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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047 2016

Open to Public

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection

Α	For the 20	016 calendar year, or tax year beginning <u>January 1</u> , 2016, and en	ding <u>Decei</u>	nber 31	, 20 ₁₆		
В	Check if ap	plicable C Name of organization Research and Business Development Center Inc.		D Employ	er identification number		
	Address ch			27-3465046			
	Name chan		/suite	E Telepho	ne number		
	Initial return		145		208-356-5009		
$\overline{\Box}$	Final return/to	1710					
$\overline{\Box}$	Amended re			G Gross re	eceipts \$ 1,020,268.26		
一	Application		H(a) is this a c		subordinates? Yes No		
_	Application	310 N. 2nd East Ste. 145 Rexburg, ID 83440			s included? Yes No		
	Tax-exemp				a list (see instructions)		
'	Website: ▶			exemption			
K R		anization ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of for			of legal domicile ID		
		Summary	mation 2014	IN State	or legal dornicile 1D		
		riefly describe the organization's mission or most significant activities: The	organizations	missian is	to promote mentered		
Ф		-					
Activities & Governance		search experiences for students in SE Idaho, to promote scientific research, and	a to promote pi	actical ap	plications of new		
Ē		chnology.		050/ -4			
Ş		heck this box \blacktriangleright if the organization discontinued its operations or dispose	a or more mai	1 1	_		
Ŏ		umber of voting members of the governing body (Part VI, line 1a)		3	8		
S		umber of independent voting members of the governing body (Part VI, line 1	D)		8		
ij		otal number of individuals employed in calendar year 2016 (Part V, line 2a)		5	0		
ફ		otal number of volunteers (estimate if necessary)		6	375		
⋖	L	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0		
	b N	et unrelated business taxable income from Form 990-T, line 34	· · · · ·	7b	0		
			Prior Y		Current Year		
ē	ı	ontributions and grants (Part VIII, line 1h)	1	35,540.95	151,790.41		
ē	1	rogram service revenue (Part VIII, line 2g)	8	23,571.75	868,477.85		
Revenue		vestment income (Part VIII column (A) lines 3, 4, and Zd)		0			
_		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	. 0				
		otal revenue—add lines 8 through 11 (must equal Part VIII; column (A), line 12)	9	59,112.70	1,020,268.26		
	13 G	rants and similar amounts paid (RartyX, column(A), linesj1-3)		30,016.00	70,650.00		
		enefits paid to or for members (Part IX, column (A), line 4)					
es	1	alaries, other compensation employee benefits (Part IX, column (A), lines 5-10)	6	41,743.46	614,272.98		
Š		rofessional fundraising fees (Part([X, Column (A), Unit 11e)					
Expenses	b To	otal fundraising expenses (Part IX, column (D), line 25)					
Ш	17 O	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2	65,756.16	268,399.03		
	18 To	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9	37,515.62	953,322.01		
		evenue less expenses. Subtract line 18 from line 12		21,597.08	66,946.25		
5 g	l		Beginning of C	urrent Year	End of Year		
Net Assets or Fund Balances	20 To	otal assets (Part X, line 16)	2	64,278.68	195,065.96		
d As	21 To	otal liabilities (Part X, line 26)	1	54,875.71	18,716.74		
žŝ		et assets or fund balances. Subtract line 21 from line 20	1	09,402.97			
Pa	art II	Signature Block					
		s of perjury, I declare that I have examined this return, including accompanying schedules and st			my knowledge and belief, it is		
tru	e, correct, a	nd complete Declaration of preparer (other than officer) is based on all information of which prep	arer has any know	ledge			
		Tils lebest					
Sig	gn J	Signature of officer	D	ate	1 -1 -		
He	re	Taylor Woods, Treasurer		5/	15/17		
		Type or print name and title					
Pa	id	Print/Type preparer's name Preparer's signature	Date	Check	T if PTIN		
	eparer			self-em			
	-	Firm's name	Fin	m's EIN ▶			
Use Only		Firm's address ▶		one no			
Ма	y the IRS	discuss this return with the preparer shown above? (see instructions)		. <u>.</u> .	· · · Yes No		
For	Paperwo	rk Reduction Act Notice, see the separate instructions.	at No 11282Y		Form 990 (2016)		

