SCANNED MAR 0-6, 2019

Short Form 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.

2017

Open to Public Inspection

Department of ti		► Go to www.irs.gov/Form990EZ for instructions and the latest information	ition.		Inspection	
A For the 20	017 calenda	r year, or tax year beginning , 2017, and ending			, 20	
B Check if appli		C Name of organization	D Empl	oyer id	entification number	2
Address cha	inge	International Forgiveness Institute, Inc.		3	91832533	
Name chang	је	Number and street (or P O box, if mail is not delivered to street address) Room/suite	E Telep	hone n	umber	
Initial return		1127 University Avenue 105		60	8-251-6484	
Final return/t		City or town, state or province, country, and ZIP or foreign postal code	F Grou	р Ехе	mption	
Amended ref		Madison, WI 53715-1021		ber	•	
G Accountin		✓ Cash Accrual Other (specify) ►	Check I	▶ □ ı	if the organization is	not
I Website:	-	international for giveness.com				2
J Tax-exemp		ck only one) — ☑ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	(Form 9	90, 99	0-EZ, or 990-PF).	_
K Form of o		✓ Corporation ☐ Trust ☐ Association ☐ Other				
		7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if to	al assets			
(Part II, colum	mn (B) below	y) are \$500,000 or more, file Form 990 instead of Form 990-EZ	-	> \$		
Part I	Revenue	e, Expenses, and Changes in Net Assets or Fund Balances (see th	e instruc	ctions	for Part I) 🖫	
		the organization used Schedule O to respond to any question in this Part				
2 1 (Contributio	ns, gifts, grants, and similar amounts received		1	91,0	060.
		ervice revenue including government fees and contracts		2	2,6	520.
	-	p dues and assessments		3		
	Investment	income		4		62.
5a (Gross amo	unt from sale of assets other than inventory 5a	0			
b l	Less: cost	or other basis and sales expenses	0.			
c	Gain or (los	ss) from sale of assets other than inventory (Subtract line 5b from line 5a) .		5c		0.
6 (Gaming an	d fundraising events				
	Gross inco					
9 9	\$15,000) .	6a	0.			
Revenue	Gross inco	me from fundra <u>ising events (not including</u> \$of contribution	ons		t	
ا هُو		aising events reported on line (Vattado Schedule G if the				
I		h gross income and contributions exceeds \$5,000) 6b	0.			
C I	Less: direc	t expenses from aming and fundraising events _6c e or (loss) from gaming and fundraising events (add lines 6a and 6b and s	0.			
d I	Net income	e or (loss) from gaming and fundraising everals (add lines 6a and 6b and s	ubtract			
	line 6c) .	ODEN LIT		6d		0.
		s of inventory, less returns and allowances	0.			
		of goods sold	0.			_
		t or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c		0.
		nue (describe in Schedule O)		8		0
		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	▶	9	93,7	
		I similar amounts paid (list in Schedule O)		10		0.
l l	Benefits pa	aid to or for members		11		<u>0.</u>
		ther compensation, and employee benefits a		12		770.
ا 13 ا د ا عا		al fees and other payments to independent contractors 🔞		13		
ă 14 (y, rent, utilities, and maintenance		14		720.
_ .0		ublications, postage, and shipping		15 16		250. 420.
	•	enses (describe in Schedule O) @		$\overline{}$	108,1	
17	rotal expe	enses. Add lines 10 through 16	•	17	(14,4	
<u>y</u> 18		deficit) for the year (Subtract line 17 from line 9)		10	(14,4	10)
19 Sec		r figure reported on prior year's return)		19	22 /	450.
-	-	nges in net assets or fund balances (explain in Schedule O)		20		0.
20 P		or fund balances at end of year. Combine lines 18 through 20		21	0.0	032.
		ion Act Notice, see the separate instructions. Cat. No. 106421	· · ·		Form 990-EZ (2	

