants and Omer Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line.16. Part III can be duplicated if additional space is needed.), Part IV, line 16.
(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, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(9)		-					
ω							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)				;			
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2016

Schedule F (Förm 990) 2016	Sch	redule	F	(Fòrm	990	2016
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Page	4

Part I	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Ye the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Fore Corporation (see Instructions for Form 926)	eign	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizational may be required to separately file Form 3520, Annual Return To Report Transactions With Fore Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Fore Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990).	eign	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Ye the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect Certain Foreign Corporations (see Instructions for Form 5471)	То	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company of qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 86 Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Elect Fund (see Instructions for Form 8621).	21, ting	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Ye the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Cert Foreign Partnerships (see Instructions for Form 8865)	tain	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year "Yes," the organization may be required to separately file Form 5713, International Boycott Report (some structions for Form 5713; do not file with Form 990)	see	☑ No

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Pai	₹ V	Г	S	up

_			
Supp	lemental	Intorn	nation

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, Line 3, column (f)
All expenditures. Accrual accounting method.
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······································
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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/form.990.

OMB No. 1545-0047 6

Department of the Treasury Internal Revenue Service

Vame o	f the organization							E	mploy	er ide	ntificat	ion nu	mber		
	nitian Project, Inc.						_					27000	13		
Part			ns (section 501 answered "Yes										V, line	40b.	
1	(a) Name of disqualified	person	(b) Relationship between disqualified person and			(c) Description of tran			neaction		(d) Core	ected?			
<u> </u>	(a) Name of disqualmed	person		organiza 	tion			(C) Desc	праог	i Oi uai	ISACIO			Yes	No
(1)			· · · · · · · · · · · · · · · · · · ·									_			
(2)							ļ		_						
(3)	<u> </u>					_									
(4)							L		_						
(5)							-								
(6)	F.1. II		11. 41.				1.5					_			
2	Enter the amount under section 4958		by the organ		_		qualiti	ea person:	s aur	ing t	ne ye !	ar ▶ g	}		
3	Enter the amount of	f tax, if any, on	line 2, above,	reimbi	ırsed by	the organi	ızatıor	n			1	▶ \$	5		
Part	Loans to and		rested Persons		_										
	Complete if th	e organization	answered "Yes ount on Form 9	s" on F	form 990	0-EZ, Part	V, line	38a or For	m 99	0, Pa	ırt IV,	line 2	6; or i	f the	
	organization re	eporteo an am	ount on Form 8	90, Pa	171 A, 11/16	e 5, 6, or 2	۷. ——¬								
(a) Na	rme of interested person	(b) Relationship	(c) Purpose of		an to or	(e) Origir		(f) Balance	due	(g) In o	default?				ritten
		with organization	on loan 1		from the principal an organization?		nount					by board or committee?		ment?	
					т										
(4)			 :	То	From					Yes	No	Yes	No	Yes	No
	Marisa Grondin	Treasurer	Expens Reimb		/		69		69	-	 	-	1		✓_
(2)							-				 -	<u> </u>	-	<u> </u>	
(3)		-	-				_				 				
(4) (5)					+					 	 	 	ł		
(6)					 										
(7)		<u> </u>	1		<u> </u>						 	-			
(8)													-		
(9)			<u> </u>												
(10)															
Total		<u> </u>					.▶	\$	69						
Part	Grants or Ass		fiting Intereste					_							
	Complete if th	e organization	answered "Yes	s" on F	orm 990	0, Part IV, I	ine 27	<u>. </u>							
(a)	Name of interested persor	1	ship between intere and the organizatio	1 -	c) Amount	of assistance	(d) Type of ass	istance	е	(e)) Purpo	se of a	ssistan	ce
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)											L				
(8)					-		<u> </u>				ļ				
(9)					_		ļ				ļ				
(10)											L				

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	<u> </u>	zation nues?
				-	Yes	No
					+	-
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						<u> </u>
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V	Supplemental Information	<u></u>				
	Provide additional informatio	n for responses to questions	on Schedule L (see	ınstructions).		
						_
		•••				
		·				