01111	1 age =
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Research and Business Development Centers mission is to provide mentored research and other learning experiences to students in
	SE Idaho, promote scientific research, technology development, and promote proctical applications of new technology. This is
	accomplished by creating dynamic mentored project opportunities, expanding collaboration, enabling existing entities to increase
2	productivity, helping to establish and develop new programs, linking projects and funding, and helping area businesses and start-ups Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 173,337.37 including grants of \$) (Revenue \$)
	We provide hands-on learning experiences as well as practical application of new technology for students studying in the fields
	of computer information technology, computer science, english, statistics, and other non scientific majors in the Southeast Idaho
	Region.
4b	(Code:) (Expenses \$ 297,781.56 including grants of \$ 120,290.41) (Revenue \$)
	We provide mentored research and promoted scientific research for students in the fields of agriculture, health science, geology,
	connecting students with private industry partners for applied learning projects.
	<u></u>
	(Code:) (Expenses \$ 227,533.64 including grants of \$ 31,500.00) (Revenue \$)
	-We provide mentored learning opportunities for students studying in the fields of economics, business and communications by
	connecting students with private industry partners for applied learning projects.
	Other pregram convece (Decembe in Cabadula C.)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 698,652,57
-10	lotal program service expenses F 698,652.57

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Part i	V Checklist of Required Schedules			
_	In the expension decembed in each of 501/5/20 on 4047/5/41 (abb a three transition of the sale of the		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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<u> </u>
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</i> "Yes," <i>complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	-	1
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? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	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, VIII, IX, or X as applicable.	10		V
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	_	→
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
đ	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	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		 √
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
		Forr	n 990	(2016)

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Part	Checklist of Required Schedules (continued)			
	Dalaharan arang kanang arang kanang kanang kalang kalang kanang k		Yes	No
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a 20b		-
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			-
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		√
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		1
25a		25a		√
þ	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	26		1
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	07		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	27		
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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		✓
33	complete Schedule N, Part II	32		1
	sections 301.7701-2 and 301.7701-3?-If "Yes," complete-Schedule-R, Part-I	33		7 -
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
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 controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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>		† <u>-</u> -
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	

P <u>a</u> rt				
	Check if Schedule O contains a response or note to any line in this Part V	· ·		V
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 1		1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
22		1c		
2a			ļ	
ь	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2b		
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		$\neg \uparrow$	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		İ	
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a		5a	-	✓_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	\rightarrow	✓_
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	\dashv	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		ŀ	,
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	\dashv	<u> </u>
U	qifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).		_	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		l	
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	_	<u> </u>
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	\rightarrow	✓_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	\rightarrow	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	\dashv	√
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	\rightarrow	<u>√</u>
9 a	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		√
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	\dashv	-
10	Section 501(c)(7) organizations. Enter:	"		-
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public-use of club-facilities	1		}.
11	Section 501(c)(12) organizations. Enter:	1 1		
а	Gross income from members or shareholders			ĺ
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	<u> </u>		
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			İ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	+	 i
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\dashv	<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	\dashv	-
			990	(2016)

