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Form **990**

Department of the Treasury
Internal Revenue Service

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

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
PURE INC

Doing business as
PURE CHARITY

Number and street (or P O box if mail is not delivered to street address) | Room/suite
210 N WALTON BLVD SUITE 27

City or town, state or province, country, and ZIP or foreign postal code
BENTONVILLE, AR 72712

D Employer identification number
27-4586127

E Telephone number
(855) 855-9594

G Gross receipts $ 28,397,407

F Name and address of principal officer
KRISTIN COPHER
210 N WALTON BLVD SUITE 27
BENTONVILLE, AR 72712

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ PURECHARITY COM

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 2011

M State of legal domicile AR

Part I Summary

1 Briefly describe the organization's mission or most significant activities
PURE CHARITY BUILDS WORLD-CLASS TECHNOLOGY SOLUTIONS FOR NONPROFITS AND THEIR COMMUNITIES TO INCREASE DONOR ADVOCACY INITIATIVES AND FUNDRAISING RESULTS, WHILE REDUCING TECHNOLOGY AND OPERATIONAL COSTS

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	3
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	3
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	**5**	0
6	Total number of volunteers (estimate if necessary)	**6**	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	24,699,759	28,397,407
9	Program service revenue (Part VIII, line 2g)		0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	24,699,759	28,397,407
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	21,959,169	25,943,853
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,130,080	1,608,155
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	24,089,249	27,552,008
19	Revenue less expenses Subtract line 18 from line 12	610,510	845,399

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	5,296,700	6,095,597
21	Total liabilities (Part X, line 26)	266,715	218,511
22	Net assets or fund balances Subtract line 21 from line 20	5,029,985	5,877,086

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2018-05-18
Signature of officer Date

KRISTIN COPHER PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
JEFF KINARD	JEFF KINARD	2018-05-18		P01469028

Firm's name ▶ PRZYBYSZ & ASSOCIATES CPAS PC — Firm's EIN ▶ 20-2759879

Firm's address ▶ 4200 JENNY LIND RD STE B
FORT SMITH, AR 72901 — Phone no (479) 649-0888

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

1 Briefly describe the organization's mission

PURE INC HELPS GROW A CULTURE OF GENEROSITY THROUGHT HIGH VOLUME PEER-TO- PEER FUNDRAIZING AND CROWD-FUNDING SOLUTIONS BY PROVIDING AIDE, AWARENESS AND SUPPORT, PURE INC , MOBILIZES PEOPLE AND RESOURCES TO MAKE AN IMPACT WHERE EVERYONE CAN ENGAGE AND MAKE A DIFFERENCE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

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? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as 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 $ 25,943,853 including grants of $ 25,943,853) (Revenue $)

See Additional Data

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code) (Expenses $ including grants of $) (Revenue $)

(Code) (Expenses $ 363,317 including grants of $) (Revenue $)

PURE CHARITY GIFT & GRANTS VARIOUS GRANTS TO SUPPORT PROJECTS IN THE AREAS OF FOOD, FREEDOM, HEALTH, OPPORTUNITY, WATER, AND RELIEF

4d Other program services (Describe in Schedule O)

(Expenses $ 363,317 including grants of $) (Revenue $)

4e Total program service expenses ▶ 26,307,170

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
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		No
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		No
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		No
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	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
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		No
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		No
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		No
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		No
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	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
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*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
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		No
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		No
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		No
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		No
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		No

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	**20a**		No
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**	Yes	
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**		No
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**		No
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**		No
b	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**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
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**		No
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**		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
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**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
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**		No
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**		No
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**		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
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**		No
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**		No
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**	Yes	

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
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	0		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	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)	2b			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	3a			No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .	4a			No
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	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9a	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			
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O	13a			
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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .	14b			

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 . . . . . ☑

Section 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	1a	3		
	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	1b	3		
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			No
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			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6			No
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			No
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			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
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			No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	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?	16a		No
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?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶ AR

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶KRISTIN COPHER 210 N WALTON BLVD SUITE 27 BENTONVILLE, AR 72712 (855) 855-9594

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

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, or 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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KRISTIN COPHER PRESIDENT	20 00			X				0	0	0
(2) RICK BREKELBAUM TREASURER	5 00			X				0	0	0
(3) ADAM COLEMAN SECRETARY	1 00			X				0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
PURE CHARITY PARTNERS LLC 210 N WALTON BLVD SUITE 27 BENTONVILLE, AR 72712	ADMINISTRATIVE	1,245,343

