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Department of the Treasury Internal Revenue Service

Form 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)

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047



Α	For the	2016 calen	dar year, or tax year beginning , 2016, and ending		-	,		
В	Check if a	pplicable	C	D	Employer iden	tification number		
	Addre	ess change	Coalition for Compassion and Justice		47-0851	.633		
	Name	e change	PO Box 1882	E Telephone number				
	\vdash	l return	Prescott, AZ 86302		(928) /	45-8382		
	\vdash	eturn/terminated		<u></u> ⊢	(320) 4	45 0502		
	\vdash			٥	C	\$ 1.625.07	70	
	⊢ ⊣	nded return	E Manual and a second of the s		Gross receipts oup return for su		7	
	Appli	ication pending	· · ·		•	L	No	
			Same As C Above	If 'No,' atta	ordinates include ich a list (see in	ed? Yes L structions)	No	
<u>L</u>		empt status	X 501(c)(3) 501(c) () (Insert no) 4947(a)(1) or 527					
J	Webs	ite: ► ww		(c) Group exer	mption number I	<u> </u>		
K		f organization	X Corporation Trust Association Other ► L Year of formation	2001	M State of	legal domicile AZ		
Pa	art{[l* '	Summar	у					
	1 B	riefly descri	be the organization's mission or most significant activities To provide	vital	services	, education		
a	a	and advo	cacy for those living in poverty, leading to se	elf-sufi	ficiency	and a fair		
2	a	ınd just	community for all.					
Activities & Governance	_							
ove.	_	heck this bo		e than 25%	of its net as	ssets		
Ğ	1		ting members of the governing body (Part VI, line 1a)		3		10	
တ်			dependent voting members of the governing body (Part VI, line 1b)		4		_10	
턡			of individuals employed in calendar year 2016 (Part V, line 2a)	•	5		<u>29</u>	
흟	1		of volunteers (estimate if necessary)		6		320	
ď	1		ed business revenue from Part VIII, column (C), line 12		7a	-25,00		
_	D 1V	et unrelated	business taxable income from Form 990.T. line 34		7b	-8,8		
	0 0		RECEIVED		r Year	Current Year		
ē	8 C	ontributions	and grants (Part VIII, line 1h)	1,0)36,061.	1,431,3	<u> 19.</u>	
Revenue	9 PI	rogram serv	rice revenue (Part VIII, line 2g)		1 050			
ě	10 In	ivestment ir	come (Part VIII, column (A), lines 5, 41 and 70 vil V 1 0 2017		1,052.		66.	
ш.	11 O	iner revenu	e (Part VIII, Column (A), lines 5, 6d, 8d, 9d, 10d, and 11e)		16,114.	-20,51		
_	12 To	otal revenue	and grants (Part VIII, line 1h) Price revenue (Part VIII, line 2g) Procome (Part VIII, column (A), lines 3, 4 and 7dNQV 1 5 2017 Procome (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Procome (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Procome (Part VIII, column (A), lines 8 through 11 (must equal Part VIII, column (A)), lines 12 Procompensation, employee benefits (Part IX, column (A), lines 5-10)	1,0	53,227.	1,411,7	<u>/1.</u>	
	13 G	rants and s	milar amounts paid (Part IX, column (A), has A)					
	14 B	enents paid	to or for members (Part IX, column (A), line 4)					
Š	15 S	alaries, othe	er compensation, employee benefits (Part IX, column (A), lines 5-10)	2	258,397.	253,03	<u>32.</u>	
nse	16a P	rofessional	fundraising fees (Part IX, column (A), line 11e)					
Expenses	b To	otal fundrais	sing expenses (Part IX, column (D), line 25) ► 22,300.	1 . 3			ı. Î	
ŵ	17 0	ther expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)		168,408.	475,76	60	
	4	-	es Add lines 13-17 (must equal Part IX, column (A), line 25)		26,805.	728,79		
	1		expenses Subtract line 18 from line 12		326,422.	682,97		
5 8					f Current Year	End of Year	<u>, ,</u>	
		otal assets	(Part X, line 16)		122,976.	2,074,61	1 9	
t Assets nd Baland	1		s (Part X, line 26)		53,408.	615,16		
Net, Fund	}		fund balances Subtract line 21 from line 20					
				<u> </u>	769,568.	1,459,45	<u> 58.</u>	
		Signatur						
Und	er penalties plete Decla	s of perjury, I de aration of prepa	clare that I have examined this return, including accompanying schedules and statements, and to the rer (other than officer) is based on all information of which preparer has any knowledge	e best of my kr	owledge and be	lief, it is true, correct, and	t	
_		il.	Vennte V asketie	V	11/2/	177		
٥.		Signatu	re of officer	Date	1.17.			
Sig	gn		KENNETH L APPLETREE. TREASUR	EN S				
He	re	Type or	print name and title	1/4		·		
			<u> </u>			L DTIN		
			reparer's name Preparer's signature Date	Chi	eckif	PTIN		
Pa			Rutherford, CPA 10/18/	// sel	f-employed	P01074806		
	eparer		000112 0 112021.001.17 1220					
Us	e Only	Firm's addre	ess ► 2086 WILLOW CREEK ROAD	Fir	m's EIN ► 26	-1390040		
			PRESCOTT, AZ 86301	Ph	Phone no 928-778-0079			
Ma	v the IRS	S discuss th	is return with the preparer shown above? (see instructions)				No	