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	ee ins	truct	ions.
Section	on A. Governing Body and Management	<u>· · · </u>	<u> </u>	<u> </u>
OCCL	on A. Governing Body and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. 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			
ь	committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . 1b 8	İ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	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? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		V
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_		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	√	ļ
р	Each committee with authority to act on behalf of the governing body?	8b	✓_	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	oae./) Ala
10a	Did the erganization have lead charters branches or effiliates?	10a	163	No /
	Did the organization have local chapters, branches, or affiliates?	10a		_
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
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	1	i
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
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	_	1
13	Did the organization have a written whistleblower policy?	13		✓
14	Did the organization have a written document retention and destruction policy?	14		/
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?		<u>-</u> !	
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b	ļ 	1
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			
	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 participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	40)		
Secti	on C. Disclosure	16b	L	Ь
17	List the states with which a copy of this Form 990 is required to be filed lidaho			
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(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	policy	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	: ▶	
	Research and Business Development Center 310 N. 2nd East Ste. 145 Revburg. ID 83440 Taylor Woods			

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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 no	r any relate	d org	anız	atic	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
	hours per	box, unless person is both an officer and a director/trustee)						compensation	compensation from	
	week (list any hours for	오코	ᆵ	Q	<u>چ</u>	3.7	Γъ	from the	related organizations	other compensation
	related	Individual trustee or director	i i	Officer	Key employee	ples	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	당교	tion		l bk	e c	~	(W-2/1099-MISC)		organization
	line)	ੋੜ੍ਹ	altr) ye	ğ		į		and related organizations
	,	tee	Institutional trustee	1	"	Highest compensated employee				3
			•			fed.				
(4) Tanka Was da	40									
(1) Taylor Woods	40			1				70 400 50		
Secretary and Treasurer (2) Corey Smith	30		\vdash	_	-		_	72,439.52		
(2) Corey Smith President, Executive Director	30	1		1				6 725 57		
(2) 1111-16	30		 	 •	-			6,735.57		
President, Executive Director	30	1		1						
(4) Phillip Wheatley			 	Ť				 	 	
Chairman		1						ŀ		
(5) Randy Bauscher		<u> </u>					 	 	 	
Director		1								
(6) Sharon Berrett										
Director		✓								
(7) Robert Pothier		-								
Director		✓								
(8) Todd Stevens				=	_					
Director		✓								
(9) Larry Chilton										
Director		✓								
(10) Marc Skinner										
Director		✓_					_			
(11) Dan Moore						ĺ		ŀ		
Director		\			L		<u>L</u>			
(12)							[!		
				L_						
(13)								1		
			_	L_	lacksquare					
(14)	ļ						Ī			
			1 1	I	1		1	İ	1	

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title		(B) Average box, unless person is both officer and a director/trus					an tee)	(D) Reportable compensation from	(E) Reportable compensation related		Estin	unt of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatior (W-2/1099-Mi		from organ and re	nsation the ization	
(15)														
(16)														
(17)														
(18)														
(19)												_		
(20)			_				_							
(21)								_						
(22)														
(23)			-											
(24)												_		
(25)												_		
1b c d	Sub-total	VII, Sectio		•				> > >	79,175.09 79,175.09					
2	Total number of individuals (including bur reportable compensation from the organic	not limited					above	e) w		ore than \$10	00,000	f		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc							oloyee, or high	-		3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th										4		√
- 5 -	Did-any-person-listed on line 1a receive of for services rendered to the organization											5		√
	n B. Independent Contractors					_								
1	Complete this table for your five highest compensation from the organization. Repyear.												n's ta	x
	(A) Name and business add	lress							(B) Description of s	ervices	Co	(C) ompens	ation	
								+-			<u> </u>			
								_						
2	Total number of independent contractor received more than \$100,000 of compens							L_ o th	nose listed ab	ove) who				