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 1

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

		(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	1a Federated campaigns . .	1a			
	b Membership dues . .	1b			
	c Fundraising events . .	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	28,397,407		
	g Noncash contributions included in lines 1a-1f $ _____				
	h **Total.** Add lines 1a-1f . . . . . ▶		28,397,407		
Program Service Revenue		Business Code			
	2a _____				
	b _____				
	c _____				
	d _____				
	e _____				
	f All other program service revenue				
	g **Total.** Add lines 2a–2f . . . . ▶				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) . . . . . ▶				
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties . . . . . ▶				
		(i) Real	(ii) Personal		
	6a Gross rents				
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) . . . . . ▶				
		(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) . . . . . ▶				
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . a				
	b Less direct expenses . . . b				
	c Net income or (loss) from fundraising events . . ▶				
	9a Gross income from gaming activities See Part IV, line 19 . . . a				
	b Less direct expenses . . . b				
	c Net income or (loss) from gaming activities . . ▶				
	10a Gross sales of inventory, less returns and allowances . . a				
	b Less cost of goods sold . . b				
	c Net income or (loss) from sales of inventory . . ▶				
	Miscellaneous Revenue	Business Code			
	11a				
	b				
	c				
	d All other revenue				
	e **Total.** Add lines 11a–11d . . . . . ▶				
	12 Total revenue. See Instructions . . . . . ▶		28,397,407		

Part 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)

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	25,943,853	25,943,853		
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
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 O)	1,608,155	363,317	1,244,838	
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties . .				
16 Occupancy				
17 Travel				
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)				
a				
b				
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	27,552,008	26,307,170	1,244,838	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	1,966,606	1	2,769,930
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	10,000
	4	Accounts receivable, net	15,639	4	1,212
	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 organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	32,500	9	32,500
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a			
	b	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	3,281,955	13	3,281,955
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	5,296,700	16	6,095,597
Liabilities	17	Accounts payable and accrued expenses	202,453	17	154,249
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	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		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	64,262	24	64,262
	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	266,715	26	218,511
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	3,065,366	27	3,912,467
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	1,964,619	29	1,964,619
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	5,029,985	33	5,877,086
	34	Total liabilities and net assets/fund balances	5,296,700	34	6,095,597

Part XI Reconcilliation 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	28,397,407
2	Total expenses (must equal Part IX, column (A), line 25)	2	27,552,008
3	Revenue less expenses Subtract line 2 from line 1	3	845,399
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,029,985
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	1,702
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	5,877,086

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," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:
Software Version:
EIN: 27-4586127
Name: PURE INC

Form 990 (2017)

Form 990, Part III, Line 4a:

PURE CHARITY GIFT & GRANTS VARIOUS GRANTS TO SUPPORT PROJECTS IN THE AREAS OF FOOD, FREEDOM, HEALTH, OPPORTUNITY, WATER, AND RELIEF

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493309008448

SCHEDULE A (Form 990 or 990EZ)

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

2017

Open to Public Inspection

Name of the organization
PURE INC

Employer identification number
27-4586127

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))

3 ☐ 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 the benefit of a college or university owned or operated by a governmental unit described in **section 170 (b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university

_____

10 ☑ An organization that normally receives (1) more than 331/3% 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 331/3% 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 and operated exclusively to test for public safety See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170 (b)(1)(A)(ix)**

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(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)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) **12**

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2016 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	1,396,218	6,716,234	18,557,340	24,717,697	28,397,407	79,784,896
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	1,396,218	6,716,234	18,557,340	24,717,697	28,397,407	79,784,896
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						79,784,896

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6	1,396,218	6,716,234	18,557,340	24,717,697	28,397,407	79,784,896
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	22	231	1,203			1,456
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	22	231	1,203			1,456
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)	1,396,240	6,716,465	18,558,543	24,717,697	28,397,407	79,786,352

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	100 000 %
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f))	17	0 %
18	Investment income percentage from **2016** Schedule A, Part III, line 17	18	0 %

19a **331/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33 1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

			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)*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination*	3b		
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*	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		
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*	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		
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		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
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.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	10b		

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	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		

Section 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		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	1		

Section 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		

Section 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)**

- a ☐ The organization satisfied the Activities Test Complete **line 2** below
- b ☐ The organization is the parent of each of its supported organizations Complete **line 3** below
- c ☐ The organization supported a governmental entity Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
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		
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.**			
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		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
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-functionally-integrated Type III supporting organization (see instructions)

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

Section D - Distributions	**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported 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 is responsive (provide details in **Part VI**) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2017**	**(iii) Distributable Amount for 2017**
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 $			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 **Excess distributions carryover to 2018.** Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Additional Data

Software ID:

Software Version:

EIN: 27-4586127

Name: PURE INC

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)

Facts And Circumstances Test

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
PURE INC

Employer identification number
27-4586127

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)	28,397,407	
3	Aggregate value of grants from (during year)	25,943,853	
4	Aggregate value at end of year	611,955	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

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

Part II Conservation Easements. Complete if the organization answered "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 , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

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, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in 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 IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations . . . . . 3a(i)		
(ii) related organizations . . . . . 3a(ii)		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				

Part VII **Investments—Other Securities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) INVESTMENT IN INTELLECTUAL PROPERTY	3,281,955	C
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶	3,281,955	

Part IX **Other Assets.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	

Part X **Other Liabilities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. 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 ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	

Part XIII Supplemental Information

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

Return Reference	Explanation	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
PURE INC

Employer identification number
27-4586127

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☑ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	**Explanation**