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 11/16/16

Form 990 (2016)

Form	990 (2016) Coalition for Compassion and Justice	47-08	5163	3	F	age 2		
Par	Statement of Program Service Accomplishments							
	Check if Schedule O contains a response or note to any line in this Part III							
٠1	Briefly describe the organization's mission.							
	To provide vital services, education and advocacy for those livi		over	ty,				
	leading to self-sufficiency and a fair and just community for al	<u>l. – </u>						
				- 				
2	Did the organization undertake any significant program services during the year which were not listed on the pr	or						
	Form 990 or 990-EZ? If 'Yes,' describe these new services on Schedule O			Yes	X	No		
9	Did the organization cease conducting, or make significant changes in how it conducts, any program se	n		V	[v]	Al -		
3	If 'Yes,' describe these changes on Schedule O	HVICES		Yes	X	No		
4								
4 a	(Code) (Expenses \$ 534,515. including grants of \$) (I	Revenue	\$)		
	Open Door and other miscellaneous programs provided individuals					re		
	homeless or low income with a place where basic needs are addres				<u>1,</u>			
	justice and fellowship are nourished; and financial assistance i				- - -			
	encourage self-sufficiency and meet emergency needs. These servi			<u>d_</u>				
	providing hot meals, food boxes, clothing, showers, mail service		rs,	- - -		_ _		
	toiletries, school supplies, christmas gifts, and other services	: _				_ _		
						- - -		
			- -					
4 b	(Code) (Expenses \$ 53,149. Including grants of \$) (Families with Children Services provided support to individuals struggling with poverty to achieve economic self-sufficiency threducation process.		ilie		ng a	nd_		
			- -					
				- - -				
						·		
	(Code) (Expenses \$ 25,744. including grants of \$) (I	Revenue	-					
40	(Code) (Expenses \$ 25,744. including grants of \$) (I Home repair was provided to low-income homeowners to provide a henvironment for clients.			safe		' 		
						. _		
						·		
						- 		
			- -					
4 d	Other program services (Describe in Schedule O)							
	(Expenses \$ including grants of \$) (Revenue \$)			
	Total program service expenses ► 613, 408.							
BAA	TEEA0102L 11/16/16	_		Forn	990	(2016)		

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		X
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		X
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		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
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	X	
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			
ā	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ŀ	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	11 b		Х
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	11 c		X
C	I 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	11 d		X
6	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
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	х	
ŀ	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	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		X
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		Х
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		Х
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		Х
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		Х
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		Х
<u> </u>			200	(0010)

			Yes	No
2 0a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	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	21		х
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		х
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? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	a 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		х
ŧ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		Х
Ł	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		х
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		х
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		Х
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)			X
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c	X	Х
		29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30_		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
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		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf '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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
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	х	
BAA		Form	1 990 ((2016)

Form 990 (2016) Coalition for Compassion and Justice Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
•			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0 🖟	3 3	M 31
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0 1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1	С	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
L	ments, filed for the calendar year ending with or within the year covered by this return	29	b X	
0	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		b X	
3.3	Did the organization have unrelated business gross income of \$1,000 or more during the year?	·	a X	
	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q		b X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	-	7.	-
4 a	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4	а	Х
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)		3.	. (2)
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5	а	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5	b	X
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5	С	
6 a	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?			
		6	a	X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6	ь	
7	Organizations that may receive deductible contributions under section 170(c).		D .	-
	·			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7	a	X
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file		_	-
	Form 8282?		c	X
	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d		_ 11_	. L.
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7	1 -	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7	g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	-	1	†
		7	h	
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	-3	<u> </u>	
	organization have excess business holdings at any time during the year?	8	-	
	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?			<u></u> 1
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<u> </u>	a b	
	Section 501(c)(7) organizations. Enter	3	D D	1 3
	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 10b	 ***-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	ľ		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them).			. 1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	a	<u> </u>
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year [12b]	67		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	N	1 1	لنشال
	Is the organization licensed to issue qualified health plans in more than one state?	13	a	No. 15 x 3
	Note. See the instructions for additional information the organization must report on Schedule O	- T		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand		. 1	
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14	a	X
_ b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14		
BAA	TEEA0105L 11/16/16	Fo	rm 990	(2016)