Par	VIII						
		Check if Schedule O contains a res	ponse or note to			<u></u>	
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats its	1a	Federated campaigns 1a					
ar our	b	Membership dues 1b		1]		
s, G Am	С	Fundraising events 1c		ĺ			
Gift lar,	d	Related organizations 1d			Ì		
im.	е	Government grants (contributions) 1e	·		ļ		
tior S r	f	All other contributions, gifts, grants,		}			
흋		and similar amounts not included above 1f	151,790.41				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f. \$			ļ		
	<u>h</u>	Total. Add lines 1a-1f		151,790.41			
Ę			Business Code				
eve	2a	Research Services Revenue	541900	868,477.85	868,477.85		
ë	b						
Ξ̈́	C.		<u> </u>				
လို	d					_ 	
Ta Ta	e l 4	All other program control revenue					
Program Service Revenue	g	All other program service revenue. Total. Add lines 2a-2f	•	000 477 05			
	3	Investment income (including divid		868,477.85			<u> </u>
	•	and other similar amounts)		o			
	4	Income from investment of tax-exempt be	.	0			
	5	Royalties		0			
		(i) Real	(II) Personal				
	6a	Gross rents		Ì	Ì		
	ь	Less: rental expenses					
	С	Rental income or (loss)		i			
	d	Net rental income or (loss)	. <u>.</u> . <u>.</u> >	0			
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory					
	b	Less. cost or other basis	į				
		and sales expenses		ĺ			
	С	Gain or (loss)					
	d	Net gain or (loss)	<u> </u>	. 0			
eune	8a	Gross income from fundraising events (not including \$			İ		
Other Rever		of contributions reported on line 1c).					
je i		See Part IV, line 18 a					
δ		Less direct expenses b					[
	1	Net income or (loss) from fundraising Gross-income from gaming-activities:	events . >	0			
	3a-	See Part IV, line 19 a					
	۱ ۾	Less: direct expenses b		ĺ			
		Net income or (loss) from gaming acti		0			
		Gross sales of inventory, less					
		returns and allowances a					
	ь	Less: cost of goods sold b					
		Net income or (loss) from sales of inve		0			
	<u>-</u> -	Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d		0			
	12	Total revenue. See instructions	▶ [4 000 000 00	000 477 00		

	00 (2016)				Page 10						
	IX Statement of Functional Expenses										
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).											
Do no	Check if Schedule O contains a response or note to any line in this Part IX										
8b, 9b	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses						
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.										
2	Grants and other assistance to domestic individuals. See Part IV, line 22										
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	70,650.00	70,650.00								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	79,175.09	0	79,175.09							
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			1							
7 8	Other salaries and wages	487,322.78	383,019.69	104,303.09							
9	Other employee benefits										
10	Payroll taxes	47,775.11	32,179.43	15,595.68							
11	Fees for services (non-employees).				,						
а	Management										
b	Legal	25.00	0	25.00							
C	Accounting										
d	Lobbying				<u> </u>						
e f	Investment management fees										
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)										
12	Advertising and promotion	5,092.11	3,930.52	1,161.59							
13	Office expenses	5,200.79	2,430.18	2,770.61							
14	Information technology	10,886.61	2,292.20	8,594.41							
15 16	Royalties										
17	Travel	6,187.70	3,606.79	2,580.91							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials										
19	Conferences, conventions, and meetings .										
20	Interest										
21	Payments to affiliates										
22	Depreciation, depletion, and amortization .										
-23	Insurance										
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.)										
а	Contract Payments	89,763.30	89,763.30	0							
b	Miscelaneous	5,068.09	4,259.11	808.98							
C											
d	All other evenesses										
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	146,175.43	106,521.75	39,653.68							
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	953,322.01	698,652.97	254,669.04							
	following ŠOP 98-2 (ASC 958-720)				1						