Additional Data

Software ID:
Software Version:
EIN: 27-4586127
Name: PURE INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
1 HEART 1 MISSION 11961 WHITE OAK RUN CONROE, TX 77385	46-5343112		5,410				VARIOUS
1 U PROJECT 2625 S FORREST HEIGHTS AVE SPRINGFIELD, MO 65809	47-3430478		7,947				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
2ND MILK 446 ANGEL FALLS DR SPRINGDALE, AR 72762	80-0311694		6,223				VARIOUS
4OTHERS 937 MINNESOTA AVE SAN JOSE, CA 95125	94-1703979		16,300				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
99 BALLOONS PO BOX 10934 FAYETTEVILLE, AR 72703	26-1298485		86,488				VARIOUS
ABBA'S PRIDE 2504 SWAYING LIMB COURT VIRGINIA BEACH, VA 23456	46-3553733		74,059				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A LIFETIME ADOPTION FOUNDATION 400 IDAHO MARYLAND RD GRASS VALLEY, CA 95945	68-0418994		15,149				VARIOUS
HOPEMOB C/O KILNS COLLEGE PO BOX 673 BEND, OR 97709	27-3204358		6,450				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ABILITY TREE PO BOX 6929 SILOAM SPRINGS, AR 72761	27-3020956		17,132				VARIOUS
ACF ADOPTIONS 16831 NE 6TH AVENUE N MIAMI BEACH, FL 33162	65-0254656		6,712				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ADOPTION ASSOCIATES INC 1338 BALDWIN JENISON, MI 49428	38-3088375		19,136				VARIOUS
ADOPTION SUPPORT CENTER OF INDIANAP 6331 N CARROLLTON AVE INDIANAPOLIS, IN 46220	35-2128172		16,240				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ADOPT TOGETHER 251 W CENTRAL AVE 278 SPRINGBORO, OH 45066	27-1966036		1,130,225				VARIOUS
ADVANCING HIS KINGDOM INTERNATIONAL 3 ADOBE GROVE SAN ANTONIO, TX 78239	27-0317132		14,242				VARIOUS

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AFRICA NEW LIFE MINISTRIES 7405 SW TECH CTR DR STE 144 PORTLAND, OR 97223	48-1291935		72,211				VARIOUS
AIM4INDIA PO BOX 834 CELINA, TX 75009	27-3674829		38,496				VARIOUS

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ALARM (AFRICAN LEADERSHIP & REC MIN 14140 MIDWAY ROAD SUITE 208 DALLAS, TX 75244	31-1660877		97,299				VARIOUS
ALL GOD'S CHILDREN INTERNATIONAL 1400 NE 136TH AVE SUITE 201 VANCOUVER, WA 98684	93-1052909		71,698				VARIOUS

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AMAZING GRACE ADOPTIONS 9203 BAILEYWICK ROAD SUITE 101 RALEIGH, NC 27615	56-2137409		6,783				VARIOUS
AMERICA WORLDONE ORPHAN 6723 WHITTIE AVE SUITE 202 MCLEAN, VA 22101	54-1720006		88,289				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AMERICANS FOR INTERNATIONAL AID 2151 LIVERNOIS SUITE 200 TROY, MI 48083	38-2058290		15,775				VARIOUS
APEX COMMUNITY CHURCH 5200 FAR HILLS AVE KETTERING, OH 45429	30-0018763		9,129				VARIOUS

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APPARENT PROJECT 4623 DENTON LN SE LACEY, WA 98503	26-2632203		5,677				VARIOUS
ARISE GLOBAL 2705 JANET CT PEARLAND, TX 77581	46-5020575		7,622				VARIOUS

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ARK OF THE RAINBOW 7306 CASA LOMA AVE DALLAS, TX 75214	46-1853922		37,934				VARIOUS
ARKANSAS SUPPORT NETWORK 6836 ISAACS ORCHARD RD SPRINGDALE, AR 72762	71-0665473		8,039				VARIOUS

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B LOVED FOUNDATION INC 6608 BRYANT IRVIN ROAD FORT WORTH, TX 76132	45-3144998		7,529				VARIOUS
BAKER RIPLEY PO BOX 271389 HOUSTON, TX 77277	23-7062976		25,000				VARIOUS

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BAXTER AVENUE CHURCH 522 BAXTER AVENUE LOUISVILLE, KY 40204	61-1048086		8,669				VARIOUS
BEAUTIFUL FEET PO BOX 61215 FT MYERS, FL 33906	27-2345711		72,723				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BEAUTY FOR ASHES UGANDA 3210 BUNKER HILL DRIVE COLORADO SPRINGS, CO 80920	46-4454004		7,488				VARIOUS
BEST FAMILY MINISTRIES 1099 RIVIERA DRIVE CALERA, AL 35040	47-2235344		82,619				VARIOUS

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BETHANY CHRISTIAN SERVICES 901 EASTERN AVE NE GRAND RAPIDS, MI 49501	38-1405282		237,709				VARIOUS
BREAD OF LIFE INC 2015 CRAWFORD ST HOUSTON, TX 77002	76-0386510		25,000				VARIOUS

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BREATH OF LIFE HAITI PO BOX 1792 WARSAW, IN 46581	47-2032656		32,972				VARIOUS
CAFE MOMENTUM 1510 PACIFIC AVENUE DALLAS, TX 75201	32-0384561		14,381				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CALVARY BAPTIST CHURCH 1600 HARVEY ST MCALLEN, TX 78501	74-1343192		15,555				VARIOUS
CANOPY NWA 2925 OLD MISSOURI ROAD FAYETTEVILLE, AR 72703	81-1305235		38,512				VARIOUS