|Part.VIII | Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 1 h 10 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 7 a 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? Х 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7Ь Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following See Schedule O a The governing body? 8 a Х b Each committee with authority to act on behalf of the governing body? 8 b X 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Х 10 a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in See Schedule O X Schedule O how this was done 12 c X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Х 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? a The organization's CEO, Executive Director, or top management official 15 a Х **b** Other officers or key employees of the organization 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? **Section C. Disclosure** List the states with which a copy of this Form 990 is required to be filed ΑZ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records Paul Mitchell PO Box 1882 Prescott AZ 86302 (928) 445-8382

				Compassion			plovees, Highest Cor	<u>47-0851633</u>	Page
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Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1 a 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 (C) Position (do not check more than one box, unless person is both an officer and a (A) Name and Title (B) (E) **(F)** Reportable compensation from the organization (W-2/1099-MISC) Estimated amount of other compensation from the organization Average hours Reportable compensation from director/trustee) per week related organizations (W-2/1099-MISC) Individual employee Former nstitutional trustee highest compensates (list any hours fo employee and related related organizations organiza-tions below dotted trustee (7) Jim Storelli 1 0 X 0. Director 0 0. (2) Ken Appletree 1 0 Treasurer X Х 0 0. 0. (3) Mary Bauer 1 0 X Х Vice President 0 0 0. (4) Saul Fein 1 0 X Director 0 0 0. (5) Donna Gaddy 1 0 X 0 Director 0 0. (6) Rabbi Jessica Rosenthal 1 0 Х Director 0 0. 0. (7) Pastor Jay Wilcher 1 0 X Director 0 0 0. (8) Mary Lea Adkins 1 0 Х X 0. President 0 0. (9) Michael Wolf 1 Director 0 Х 0 0 0. (10) Richard Wright 1 Õ Secretary Х 0. 0._ 0 40 (11) Paul Mitchell Executive Dir. 0 Х 47,823 0 0. (13)(14)

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TEEA0107L 11/16/16

Form 990 (2016)

(A)	(B) Average	(do	not	Po	C) sition	e than	one	(D)	(E)	(F)
Name and title	- tions below	or director	cer ar	officer	Key employee	is the employee	stee)	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	dotted line)	ee	stee			nsated				
(15)		} '								
(16)										
(17)						ļ -	-			
(18)					-					
(19)										
(20)										
(21)										
(22)										
(23)					-		-			
(24)				-	-	-	-			
(25)					-	-	-		<u> </u>	
1 b Sub-total					<u> </u>	L	>	47,823.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	on A						-	<u>0.</u> 47,823.	0.	$\frac{0.}{0.}$
2 Total number of individuals (including but not limited from the organization ► 0	to those li	sted	abov	/e) v	who	recei	ved			
3 Did the organization list any former officer, direc	tor, or tru	stee.	kev	em	·olar	vee.	or h	nighest compensa	ted employee	Yes No
on line 1a ³ If 'Yes,' complete Schedule J for suc 4 For any individual listed on line 1a, is the sum of	h ındıvıdu	al								3 X
the organization and related organizations greate such individual	er than \$1	50,00	00'?	If 'Y	es,	' con	nple	te Schedule J for		4 X
5 Did any person listed on line 1a receive or accrume for services rendered to the organization? If 'Yes	e compen s,' comple	satio te Sc	n fro	om i lule	any <i>J fo</i>	unre r suc	late ch p	ed organization or erson	ındıvıdual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compen	sated inde	epend	dent	COL	ntra	ctors	tha	it received more t	han \$100,000 of	
compensation from the organization Report compen (A) Name and business addi		tne ca	aieno	ar y	year	enai	ng v	vith or within the or (B) Description of		r (C) Compensation
name and business addi							_	Description	21 301 41063	Outipetisation
			_							
2 Total number of independent contractors (including b \$100,000 of compensation from the organization		ted to	tho	se l	stec	abo	ve)	who received more	than	
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<u> </u>		Check if Schedule O contain	s a resp	onse or note to ar	ny line in this Part V	/III		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c d d e f f h	Federated campaigns Membership dues Fundraising events. Related organizations Government grants (contributions) All other contributions, gifts, grants, an similar amounts not included above Noncash contributions included in lines Total. Add lines 1a-1f		1,431,319. 271,084.	1,431,319.			
<u> </u>				Business Code	1,431,319.			
Program Service Revenue	2 a b c d e f				on the state of th	Ahn villbannilda villbannilda nom		
P	g	Total. Add lines 2a-2f	L	•				783 78. 8. 98.
	3 4 5	Investment income (including other similar amounts) Income from investment of tax Royalties			966.	966.		
	6 a b c	Gross rents 3: Less rental expenses 5:	Real 3,060 8,061 5,001		-25,001.		-25,001.	
	b	Gross amount from sales of assets other than inventory Less. cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	curities	(II) Other			23,301.	
Other Revenue	b	Gross income from fundraising (not including \$_of contributions reported on line See Part IV, line 18 Less direct expenses Net income or (loss) from funding	e 1c)	7,023.	4,825.			4,825.
	ь	Gross income from gaming act See Part IV, line 19 Less direct expenses Net income or (loss) from gami	ŀ	ities •				
	b	Gross sales of inventory, less rand allowances Less cost of goods sold Net income or (loss) from sales	ŀ	165,247.	-551.			-551.
		Miscellaneous Revenue		Business Code	N. N. N. N.			
	11 a	Other Income			213.	213.		
	b		· -					
,	ц С	All other revenue	· - - - -					
		Total. Add lines 11a-11d	L	-	213.			
		Total revenue. See instructions			1,411,771.	1,179.	-25,001.	4,274.
RΔΔ	-			TEE	11/16/16			F 000 (0016)