Р	art X	Balance Sheet		_	
		Check if Schedule O contains a response or note to any line in this Par	tX	<u> </u>	🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	88,025.32	1	30,782.02
	2	Savings and temporary cash investments	•	2	_
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	176,253.36	4	154,283.94
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ets	_	organizations (see instructions) Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Q	8	Inventories for sale or use	- 	8	
	9 10a	Prepaid expenses and deferred charges		9	
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	·····
	13	Investments—program-related. See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	10,000.00
	16	Total assets. Add lines 1 through 15 (must equal line 34)	264,278.68		195,065.96
_	17	Accounts payable and accrued expenses	154,875.71		18,716.74
	18	Grants payable	10 1/010111	18	10/2 10:21
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			
<u>.</u>	23			22	
_	24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		23	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			-
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	<u> 154,875.71</u>	26	18,716.74
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets		27	
Ba	-28-	Temporarily restricted net assets [-28-	
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
<u>-</u>		complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds	109,402.97	32	176,349.22
Š	33	Total net assets or fund balances	109,402.97		176,349.22
_	34	Total liabilities and net assets/fund balances	264,278.68		195,065.96
					Form 990 (2016)

Form 9	90 (2016)			Pa	ige 12
Par	t 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		,020,2	268.26
2	Total expenses (must equal Part IX, column (A), line 25)	2		953,3	322.01
3	Revenue less expenses. Subtract line 2 from line 1	3		66,9	946.25
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		109,4	102.97
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		176,3	349.22
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		1
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		ļ		
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 audit	ed 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 o				
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain 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 under				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ludits.	3b		

Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047
2016
Open to Public

Inspection

Name of the organization

Employer identification number

,,,,,,,,	0. 2.0 0						Limployer lacinamodador	
	arch ar t I	nd Business Development Cer Reason for Public Cha		organizations must	comple	te this n	art) See instruction	
	_	ation is not a private foundation						
1		church, convention of churc		•	-	•	•	
2		school described in section						
3		nospital or a cooperative ho						
4								
5		organization operated for ction 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in
6 7	✓ An	federal, state, or local govern organization that normally scribed in section 170(b)(1)	receives a subs	tantial part of its sup				n the general public
8		community trust described i		•	Part II \			
9		agricultural research organ			•	orated in	conjunction with a l	and-grant college
	or un	university or a non-land-gra	int college of agr	culture (see instructio	ons). Ente	r the nan	ne, city, and state of	the college or
10	red Su	organization that normally in ceipts from activities related pport from gross investment quired by the organization a	to its exempt fu t income and uni	nctions—subject to co related business taxal	ertaın exc ble incom	ceptions, ne (less se	and (2) no more tha ection 511 tax) from	n 331/3% of its
11	_	organization organized and		•		•	•	
12	☐ An	organization organized and	operated exclus	sively for the benefit of	f, to perfo	orm the fu	unctions of, or to cal	rry out the purposes
	of Ch	one or more publicly suppo eck the box in lines 12a thro	orted organizatio ough 12d that des	ns described in secti scribes the type of sup	on 509(a	i)(1) or se organizatio	ection 509(a)(2). Se on and complete line	e section 509(a)(3). es 12e, 12f, and 12g.
а		Type I. A supporting organithe supported organization supporting organization. Y	n(s) the power to	regularly appoint or e	lect a ma	jority of t		
b		Type II. A supporting organization(s). You must	the supporting o	rganization vested in	the same			
С		Type III functionally integ						ally integrated with,
d		Type III non-functionally it that is not functionally integrequirement (see instructionally in	grated The orga	nization generally mus	st satisfy	a distribu	ution requirement an	
е		Check this box if the organ functionally integrated, or 1	nization received Type III non-func	a written determination	on from ti	ne IRS tha	at it is a Type I, Type ion.	e II, Type III
f	Ente	r the number of supported o	organizations .					
g	Prov	ride the following information	n about the supp	orted organization(s).				
	⁻ (i) Nam	ne of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								