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CARING FOR KORAH 6905 TERRY LANE RICHMOND, TX 77406	47-1423861		31,409				VARIOUS
CCAI 6920 SOUTH HOLLY CIRCLE CENTENNIAL, CO 80112	84-1208720		90,717				VARIOUS

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CHANJE MOVEMENT PO BOX 80222 RANCHO SANTA MARGARITA, CA 92688	01-0000001		5,064				VARIOUS
CHAPELWOOD CHURCH OF GOD 1125 MELANIE STREET BATON ROUGE, LA 70815	72-1109932		13,244				VARIOUS

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CHILD BEYOND INTERNATIONAL 305 9TH STREET HOOD RIVER, OR 97031	38-3941186		19,366				VARIOUS
CHILDREN'S CONNECTIONS INC 2514 82ND STREET SUITE G LUBBOCK, TX 79423	75-2164325		9,596				VARIOUS

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CHILDREN'S JUBILEE FUND 3901B MAIN STREET SUITE 103 PHILADELPHIA, PA 19127	31-1540887		20,254				VARIOUS
CHILDREN'S HOUSE INTERNATIONAL PO BOX 1829 FERNDALE, WA 98248	94-2643021		37,722				VARIOUS

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CHILDVOICE INTERNATIONAL 202 KENT PLACE NEWMARKET, NH 03857	20-4644590		37,487				VARIOUS
CHRIST'S GIFT ACADEMY 636-G LONG POINT RD 38 MT PLEASANT, SC 29464	76-0769463		127,236				VARIOUS

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CHRISTIAN ACADEMY FOR THE DEAF 487 COUNTY ROAD 3565 CHINA SPRING, TX 76633	47-5621303		14,955				VARIOUS
CHRISTIAN ADOPTION SERVICES INC 624 MATTHEWS MINT HILL ROADSTE 100 MATTHEW, NC 28105	56-1683833		83,323				VARIOUS

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CHRISTIAN LIFE CENTER 3489 LITTLE YORK RD DAYTON, OH 45414	31-1050608		51,839				VARIOUS
COINS AND QUILTS 4 LIFE 273 OCOTILLO DRIVE EL CENTRO, CA 92243	27-1860628		10,699				VARIOUS

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CONGRESSIONAL COALITION ON ADOPTION 311 MASSACHUSETTS AVE NE WASHINGTON DC, DC 20002	54-2035617		25,000				VARIOUS
CONTAGIOUS DISCIPLE MAKING 7738 SW 173RD PLACE BEAVERTON, OR 97007	47-2177760		8,702				VARIOUS

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CORNERSTONE CHURCH OF BLUE SPRINGS 301 SE AA HWY BLUE SPRINGS, MO 64014	43-1310899		28,785				VARIOUS
COUNT ME IN 1301 NUECES COURT BENBROOK, TX 76126	45-3324950		22,413				VARIOUS

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COVENANT CARE SERVICES INC 3950 RIDGE AVENUE MACON, GA 31210	58-1865887		7,732				VARIOUS
CROSS CHURCH 1709 JOHNSON ROAD SPRINGDALE, AR 72762	71-0496820		141,202				VARIOUS

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DAY OF HOPE PO BOX 312 CARUTHERSVILLE, MO 63830	87-0759683		5,434				VARIOUS
DILLON INTERNATIONAL INC 7335 S LEWIS AVENUE SUITE 302 TULSA, OK 74136	73-1078800		14,252				VARIOUS

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E3 PARTNERS 2001 W PLANO PKWY SUITE 2600 PLANO, TX 75075	16-1680978		11,804,035				VARIOUS
EASTPOINT COMMUNITY CHURCH 230 EXECUTIVE DRIVE SUITE 8 NEWARK, DE 19702	51-0407275		18,157				VARIOUS

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EBENEZER INTERNATIONAL OUTREACH IN PO BOX 4689 WOODBRIDGE, VA 22194	27-1239574		5,833				VARIOUS
EDEN MINISTRY PO BOX 831539 RICHARDSON, TX 75083	27-1928559		67,027				VARIOUS

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EKISA MINISTRIES INTERNATIONAL INC 11901 HARDWICK DR FISHERS, IN 46038	27-2920910		7,674				VARIOUS
ENGAGE HOPE MISSIONS 1600 W CAMPBELL ROAD GARLAND, TX 75044	75-1322098		10,376				VARIOUS

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ETERNAL THREADS PO BOX 3637 ABILENE, TX 79601	47-0833051		11,291				VARIOUS
EVOLVE ADOPTION & FAMILY SERVICES 5850 OMAHA AVE OAK PARK HEIGHTS, MN 55055	41-1296959		13,970				VARIOUS

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FAITHFUL LOVE 5500 FREDERICA RD SUITE 1201 SAINT SIMMONS ISLAND, GA 31522	30-0656491		57,166				VARIOUS
FEEDTEACHHOPE 6315-B FM 1488 RD 246 MAGNOLIA, TX 77354	47-3515448		19,395				VARIOUS