Form **990** (2016)

Part-IX Statement of Functional Expenses

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Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) (Ĉ) (D) Do not include amounts reported on lines Program service Management and Fundraising 6b. 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 36,094 24,063 0 12,031. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 0. Other salaries and wages 196,713 154,765 40,484 1,464. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes 20,225 15,602 3,467 1,156. 11 Fees for services (non-employees) a Management **b** Legal c Accounting 10,050 10,050 **d** Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) 11,621 7,522 2.487 1,612 Advertising and promotion 1.282. 1,049. 233 13 Office expenses Information technology 15 Royalties 21,793 16 Occupancy 19,780 2,013 17 Travel 3,796. 187 3,609 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 99 99 20 Interest 3,355. 2,903. 452. 21 Payments to affiliates 22 Depreciation, depletion, and amortization 8,300 7,306 994 14,136 757 23 6, 379 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) a Direct Client Services 351,575 351,575 b Supplies___ 15,894 8,850 7.044 c Printing and Publications 9,930 9,529 401 d Equipment 4,989 4,475 514 18,940. 4,751. 6,037. e All other expenses 8,152. 728,792 25 Total functional expenses Add lines 1 through 24e 613,408. 93,084. 22,300. 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)

TEEA0110L 11/16/16

769,568

422,976

33

34

1,459,458.

2,074,619

Form 990 (2016)

Part:X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 302,439 853,848. 1 2 Savings and temporary cash investments 173,273 45,572. Pledges and grants receivable, net 3 112,849. Accounts receivable, net 4 398 8,105. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Assets Inventories for sale or use 8 41,227. 20,404 Prepaid expenses and deferred charges 10,532 9 470. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 971,223 ¥. 10b b Less accumulated depreciation 78,369 779,496 10 c 892,854. 11 Investments - publicly traded securities 118,746. 11 111,381. 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 8,688 8,313. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 1,422,976. 2,074,619. Accounts payable and accrued expenses 78,768. 17 17 51,714. 18 Grants payable 18 Deferred revenue 19 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 jabilities 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 22 Secured mortgages and notes payable to unrelated third parties 23 573,340. 562,947. Unsecured notes and loans payable to unrelated third parties 24 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 1,300 500. 26 Total liabilities. Add lines 17 through 25 653,408. 615,161. Organizations that follow SFAS 117 (ASC 958), check here X and complete or Fund Balances lines 27 through 29, and lines 33 and 34. 1,229,272. 27 Unrestricted net assets 671,844 10,044 Temporarily restricted net assets 28 142,426. 29 Permanently restricted net assets 87,680. 87,760. Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Net Assets Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32

Total net assets or fund balances

Total liabilities and net assets/fund balances

33

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Forr	n 990 (2016) Coalition for Compassion and Justice	47-0851	633 Page 12			
Pa	TEXI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
٠1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,411,771.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	728,792.			
3	Revenue less expenses Subtract line 2 from line 1	3	682,979.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	769,568.			
5	Net unrealized gains (losses) on investments	5	6,911.			
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	0.			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,459,458.			
Pa	t 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 X Accrual Other					
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reseparate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis	viewed on a				
1	Were the organization's financial statements audited by an independent accountant?		2 b X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sebasis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis					
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c X			
_	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
3 8	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle	3a X			
_	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	d audit	3 ь			
BAA	·		Form 990 (2016)			