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2016

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

v.irs.gov/form990. Inspection
Employer identification number

The Ha	nitian Project, Inc.					22-27000	13		
Part	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash cont amounts repo Form 990, Part \	rted on	Method o			
1	Art-Works of art								
2	Art—Historical treasures								
3	Art—Fractional interests					1			
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property						_		
9	Securities—Publicly traded	✓	6		46,884	Market			
10	Securities—Closely held stock .				_				
11	Securities-Partnership, LLC,	<u>'</u>							
	or trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation								
	contribution—Historic								
	structures								
14	Qualified conservation contribution—Other								
15	Real estate - Residential			· · · · · · · · · · · · · · · · · · ·		·			
16	Real estate—Commercial						_		
17	Real estate—Other						_		
18	Collectibles								
19	Food inventory		34		4,342	Cost			
20	Drugs and medical supplies		· · · · · · · · · · · · · · · · · · ·						
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts	<u> </u>							
25	Other ► (Diesel)	✓	24		3,010				
26	Other ► (Janitorial Supplies)	✓	11		2,473				
27	Other ► (School Supplies)		4		3.120	Cost, Estima	tion		
<u>28</u> 29	Other ► () Number of Forms 8283 received	by the or	ranization during the tax i	year for contribu	itions for	- 			
29	which the organization completed				וטו פווטווא	29	•		
	whom the organization completed	7 0 0200	,, , a., , , , , , , , , , , , , , , , ,	agomorni		29	0	Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	arty reported in I	Part I lines	1 through	$\overline{}$		
Sua	28, that it must hold for at least the						1 1		
	to be used for exempt purposes if						30a		1
b	If "Yes," describe the arrangemen						302		_
31	Does the organization have a		stance policy that require	es the review	of any no	nstandard			
٥.	contributions?	g 4000					31	/	لــــــــــا
32a	Does the organization hire or use	e third part	ies or related organization	s to solicit, pro-	cess. or se	ell noncash	┟┷╫	•	\vdash
-=4	contributions?	•	_				32a		1
ь	If "Yes," describe in Part II.			•	- •			-	- ` -
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which o	column (a) i	s checked,			

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

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016
Open to Public

Inspection

Employer identification number

The Haitian Project, Inc. 22-2700013 Part VI, Section A, Line 4: Significant changes to governing documents a. Amended the 'Executive Committee' section of the bylaws to add to its duties to attend to responsibilities pertaining to partner foundations in Haiti. Also amended membership of this committee to include Chairs of standing committees only if they are members of the Board. b. Amended the 'Investment Committee' section of the bylaws to remove the requirement that the Chair of this committee be a member of the Board. Pertains to this specific committee only. Part VI, Section B, Line 11b: Reviewing the Form 990 The Form 990 is reviewed by the organization's Finance Committee Chair. Then it is circulated to the entire Board of Directors for review. Once finalized following this review by the Board, it is signed by the Treasurer and filed. Part VI, Section B, Line 12c: Monitoring & enforcing the Conflict of Interest Policy The Haitian Project's Conflict of Interest Policy provides for the signing of annual statements by Directors, Officers and Committee Members with governing powers stating that each such person "(a) has received a copy of the conflicts of interest policy, (b) has read and understands the policy, (c) has agreed to comply with the policy, and (d) understands the Project is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes." In addition, the Policy provides for periodic reviews "To ensure the Project operates in a manner consistent with charitable purposes and does not engage in activities that could jeopardize its tax-exempt status, periodic reviews shall be conducted. The periodic reviews shall, at a minimum, include the following subjects: (a) Whether compensation arrangements and benefits are reasonable, based on competent survey information, and the result of arm's length bargaining, and (b) whether partnerships, joint ventures, and arrangements with management organizations conform to the Project's written policies, are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not result in inurement, impermissible private benefit or in an excess benefit transaction." The Policy allows for use of outside experts, however "their use shall not relieve the governing board of its responsibility for ensuring periodic reviews are conducted." Part VI, Section B, Line 15a: Determining Compensation Search Committee is formed, professional headhunter is consulted, comparison to other organizations. From the organization's bylaws:

SECTION 11.04. Contract, etc., How Executed. Except for contracts to be performed in Haiti which may be executed and delivered by the

Page	2

Name of the organization .		Employer identification number
President on behalf of the Project, or as otherwis	e determined by the Board of Directors, any two of th	e following: the Chair, the Vice
	he Secretary or the Treasurer, may enter into any con	
	uch is not otherwise specifically provided for, in the r	
	rided in these by-laws, may authorize any other or add	
	or execute and deliver any contract or other instrumer	
	nfined to specific instances. Unless authorized to do	
	e any power or authority to bind the Project by any c	
its credit, or to render it liable pecuniarily for any		
Part VI, Section C, Line 19: Making documents availa	ble to the public	
	documents, written policies and financial statements	to the Board of Directors and staff
	tements contained in the organization's yearly public	
	documentation upon request. Annual financial report	
	nent Destruction Policy, and Whistleblower Policy are	
,	, <u></u>	P
Part XI, Line 9: Other changes in net assets or fund b	alances	
In-Kind Expenses (17,		
	.100)	
	1)	
	817)	
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	•	