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FELLOWSHIP BIBLE CHURCH OF NWA 1051 W PLEASANT GROVE RD ROGERS, AR 72758	71-0605274		9,277				VARIOUS
FIGHT TO THRIVE 6728 VALYNN DR HERRIMAN, UT 84096	47-4486672		7,390				VARIOUS

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FLORIDA BAPTIST CHILDREN'S HOMES IN PO BOX 8190 LAKELAND, FL 33802	59-0657326		5,795				VARIOUS
FOOD FOR ORPHANS PO BOX 26123 COLORADO SPRINGS, CO 80936	75-3242422		35,505				VARIOUS

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FOOD FOR THE HUNGRY 1224 EAST WASHINGTON STREET PHOENIX, AZ 85034	95-2680390		18,619				VARIOUS
FOR FREEDOM INTERNATIONAL 3417 IVY DRIVE GRAND FORKS, ND 58201	81-1292140		40,576				VARIOUS

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FOR THE CITY NETWORK 313 E ANDERSON LN BUILDING 3 SUITE 100 AUSTIN, TX 78752	80-0329998		6,128				VARIOUS
FOURSQUARE MISSIONS INTERNATIONAL 1910 W SUNSET BLVD SUITE 700 LOS ANGELES, CA 90026	95-1684062		21,842				VARIOUS

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FREEDOM FIRM 1649 PEBBLE BEACH CIR ELGIN, IL 60123	20-5280075		7,999				VARIOUS
FUNDEDBYORG 1014B CALDWELL LANE NASHVILLE, TN 37204	81-1711364		17,124				VARIOUS

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GIVE A GOAT 9911 SHELBYVILLE RD LOUISVILLE, KY 40223	41-4326846		49,286				VARIOUS
GLADNEY CENTER FOR ADOPTION 6300 JOHN RYAN DRIVE FORT WORTH, TX 76132	75-0917409		34,767				VARIOUS

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GLOBAL ADOPTION SERVICES INC 2046 RUSHMORE CT BEL AIR, MD 21015	83-0310605		9,176				VARIOUS
GLOBAL SERVE INTIATIVES VISIONS MADE VIABLE 17595 HARVARD AVENUE C235 IRVINE, CA 92614	26-2214003		13,086				VARIOUS

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GRACE CHURCH OF NORTHWEST ARKANSAS 2828 NORTH CROSSOVER ROAD FAYETTEVILLE, AR 72703	71-0826424		104,671				VARIOUS
GRACE HOUSE MINISTRIES PO BOX 1416 WEATHERFORD, TX 76086	75-2516762		6,213				VARIOUS

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GRACE SO AMAZING MINISTRIES 104 TAMARA CIRCLE FRANKLIN, TN 37069	27-3290754		42,885				VARIOUS
GREAT WALL CHINA ADOPTION AND CHILDREN OF ALL NATIONS 248 ADDIE ROY RD A102 AUSTIN, TX 78746	74-2786077		81,998				VARIOUS

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GUARDIAN FOR HEROES FOUNDATION 4287 BELT LINE RD 268 ADDISON, TX 75001	45-4037891		35,265				VARIOUS
HAITI GOSPEL FUND PO BOX 1315 FOUNTAIN INN, SC 29644	46-1115810		28,476				VARIOUS

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HANDS AND FEET PROJECT INC PO BOX 682105 FRANKLIN, TN 37068	20-1368997		236,951				VARIOUS
HAPPY HOME FOR THE HANDICAPPED PO BOX 484 LAKE OSWEGO, OR 97034	20-4555598		38,578				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEAR THE CRY 10500 SW NIMBUS AVE BLDG T PORTLAND, OR 97223	20-0368851		555,545				VARIOUS
HEARTLINE MINISTRIES - HAITI PO BOX 898 SUNNYSIDE, WA 98944	91-2072330		149,469				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HELP ONE NOW PO BOX 26716 RALEIGH, NC 27611	26-3618295		1,291,515				VARIOUS
HELP-PORTRAIT PO BOX 680656 FRANKLIN, TN 37068	27-1496015		9,395				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HIS HANDS ON AFRICA 5321 MOONSHADOW STREET SIMI VALLEY, CA 93063	81-1354444		10,558				VARIOUS
HOLT INTERNATIONAL CHILDREN'S SVCS PO BOX 2880 EUGENE, OR 97402	23-7257390		17,958				VARIOUS