SCHEDULE A (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016



Coa	li	tion for Compassion	n and Justice				47-085163	3		
Par		Reason for Public Cha	arity Status (All o				part.) See instruc			
The o	rga	anization is not a private foun-	dation because it is	(For lines 1 through 12,	check o	nly one	box)			
1	L	A church, convention of church					(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))								
3	L	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state									
5		An organization operated for section 170(b)(1)(A)(iv). (Co	r the benefit of a colle omplete Part II)	ege or university owned	or oper	ated by	a governmental unit de	scribed in		
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7		An organization that normally in section 170(b)(1)(A)(vi).		part of its support from a	governm	nental un	it or from the general pub	olic described		
8	L	A community trust described	d in section 170(b)(1)	(A)(vi). (Complete Part	11)					
9		An agricultural research organ or university or a non-land-grauniversity.	nt college of agriculture	e (see instructions) Ente	r the nar	ne, city,				
10	X	X An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)								
11		An organization organized a	nd operated exclusive	ely to test for public saf	ety See	section	1 509(a)(4).			
12	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) . See section 509(a)(3) . Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g									
а		Type I. A supporting organization organization organization organization organization.	ion operated, supervise egularly appoint or elec	ed, or controlled by its sur	ported o	organizat	ion(s), typically by giving	the supported on You must		
b		Type II. A supporting organize management of the supporting must complete Part IV, Sect	zation supervised or o	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organizati	naving control or on(s) You		
c		Type III functionally integrated organization(s) (see instruct	I. A supporting organiza	tion operated in connection	n with, a	nd functio	onally integrated with, its	supported		
d		Type III non-functionally integ functionally integrated The instructions) You must com	rated. A supporting ord	anization operated in coi	nnection	with its s	supported organization(s) t and an attentiveness	that is not requirement (see		
e		Check this box if the organiz integrated, or Type III non-fu	zation received a writt	ten determination from	the IRS					
f	Er	nter the number of supported		capporting organization	•					
g	Pr	ovide the following information	on about the supporte	d organization(s)						
•	i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organiza in your g	is the tion listed governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No		 		
(A)	_				 	 		L 		
(B)								 		
(C)										
(D)	_				 					
(E)			1.2							
Total										

Schedule A (Form 990 or 990 EZ) 2016 Coalition for Compassion and Justice 47-0851633

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the orga	anization failed to qualify under Pa	art III if the
organization fails to qualify under the tests listed below, please complet	te Part III)	

Sect	ion A. Public Support						
	idar year (or fiscal year ining 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')						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
	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						<u> </u>
Sect	ion B. Total Support						
Caleı begir	ndar year (or fiscal year nning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						
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)						
-	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	vities, etc (see in	structions)			12	
	First five years. If the Form 990 is organization, check this box and	stop here		nird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶ 🗌
	tion C. Computation of Pu			11 / (0)			
	Public support percentage for 20 Public support percentage from			ne 11, column (r)).	14	%
	33-1/3% support test—2016. If and stop here. The organization	the organization d	lid not check the l	oox on line 13, ar	nd line 14 is 33-1/	<u> </u>	L
b	33-1/3% support test—2015. If the and stop here. The organization	ne organization di	d not check a box	on line 13 or 16	a, and line 15 is 3	3-1/3% or more,	check this box
17a	10%-facts-and-circumstances to or more, and if the organization meets the 'fact	meets the 'facts-	and-circumstance	s' test, check this	s box and stop he	re. Explain in Par	t VI how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	meets the 'facts- nd-circumstances'	and-circumstance test The organiz	es' test, check this ation qualifies as	s box and stop he a publicly suppor	re. Explain in Par ted organization	t VI how the ►
18	Private foundation. If the organ	ization did not che	eck a box on line	13, 16a, 16b, 17a	a, or 17b, check th	nis box and see in	structions
BΔΔ					Sc	hedule A (Form 9	90 or 990-EZ) 2016