Pa	Balance Sheets (see the		•	w augetion in this !	Dart II		П
	Check if the organization u	sed Schedule	O to respond to at		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments				23,450.	22	9,032
23	Land and buildings					23	0.
24					0.	24	0.
25	Total assets			[23,450.	25	9,032.
26	Total liabilities (describe in Sche			[0.	26	0.
27	Net assets or fund balances (lin				23,450	27	9,032
Par	rt III Statement of Program Se				art III)		-
	Check if the organization u]	Expenses
Wha	at is the organization's primary exem	pt purpose?	See Schedule O				quired for section (c)(3) and 501(c)(4)
as r	cribe the organization's program se measured by expenses. In a clear a sons benefited, and other relevant inf	and concise materials or ea	anner, describe the ch program title.	e services provided	, the number of	orga othe	anizations, optional for
29				ants, check here .		282	108,160
		If the same and				200	
20	<u>· </u>			ants, check here .		298	1
30					•••••		
		If this amount	includes foreign gra	ants, check here .		302	1
31	Other program services (describe i					l	
				ants, check here .		31a	-
	Total program service expenses rt IV List of Officers, Directors, Tr						_ L
Pal							
	Check if the organization to the (a) Name and title	isea Schedule	(b) Average hours per week	(c) Reportable ?1	(d) Health benefits, contributions to employ	yee (e	Estimated amount o
			devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and deferred compensation		other compensation
			1 00	_			0
	ard President & Director			0.		0	
			1 00	0		0.	O
	ard Vice President & Director			ļ		<u> </u>	
	Elizabeth Gassin, Bourbonnais, IL		1.00	0.		0	C
_	her Osmuleki Edgeston Mil			0.	_	-	
	ber Osmulski, Edgerton, WI	·	1.00	0		0.	C
	ard Treasurer & Director			0		"	
	Frederick DiBlasio, Pasadena, MD		1.00	0		0.	C
	ector	con DA		- 0	-	" -	
	Richard Fitzgibbons, West Conshohocl ector	ten. PA	Ī			- 1	C
J 11 C			1.00	0		0.	
Vlor				0		0.	
	nsignor John Hebl, Oxford, WI ector		1.00	0		0.	
Dire	nsignor John Hebl, Oxford, Wl		1.00				
Dire Sr. I	nsignor John Hebl, Oxford, WI ector						0
Dire Sr. I Dire	nsignor John Hebl, Oxford, Wl ector Mary Ellen Lewis, Bridgeton, MO		1.00	0		0.	0
Dire Sr. I Dire Den	nsignor John Hebl, Oxford, Wl ector Mary Ellen Lewis, Bridgeton, MO ector		1.00	0		0.	0
Dire Sr. I Dire Den	nsignor John Hebl, Oxford, Wl ector Mary Ellen Lewis, Bridgeton, MO ector nnis Blang, 1127 University Ave., Madis		1.00	0		0.	0
Dire Sr. I Dire Den	nsignor John Hebl, Oxford, Wl ector Mary Ellen Lewis, Bridgeton, MO ector nnis Blang, 1127 University Ave., Madis		1.00	0		0.	0
Dire Sr. I Dire Den	nsignor John Hebl, Oxford, Wl ector Mary Ellen Lewis, Bridgeton, MO ector nnis Blang, 1127 University Ave., Madis		1.00	0		0.	0
Dire Sr. I Dire Den	nsignor John Hebl, Oxford, Wl ector Mary Ellen Lewis, Bridgeton, MO ector nnis Blang, 1127 University Ave., Madis		1.00	0		0.	0
Dire Sr. I Dire Den	nsignor John Hebl, Oxford, Wl ector Mary Ellen Lewis, Bridgeton, MO ector nnis Blang, 1127 University Ave., Madis		1.00	0		0.	0.0.0.