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HONDURAS BAPTIST DENTAL MISSION PO BOX 2704 LAUREL, MS 39442	23-7432186		11,882				VARIOUS
HOPE MINISTRIES UGANDA USA 1345 SHIREBOURN HICKORY, NC 28602	81-3116502		35,166				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HOPE REMEMBERED PO BOX 5 FOSTERS, AL 35463	47-2089565		32,911				VARIOUS
HOPE SCHOOL OF LEADERSHIP 409 FRANKLIN ROAD BRENTWOOD, TN 37027	20-4044723		12,255				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HOPEKIDS INC PO BOX 44712 EDEN PRAIRIE, MN 55344	86-1042378		13,085				VARIOUS
HOUSTON FOOD BANK 535 PORTWALL STREET HOUSTON, TX 77029	74-2181456		50,000				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INNERCITY SPORTS MINISTRYHOLLA 1302 SE ANKENY STREET PORTLAND, OR 97214	93-1311456		19,387				VARIOUS
INTERNATIONAL ADOPTION NET 7500 E ARAPAHOE RD CENTENNIAL, CO 80112	84-1608994		9,022				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INTERNATIONAL FAMILY SERVICES INC 700 S FRIENDSWOOD DRIVE SUITE F FRIENDSWOOD, TX 77546	76-0482195		27,581				VARIOUS
INTERNATIONAL SAMARITAN 803 N MAIN ST ANN ARBOR, MI 48104	34-1811907		87,599				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INTERNATIONAL SPORTS FEDERATION 4801 WADE GREEN RD ACWORTH, GA 30102	73-1468131		8,146				VARIOUS
JP HAITIAN RELIEF ORGANIZATION 6464 SUNSET BLVD SUITE 1140 LOS ANGELES, CA 90028	27-1703237		27,995				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KILNS COLLEGE 255 SW BLUFF DRIVE BEND, OR 97702	31-1532248		18,075				VARIOUS
KINGSGATE CHURCH 25 ANDREWS DRIVE WOODLAND PARK, NJ 07424	27-0622191		5,026				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KORE FOUNDATION 695 NASHVILLE PIKE 101 GALLATIN, TN 37066	26-3196544		7,084				VARIOUS
LEGACY COLLECTIVE 210 NORTH WALTON BLVD SUITE 27 BENTONVILLE, AR 72712	27-4586120		142,288				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LIBERTY CHURCH PO BOX 986 NEW YORK, NY 10272	80-0953294		16,872				VARIOUS
LIFELINE CHILDREN'S SERVICES 2104 ROCKY RIDGE ROAD BIRMINGHAM, AL 35216	63-0896878		119,605				VARIOUS

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LITTLE BLESSINGS 7982 YORKSHIRE DRIVE CASTLE PINES, CO 80108	81-0940070		19,151				VARIOUS
LIVING HOPE ADOPTION AGENCY PO BOX 579 FORT WASHINGTON, PA 19034	23-2820149		5,625				VARIOUS

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LOOM INTERNATIONAL 4300 NE FREMONT ST STE 260 PORTLAND, OR 97213	27-2924621		133,480				VARIOUS
MADISON ADOPTION ASSOCIATES SOCIETY OFFICE COMPLEX 1102 SOCIETY DRIVE CLAYMONT, DE 19703	51-0399000		60,711				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MAJESTY OUTDOORS FOUNDATION 15037 SOUTH PADRE ISLAND DR PMB 178 CORPUS CHRISTI, TX 78418	26-4458865		5,795				VARIOUS
MAURY HILLS CHURCH OF CHRIST 101 UNITY LANE COLUMBIA, TN 38401	62-1868335		17,010				VARIOUS

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MAXPOINT MISSIONS PO BOX 721 GRAPEVINE, TX 76099	26-0105165		21,576				VARIOUS
MERCY HOUSE GLOBAL 5814 FM 1488 MAGNOLIA, TX 77354	27-3196267		386,975				VARIOUS

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MISSION DEL CARIBE 501(C) (3) 101 VISTA DRIVE CLEVELAND, GA 30528	72-1202161		5,141				VARIOUS
MORNING STAR FOUNDATION PO BOX 2143 BEND, OR 97709	27-0413006		28,343				VARIOUS

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MUSIC IN COMMON INC PO BOX 1190 SHEFFIELD, MA 01257	26-3195366		12,618				VARIOUS
MYLIFESPEAKS PO BOX 100972 NASHVILLE, TN 37224	45-2446194		68,463				VARIOUS

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NEW BEGINNINGS INTERNATIONAL CHILDREN AND FAMILY SERVICES 2164 SOUTHRIDGE DRIVE TUPELO, MS 38801	64-0745140		15,818				VARIOUS
NEW HOPE EVANGELICAL FREE CHURCH PO BOX 1615 WINSTON, OR 97496	93-0702599		17,730				VARIOUS

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NEW NAME PO BOX 632 GLEN ELLYN, IL 60137	47-3385985		21,999				VARIOUS
NEXT GENERATION MINISTRIES 29940 SOUTH DHOOGHE ROAD COLTON, OR 97017	20-5289738		14,190				VARIOUS

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NEXT WORLDWIDE PO BOX 271130 FLOWER MOUND, TX 75027	20-3860555		744,627				VARIOUS
NIGHTLIGHT CHRISTIAN ADOPTIONS 767 LANE ALLEN ROAD LEXINGTON, KY 40504	95-2254634		8,659				VARIOUS

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NO 41 6505 S HARVEY AVE OKLAHOMA CITY, OK 73139	46-1463100		33,667				VARIOUS
NORTHERN CALIFORNIA CONFERENCE OF SEVENTH-DAY ADVENTISTS PO BOX 23165 PLEASANT HILL, CA 94523	94-1026064		54,548				VARIOUS