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)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	916,343.	736,749.	618,662	1,036,061.	1.431.319	4,739,134.
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	210,013.	130,861.	100,870.	110,349.	169,521.	511,601.
3	Gross receipts from activities that are not an unrelated trade or business under section 513		130,801.	100,870.	110,349.	109,321.	0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	916,343.	867,610.	719,532.	1,146,410.	1,600,840.	5,250,735.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	21,270.	22,818.	13,949.	23,193.	21,230.	102,460.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year	100,621.	129,375.	125,494.	410,993.	395,527.	1,162,010.
	Add lines 7a and 7b	121,891.	152,193.	139,443.	434,186.	416,757.	1,264,470.
	Public support. (Subtract line 7c from line 6)						3,986,265.
	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6	916,343.	867,610.	719,532.	1,146,410.	1,600,840.	5,250,735.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	519.	287.	170.	132.	140.	1,248.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
_	Add lines 10a and 10b	519.	287.	170.	132.	140.	1,248.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		ĺ				0.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) See Part VI		1,746.	202.	3,435.	33,273.	38,656.
13	Total support. (Add lines 9, 10c, 11, and 12)	916,862.	060 643	710 004	1 140 077	1 624 252	F 200 620
14	First five years. If the Form 990 organization, check this box and	is for the organiza	869,643.		1,149,977. In fifth tax year as		5,290,639. ▶ □
Sec	tion C. Computation of Pul	blic Support P	ercentage				
15	Public support percentage for 20	116 (line 8, column	(f) divided by lin	e 13, column (f))		15	75.35 %
16	Public support percentage from 3	2015 Schedule A,	Part III, line 15	```		16	76.93 %
	tion D. Computation of Inv						
	Investment income percentage for				mn (f))	17	0.02 %
	Investment income percentage fi			_	(1//	18	0.04 %
	33-1/3% support tests—2016. If it is not more than 33-1/3%, check	the organization d	id not check the b	oox on line 14, ar	nd line 15 is more as a publicly supp	than 33-1/3%, an	d line 17
	33-1/3% support tests-2015. If t line 18 is not more than 33-1/3%	the organization di , check this box a	d not check a boand stop here. The	x on line 14 or line e organization qu	ne 19a, and line 1 alifies as a public	6 is more than 33. ly supported orga	-1/3%, and
20	Private foundation. If the organiz	zation did not che	ck a box on line 1	4, 19a, or 19b, c	heck this box and	see instructions	▶ □

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
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
- **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
- c 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
- 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
- **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
- c 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
- 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)
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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**.
- 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)
- 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)
- 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**
- **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*
- c 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**
- 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
 - **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)

		Yes	No
		Yes	No
	1		
	2	Ŷ	
	3a		
1	3b		
	3c		-1 -1
	4a		
;	4a 4b	, <u>.</u> 5	-Mia.
	4c		
	5a		il J
i	5b		<u>.</u>
	5c		
i	6		
	7		
, '	8	<u></u>	
	9a		
	9b	<u>ij</u>	
	<u>∛</u> 9c	<u> </u>	2
5, '	<u>\ </u>	***	
	10a 10b		<u>Ľ.</u>
	IUU		

På	rt:IV: Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?	E 2.	Yes	No
•	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	11b		
_	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
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	Yes	No
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		
Sed	ction C. Type II Supporting Organizations			
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)	N. V	Yes	No
Sec	ction D. All Type III Supporting Organizations			
1 2	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? 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). By reason of the relationship described in (2), did the organization's supported organizations have a significant	1	Yes	No
	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		
Sec	ction 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 instructions).			
	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			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstructi	ons)	
2	Activities Test Answer (a) and (b) below.	ſ	Yes	No
;	a 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 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		
ļ	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	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
i	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? Provide details in Part VI.	3a		
	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	1.00	
	TEFANASE ON 19915 School A / Form Of		- ===	

Sche	• sidule A (Form 990 or 990-EZ) 2016	sti	ce 47-08	351633 Page
	t·V. Type III Non-Functionally Integrated 509(a)(3) Supporting Orga			551055 Tage
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on N	lov 20. 1970 (explain ii	n Part VI) See through E
Sec	tion 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		
Sec	tion 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		
Ŀ	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
- 0	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_		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	V 435	A SPACE OF THE SPA
2	Enter 85% of line 1	2	\$ \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

3

5

6

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

4 Enter greater of line 2 or line 35 Income tax imposed in prior year

temporary reduction (see instructions)