Total

18

Part				, , , ,			
	(Complete only if you checked the Part III. If the organization fails to						lify under
Sooti	on A. Public Support	quality unde	er the tests his	ited below, pie	ease comple	te Fart III.)	
	dar year (or fiscal year beginning in)	(=) 2012	(h) 0012	(=) 2014	(d) 001E	(a) 2016	/f) Total
		(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.")			166,816.00	335,540.95	151,790.41	654,1 <u>47.36</u>
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge					ļ	
4	Total. Add lines 1 through 3			166,816.00	335,540.95	151,790.41	654,147.36
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)						
6	Public support. Subtract line 5 from line 4						654,147.36
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
7	Amounts from line 4			166,816.00	335,540.95	151,790,41	654,147.36
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			311,495.96	623,571.75	868,477.85	1,803,545.56
11	Total support. Add lines 7 through 10						2,457,692.92
12	Gross receipts from related activities, etc	. (see instruction	ons)			12	2,457,692.92
13	First five years. If the Form 990 is for th	ne organization	n's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	
	organization, check this box and stop he	re					🕨 🗸
Secti	on C. Computation of Public Suppor	t Percentag	e				
14	Public support percentage for 2016 (line	ô, column (f) di	vided by line 1	1, column (f))		14	%
15	Public support percentage from 2015 Sch	nedule A, Part	II, line 14 .		[15	%
16a	331/3% support test-2016. If the organi	ization did not	check the box	on line 13, an	d line 14 is 33	1/3% or more,	check this
	box and stop here. The organization qua	lifies as a publ	icly supported	organization			. ▶ 🗆
- · b-	331/3% support-test—2015If-the organithis box and stop here. The organization						
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the " organization	eets the "facts	-and-circumsta	ances" test, ch	eck this box a	ind stop here.	Explain in
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 is a supported organization in the control organization in the control organization is a supported organization in the control organization is a supported organization in the control organization is a supported organization in the control organization in the control organiz	ation meets th meets the "fac	e "facts-and-c ts-and-circum:	orcumstances" stances" test.	test, check t The organization	his box and son qualifies as	top here.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

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

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")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf		ı			_	_
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge]	
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .			<u> </u>			
b	Amounts included on lines 2 and 3						
	received from other than disqualified		ı				
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year					<u> </u>	
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						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether			1			
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets]			1		
	(Explain in Part VI.)						
13	-Total-support. (Add-lines-9, 10c,-11,-						
	and 12.)			<u> </u>		L	L
14	First five years. If the Form 990 is for the	•	's first, secon	id, third, fourth	, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he			<u> </u>	<u> </u>	<u></u>	> 🗆
	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line						<u>%</u>
16	Public support percentage from 2015 Sci			<u> </u>	<u> </u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2016 (•		17	%
18	Investment income percentage from 2015					18	%
19a	331/3% support tests - 2016. If the organ						
	17 is not more than 331/8%, 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	ere. The organ	iization qualifies	as a publicly s	supported organ	nization 🕨 🔲
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b.	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.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	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).			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	2 3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		ļ
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c 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	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a	ļ	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	 	

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Part	IV Supporting Organizations (continued)		· ·	
		\vdash	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)	11a		
	below, the governing body of a supported organization?	11b		
	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.	11c		
	on B. Type I Supporting Organizations	110		
Occi	on b. Type i supporting organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	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	ion C. Type II Supporting Organizations			
GCCI	on o. Type if dupporting digumentations		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		
Sect	ion 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.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see ın	struct	ions,
_ ₂ _	Activities Test. Answer (a) and (b) below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		1.00	1.10
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	1		
	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	1		
	reasons for the organization's position that its supported organization(s) would have engaged in these	<u> </u>	<u> </u>	
	activities but for the organization's involvement.	2b	ļ	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		 	ļ
	trustees of each of the supported organizations? Provide details in Part VI.	3a	├ ─	├—
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b		-

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V	jani	zations	
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			
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	<u> </u>	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	y in	tegrated Type III support	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	orted	
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			<u> </u>
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	sponsive	
	(provide details in Part VI). See instructions.			
9_	Distributable amount for 2016 from Section C, line 6			
10_	Line 8 amount divided by Line 9 amount		5 -13	
	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			-
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.		!	
3	Excess distributions carryover, if any, to 2016			
a				
b		· · · · · · · · · · · · · · · · · · ·		
c	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			<u></u>
g_	Applied to underdistributions of prior years			
h_	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7:			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
<u>c</u>	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 3			
- '-	and 4c.			
8	Breakdown of line 7:			
a				
<u>_</u>	Excess from 2013			
	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			
		·	0.1	A /Form 000 or 000 EZ) 2016

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D	c
Page	С

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 F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2016

27-3465046

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Research and Business Development Center Inc.