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OPEN DOOR ADOPTION AGENCY INC PO BOX 4 THOMASVILLE, GA 31799	58-1703392		25,232				VARIOUS
PACIFIC UNION COLLEGE ONE ANGWIN AVE ANGWIN, CA 94508	94-1279798		130,188				VARIOUS

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PARTNERS WITH ETHIOPIA PO BOX 27637 GOLDEN VALLEY, MN 55427	27-3355413		149,067				VARIOUS
PEOPLE OF PEACE INC TWO FAITHS FRIENDSHIP INTIATIVE 25832 CHAPEL HILL DR LAKE FOREST, CA 92630	47-3216748		15,000				VARIOUS

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POVERTY RESOLUTIONS 3488 YORK ROAD FURLONG, PA 18925	27-1895442		36,609				VARIOUS
PURE MISSION 113 W CENTRAL AVE SUITE 201 BENTONVILLE, AR 72712	30-0868179		229,423				VARIOUS

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RAMPY MS RESEARCH FOUNDATION PO BOX 1871 BENTONVILLE, AR 72712	45-3248340		5,099				VARIOUS
REACH INTERNATIONAL MINISTRIES MIKE AND ANDREA PO BOX 5945 MARYVILL, TN 37802	47-2453802		5,672				VARIOUS

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REAL 4 CHRIST MINISTRIES 18866 STONE OAK PARKWAY SUITE 103103 SAN ANTONIO, TX 78258	26-1128332		160,565				VARIOUS
REFUGE COFFEE CO 3803 MARKET STREET CLARKSTON, GA 30021	47-1572898		120,341				VARIOUS

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RENOVATE CHURCH PO BOX 2221 LEANDER, TX 78646	47-2576653		69,342				VARIOUS
RESTORE INTERNATIONAL PO BOX 60370 SAN DIEGO, CA 92166	83-0417128		452,925				VARIOUS

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RESTORE LIFE PO BOX 94863 ATLANTA, GA 30377	26-4394379		115,182				VARIOUS
RIDER RELIEF 101 W RIVERWALK PUEBLO, CO 81003	84-1495369		10,408				VARIOUS

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RIVERSIDE CHURCH 8660 DANIELS PKWY FORT MYERS, FL 33912	59-6080507		36,128				VARIOUS
SAMARITAN COMMUNITY CENTER 1211 WEST HUDSON ROAD ROGERS, AR 72756	04-3703020		89,750				VARIOUS

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SARI BARI USA 210 N MAIN STREET KOKOMO, IN 46901	47-2330028		14,033				VARIOUS
SAVE STREET CHILDREN UGANDA 7802 FLOYDSBURG ROAD CRESTWOOD, KY 40014	45-2822269		22,377				VARIOUS

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SEACOAST COMMUNITY CHURCH 1050 REGAL ROAD ENCINITAS, CA 92024	33-0335463		9,362				VARIOUS
SECOND CHANCE GLOBAL INC 1606 W DAVIS STREET BURLINGTON, NC 27215	81-2811183		77,792				VARIOUS

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SERVE NWA PO BOX 2372 BENTONVILLE, AR 72712	56-2648165		8,021				VARIOUS
SIXTY FEET 2451 CUMBERLAND PARKWAY SUITE 3526 ATLANTA, GA 30339	27-2413300		260,706				VARIOUS

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SMALL WORLD ADOPTION PO BOX 1109 MOUNT JULIET, TN 37121	58-1661474		26,626				VARIOUS
SOLE HOPE 605 EAST INNES STREET 3263 SALISBURY, NC 28145	27-2305440		898,289				VARIOUS

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SOMEBODY'S MAMA PO BOX 1725 NOBLE, OK 73068	47-2760352		31,403				VARIOUS
SOULS HARBOR NWA 1206 N 2ND STREET ROGERS, AR 72756	77-0708962		33,796				VARIOUS

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SOUTHERN ADVENTIST UNIVERSITY PO BOX 370 COLLEGEDALE, TN 37315	62-0536733		65,560				VARIOUS
STUDENTS FOR INTERNATIONAL MISSION SERVICE (SIMS) 24888 PROSPECT AVE LOMA LINDA, CA 92354	95-3522679		122,915				VARIOUS

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SU NICA 303 TIFFANY CIRCLE GARNER, NC 27529	27-1232063		61,650				VARIOUS
TEN THOUSAND HOMES PO BOX 118 WYLIE, TX 75098	26-2058976		66,901				VARIOUS

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TENTH STREET BAPTIST CHURCH ADVANCE 4002 E SOUTHPORT RD INDIANAPOLIS, IN 46237	71-1430025		8,123				VARIOUS
THE AFRICAN SOUP PO BOX 50050 ATLANTA, GA 30302	45-4589195		7,467				VARIOUS

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THE FALLEN SPARROW FOUNDATION INC 5391 EDGERTON DR PEACHTREE CORNERS, GA 30092	26-3592175		53,179				VARIOUS
THE FREEDOM STORY 337 17TH STREET SUITE 102 OAKLAND, CA 94612	26-1587576		324,652				VARIOUS