BAA

Schedule A (Form 990 or 990-EZ) 2016

	t V Type III Non-Functionally Integrated 509(a)(3) Si	upporting Organizat	ions (continued)	
Sec	tion D - Distributions			Current Year
-1	Amounts paid to supported organizations to accomplish exempt pu	rposes		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	,		
3	Administrative expenses paid to accomplish exempt purposes of si	upported organizations		
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 the organization Part VI) See instructions.	on is responsive (provide o	details	
_9	Distributable amount for 2016 from Section C, line 6		= 	
10	Line 8 amount divided by Line 9 amount			
Sec	tion 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			
	Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI) See instructions			
	Excess distributions carryover, if any, to 2016			
	THE STATE OF THE S			
	From 2013			
	From 2014			
	From 2015			
	Total of lines 3a through e		17 1 1 1/1 1/1	
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			***
	Carryover from 2011 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	Distributions for 2016 from Section D, line 7 \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			***
	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 _j and 4c			
8	Breakdown of line 7.			
а				
b	Excess from 2013			
С	Excess from 2014			CARALANA.
d	Excess from 2015			
е	Excess from 2016		NATA AND AND A	

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Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 Coalition for Compassion and Justice 47~0851633 Page 8

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.)

Part III, Line 12 - Other Income

Nature and Source		 2016	 2015	 2014	_	2013	2012
Other Income Rental Income		\$ 213. 33,060.	\$ 2,811. 624.	\$ 202.	\$	1,746.	
	Total	\$ 33,273.	\$ 3,435.	\$ 202.	\$	1,746.	\$ 0.

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.

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

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

	Coalition for Compassion a	47-0851633									
Påi	Part I 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	(b) Funds and other accounts								
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 dor are the organization's property, subject to the	nor advisors in writing that the assets held in do organization's exclusive legal control?	onor advised funds Yes No								
6	6 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 conferring impermissible private benefit? Yes No										
Pai	Tili: Conservation Easements. Complete if the organization ans	wered 'Yes' on Form 990, Part IV, line	÷ 7.								
1	Purpose(s) of conservation easements held by	the organization (check all that apply)									
	Preservation of land for public use (e g , r	ecreation or education) Preservation	of a historically important land area								
	Protection of natural habitat	<u></u>	of a certified historic structure								
	Preservation of open space										
2	Complete lines 2a through 2d if the organization hast day of the tax year	neld a qualified conservation contribution in the for	m of a conservation easement on the								
	ast asy of the talk you.		Held at the End of the Tax Year								
	Total number of conservation easements		2 a								
ı	Total acreage restricted by conservation ease	nents	2 b								
	Number of conservation easements on a certification	fied historic structure included in (a)	2 c								
	Number of conservation easements included in	c (c) acquired after 8/17/06, and not on a histo	ric								
	structure listed in the National Register		2 d								
3	Number of conservation easements modified, trantax year ►	sferred, released, extinguished, or terminated by t	he organization during the								
4	Number of states where property subject to conse	rvation easement is located >									
5	Does the organization have a written policy re										
_	and enforcement of the conservation easemer		∐ Yes ∐ No								
6	Staff and volunteer hours devoted to monitoring, i	rispecting, nandling of violations, and enforcing co	nservation easements during the year								
7	Amount of expenses incurred in monitoring, inspe	cting, handling of violations, and enforcing consen	vation easements during the year								
8	Does each conservation easement reported or and section 170(h)(4)(B)(II)?	n line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i) Yes No								
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements	conservation easements in its revenue and expen o the organization's financial statements that o	se statement, and balance sheet, and describes the organization's accounting for								
Par	TILE Organizations Maintaining Colle	ctions of Art, Historical Treasures, or wered 'Yes' on Form 990, Part IV, line	Other Similar Assets. 8.								
1 8	If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	ld for public exhibition, education, or research in fi	nue statement and balance sheet works of urtherance of public service, provide,								
ì	b 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										
	(i) Revenue included on Form 990, Part VIII,	line 1	► \$								
	(ii) Assets included in Form 990, Part X		► \$								
2	If the organization received or held works of art, hamounts required to be reported under SFAS		ncial gain, provide the following								
ä	Revenue included on Form 990, Part VIII, line		► \$								
1	Assets included in Form 990, Part X		► \$								