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization

Part	Form 990, Part IV, line		ies Outside	the United States. Comp	nete if the organization ans	wered tes on							
1	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the												
	grants or assistance?					☐Yes ☐No							
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.												
3	Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)												
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region							
(1)													
(2)													
_ (3)													
(4)													
(5)					: 								
(6)													
_ (7)													
(8)													
(9)													
(10)													
(11)					•								
(12)													
(13)													
(14)													
(15)													
(16)													
(17)													
3a b	Sub-total												
С	Totals (add lines 3a and 3b)												

Page 2

Schedule F (Form 990) 2016

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

Aegion (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description (i) Method of cash grant cash grant disbursement assistance (book, FMV, appraisal, other)	ara Africa General Support 70,650.00 Wire Transfer															
(d) Purpose of grant	General															
(b) IRS code (c) Region section and EIN (if applicable)	Sub Sahara Africa							_								
1 (a) Name of organization	(1)	(2)	(3)	(4)	(2)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entitles ဇ N

Schedule F (Form 990) 2016

(g) Description (h) Method of valuation of noncash assistance (book, FMV, appraisal, other)									
(f) Amount of (g noncash assistance									
(e) Manner of cash disbursement									
(d) Amount of cash grant									
(c) Number of recipients									
(b) Region	 	:	 	 		 _	 		
(a) Type of grant or assistance (b) Region (c) Number of recipients									

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Page	4

art	V For	eign Forms		
1	the organ	organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," nization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign ion (see Instructions for Form 926)	☐ Yes	☑ No
2	may be i Trusts an	organization have an interest in a foreign trust during the tax year? If "Yes," the organization required to separately file Form 3520, Annual Return To Report Transactions With Foreign of Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign ha U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990).	☐ Yes	☑ No
3	the organ	organization have an ownership interest in a foreign corporation during the tax year? If "Yes," inzation may be required to file Form 5471, Information Return of U.S. Persons With Respect To foreign Corporations (see Instructions for Form 5471)	☐ Yes	√ No
4	qualified Informati	organization a direct or indirect shareholder of a passive foreign investment company or a electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, on Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing e Instructions for Form 8621).	☐ Yes	☑ No
5	the organ	organization have an ownership interest in a foreign partnership during the tax year? If "Yes," nization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	"Yes," th	rganization have any operations in or related to any boycotting countries during the tax year? If e organization may be required to separately file Form 5713, International Boycott Report (see ons for Form 5713; do not file with Form 990)	☐ Yes	☑ No

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Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region), Part II, line 1 (accounting method); Part III (accounting method); and
	Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
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SCHEDULE O (Form 990 or 990-EZ)

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.

2016

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

▶ 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. Inspection Employer identification number

Research and Business Development Center Inc.	27-3465046							
Part IX Line 24 (A-B): The Research and Business Development Center performs research based projections	cts for which employees and							
contractors are compensated, costs are expensed to clients both directly and indirectly.								
Part VI Line 2A: The Research and Business Development Center used a Professional Employer Organization during the year to pay it's								
employees. All W2's and Form W3 were submitted under the Professional Employer Organization's TIN.								
Part VI Line 11B: The form was emailed to the board of directors for review and input.								
Part VI Line 19: The organization makes its governing documents, conflict of interest policy, and finaci	al records available upon request.							
Part V Line 3B: All revenue and donations were in compliance with the exempt functions of the organization	zation.							