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THE GLOBAL MISSION PO BOX 80222 RANCHO SANTA MARGARITA, CA 92688	20-4897897		12,513				VARIOUS
THE HUB URBAN MINISTRIES 4110 YOUREE DRIVE SHREVEPORT, LA 71105	26-4794709		57,167				VARIOUS

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THE MENTORING PROJECT PO BOX 25476 PORTLAND, OR 97298	27-0170750		14,553				VARIOUS
THE ONE COLLECTIVE 303 ENCHANTED HILLTOP WAY LAKEWAY, TX 78738	81-2629916		14,207				VARIOUS

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THE PACK SHACK 1091 E LOWELL AVE CAVE SPRINGS, AR 72718	46-3323793		7,248				VARIOUS
THE REFUGE INTIATIVE A DIVISION OF WORLD ORPHANS PO BOX 1840 CASTLE ROCK, CO 80104	33-0571309		51,439				VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
THE SCARLET THREAD 96 COUNTRY ROAD 4426 MOUNT PLEASANT, TX 75455	30-0958105		10,032				VARIOUS
THE TORCH WORSHIP CENTER 800 CANNON BRIDGE ROAD DEMOREST, GA 30535	36-4663567		57,360				VARIOUS

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THE VOICES PROJECT PO BOX 673 BEND, OR 97701	82-0919085		10,878				VARIOUS
THECHURCHAT 3025 N ASPEN AVE BROKEN ARROW, OK 74169	73-0759888		28,606				VARIOUS

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THERE WITH CARE 2825 WILDERNESS PLACE SUITE 100 BOULDER, CO 80301	68-0606330		5,522				VARIOUS
TITUS TASK 104 GLENWOOD PLACE SILOAM SPRINGS, AR 72761	27-0763116		5,026				VARIOUS

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TNQ FOUNDATION PO BOX 1367 WALLER, TX 77484	46-3521483		10,000				VARIOUS
TOGETHER FOR HAITI PO BOX 8 SALADO, TX 76571	81-1369915		148,483				VARIOUS

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TREE OF HOPE HAITI PO BOX 344 C/O CHILD SPONSORSHIPS ATHOL, MA 01331	46-4241794		44,601				VARIOUS
TREZO 408 TWICKENHAM PLACE FRANKLIN, TN 37069	27-0515604		24,870				VARIOUS

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VIDA IMPACT MISSIONS 101 E MAIN STREET HUMBLE, TX 77338	81-1476221		15,984				VARIOUS
WALLA WALLA UNIVERSITY 204 SOUTH COLLEGE AVENUE COLLEGE PLACE, WA 99324	91-0617727		21,964				VARIOUS

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WATERBROOK HILLS 6 OOLD POST ROAD LANDENBERG, PA 19350	51-0247402		14,422				VARIOUS
WEST SANDS ADOPTIONS & COUNSELING 1240 EAST 100 SOUTH 1 ST GEORGE, UT 84790	87-0513093		10,319				VARIOUS

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WESTSIDE SCHOOL OF MISSION THEOLOGY & WORSHIP 10500 SW NIMBUS AVE BUILDING T PORTLAND, OR 97223	26-3184971		38,221				VARIOUS
WHY SHOULD I BELIEVE PO BOX 2172 MARIETTA, GA 30061	45-2673162		23,219				VARIOUS

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WORD MADE FLESH PO BOX 70 WILMORE, KY 40390	58-1967768		437,026				VARIOUS
WORLD ASSOCIATION FOR CHILDREN AND PARENTS PO BOX 88948 SEATTLE, WA 98138	91-0962079		34,310				VARIOUS

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Y-MALAWI 2105 FOOTHILL BLVD SUITE B312 LA VERNE, CA 91750	20-3788576		13,517				VARIOUS
YOU HAVE A CHOICE MINISTRIES INC PO BOX 46 CONKLIN, NY 13748	46-0878226		5,504				VARIOUS

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OTHER 210 N WALTON BLVD BENTONVILLE, AR 72712			606,750				

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
PURE INC

Employer identification number
27-4586127

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	PURE INC HELPS GROW A CULTURE OF GENEROSITY THROUGHT HIGH VOLUME PEER-TO- PEER FUNDRAIZIN G AND CROWD-FUNDING SOLUTIONS BY PROVIDING AIDE, AWARENESS AND SUPPORT, PURE INC , MOBILI ZES PEOPLE AND RESOURCES TO MAKE AN IMPACT WHERE EVERYONE CAN ENGAGE AND MAKE A DIFFERENCE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4D	PURE CHARITY GIFT & GRANTS VARIOUS GRANTS TO SUPPORT PROJECTS IN THE AREAS OF FOOD, FREEDOM, HEALTH, OPPORTUNITY, WATER, AND RELIEF

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	THE TAX RETURN IS REVIEWED FOR ACCURACY AND COMPLETENESS BY THE OFFICERS OF THE ORGANIZATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	THE BOARD SUPERVISES TO INSURE ENFORCEMENT OF THE CONFLICTS OF INTEREST POLICY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	ALL DOCUMENTS ARE MADE AVAILABLE UPON WRITTEN OR IN-PERSON REQUESTS