Schedule D (Form 990) 2016 Coali							47-085			Page 2	
Part III Organizations Maintai	ning Colle	ctions	of Art, Histo	orica	l Treasures, o	r Othe	r Similar Ass	ets (c	ontını	ıed)	
3 Using the organization's acquisition, items (check all that apply)	, accession, a	nd other			•	ire a sign	ificant use of its	collectic	חח		
a Public exhibition			d Loan	or exc	change programs						
b Scholarly research			e Other								
c Preservation for future generation											
Part XIII	Part XIII										
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No											
Part V Escrow and Custodial line 9, or reported an a	Arrangen	ents.	Complete if	the o	rganization ar		d 'Yes' on Fo				
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodia	n or oth	er intermediary	for co	ontributions or oth	ner asset	ts not included	Yes	[No	
b If 'Yes,' explain the arrangement	ın Part XIII a	nd com	plete the follow	ıng tal	ole:						
								Amoun	ıt _		
c Beginning balance						1	С				
d Additions during the year						1	d				
e Distributions during the year						1	е				
f Ending balance						1					
2 a Did the organization include an a	mount on Foi	m 990,	Part X, line 21,	for es	scrow or custodia	l accoun	t liability?	Yes		No	
b If 'Yes,' explain the arrangement	ın Part XIII (Check h	ere if the expla	nation	has been provide	ed on Pa	art XIII]	
Part V: Endowment Funds. C											
	(a) Current		(b) Prior yea		(c) Two years bac) Three years back	(e)	Four year		
1 a Beginning of year balance.	113,	224.	113,6		107,02		73,750.	_		200.	
b Contributions		80.	6,4	<u>130.</u>	3,30	10.	19,700.	-	58,	550.	
c Net investment earnings, gains, and losses	7,	737.	-1,6	580.	5,02	1.	13,574.				
d Grants or scholarships								ļ			
e Other expenditures for facilities and programs	5,	300.	5,2	215.	1,65	6.	0.	ļ			
f Administrative expenses								ļ— —			
g End of year balance		741.	113,2		113,68		107,024.	<u> </u>	<u> 73 ,</u>	750.	
2 Provide the estimated percentage		-		ne Ig,	column (a)) held	as					
a Board designated or quasi-endowme		13	.40 %								
b Permanent endowment	75.80%	10.0	n %								
c Temporarily restricted endowmen		10.8									
The percentages on lines 2a, 2b, an											
3 a Are there endowment funds not in the organization by	ie possession	or trie of	rganization that a	are nei	a ana administere	d for the		(Yes	No	
(i) unrelated organizations								3a(i)	X		
<u>├──`</u>								3a(ii)		Х	
b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 3b											
4 Describe in Part XIII the intended	-					t XII	I				
Part VI Land, Buildings, and I											
Complete if the organiz			'Yes' on For	m 99	0, Part IV, line	e 11a. :	See Form 99	0, Par	t X, Iı	ne 10.	
Description of property			or other basis vestment)	(b)	Cost or other casis (other)	(c) A	Accumulated preciation	(d)	Book va	alue	
1 a Land			137,502.		138,260.	<i>3</i> ; k	10 32 38		275	,762.	
b Buildings.			313,650.		159,500.		16,734.			,416.	
c Leasehold improvements	[165,126.		14,621.			,505.	

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Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

57,185.

47,014.

10,171.

892,854. Schedule **D** (Form 990) 2016

d Equipment

e Other

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Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)

500.

Liability for uncertain tax positions in Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

(10) (11)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

4 a

4 b

Part V, Line 4 - Intended Uses Of Endowment Fund

4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b

b Other (Describe in Part XIII)

Part XIII Supplemental Information.

c Add lines 4a and 4b

Administrative needs and Home Repair program

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

BAA

Schedule **D** (Form 990) 2016

4 c

728,792

SCHEDULE M (Form 990)

Noncash Contributions

► 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.

OMB No 1545-0047

2016

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Coalition for Compassion and Justice

Employer identification number 47-0851633

Pa	Types of Property					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) ethod of determining sh contribution amounts
1	Art — Works of art					
2	Art — Historical treasures					
3	Art — Fractional interests					
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					
10	Securities - Closely held stock				1	
11	Securities - Partnership, LLC, 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			223,069.	Fair	Value
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ► (Thrift Stre Inv)			20,823.	Comp	Sales
26	Other (Trailer)			13,000.	Fair	Value
27	Other ► (Other)			486.	Comp	Sales
28	Other► (Supplies)			13,706.	Comp	Sales
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done			which the	29	
30 <i>a</i>	During the year, did the organization receive by contri					Yes No

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

b If 'Yes,' describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If 'Yes,' describe in Part II

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes No
30 a X
31 X
32 a X

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2016)

Page 2

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.

SCHEDULE O (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.

Supplemental Information 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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

47-0851633

Coalition for Compassion and Justice

Form 990, Part VI, Line 8 - Explanation of No Contemporaneously Documentation of Meetings

The Organization does not have committees with the authority to act for the governing body. All committee deliberation is taken to the Board for approval.

Form 990, Part VI, Line 11b - Form 990 Review Process

The 990 is reviewed by members of the Board prior to filing with the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Organization requires that each new employee and board member read and sign a conflict of interest agreement. This agreement also has a section where the employee or board member is required to fill in potential conflicts of interest with the Organization.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Audited or reviewed financial statements, tax returns and other governing documents are available upon request with the Organization.