ļ	Part	· · · · · · · · · · · · · · · · · · ·			
		instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part	_	
	33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
		detailed description of each activity in Schedule O	33		~
	34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		,
	35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		
	b c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		~
	36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		~
	37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 27a 0			
	b	Did the organization file Form 1120-POL for this year?	37b		~
	38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		~
		If "Yes," complete Schedule L, Part II and enter the total amount involved	-		
	39	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9	c		
	a b	Initiation fees and capital contributions included on line 9	1		
	40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.			
	b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
		excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		~
	С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
	е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
	41	List the states with which a copy of this return is filed ▶ Wisconsin			
	42a	The organization's books are in care of ▶ Dennis Blang Telephone no. ▶ 6	508-25	1-6484	1
		Located at ► 1127 University Avenue, Suite 105, Madison, WI ZIP + 4 ►		-1021	
	b	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)?	42b	Yes	No ✓
		If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and	ļ		
	•	Financial Accounts (FBAR).			
	С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country:	42c		
	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	• •	ا .	► []
	44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	F	Yes	No
		completed instead of Form 990-EZ	44a		~
	b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		~
	c	Did the organization receive any payments for indoor tanning services during the year?	44c		1
	d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
	45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		_/
	b	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," Form 990 and Schedule R may need to be completed instead of			
		Form 990-EZ (see instructions)	45b		/

1							P	age 4
							Yes	No
	Did the organization engage, directly or in					11/4	<u> - ```</u>	لبن
Part V	to candidates for public office? If "Yes," of		, Part I	• • • •	· · · ·	46	L.,	
			45 461 1					
	All section 501(c)(3) organization:	s must answer que	estions 47–49b and	52, and com	iplete the ta	bles to	or line	es
	50 and 51.							
	Check if the organization used Sch	nedule O to respond	I to any question in t	his Part VI	<u></u>			
							Yes	No
47	Did the organization engage in lobbying	activities or have a	section 501(h) election	in in effect di	uring the tax			
,	year? If "Yes," complete Schedule C, Part	H				47		1
48	Is the organization a school as described in	section 170(h)(1)(A)(i	u)? If "Yes " complete	Schedule F		48		~
	Did the organization make any transfers to		· ·			49a		<u>, </u>
	•	•	_			49b		
	If "Yes," was the related organization a se							al I. a
	Complete this table for the organization's							а кеу
	employees) who each received more than	\$100,000 of compe	nsation from the orga	,		nter "N	ione."	
		(b) Average	(c) Reportable	(d) Health b		Catum ata	d amai	int of
	(a) Name and title of each employee	hours per week	compensation	benefit plans, ar		Estimate ther con		
	,	devoted to position	(Forms W-2/1099-MISC)	compens				
None					- .			
140/16								
	···		 	+				
		ı I			1			
				↓				
					İ			
			•					
				 				
	\$100,000 of compensation from the orga (a) Name and business address of each independ	· · · · · · · · · · · · · · · · · · ·	one, enter "None." (b) Type of sen	vice	(c) Con	npensati	on	
None								
			1					
		·	···					
			+					
			4					
			<u> </u>					
			· -	l.				
d	Total number of other independent contra	actors each receiving	over \$100,000	>				
	Total number of other independent contra	-			ist attach a			
52	Did the organization complete Schedu	-				✓ Yes		
52	Did the organization complete Scheducompleted Schedule A	ule A? Note: All se	ection 501(c)(3) orga	inizations mu	▶[✓ Yes		No
52 Under pe	Did the organization complete Scheducompleted Schedule A	ule A? Note: All se	ection 501(c)(3) orga	nizations mu	▶[est of my knowle			
52 Under pe	Did the organization complete Scheducompleted Schedule A	ule A? Note: All se	ection 501(c)(3) orga	nizations mu	▶[est of my knowle ge	edge and	bekef,	
Under pe	Did the organization complete Scheducompleted Schedule A	ule A? Note: All se	ection 501(c)(3) orga	nizations mu	▶[est of my knowle ge		bekef,	
52 Under pe	Did the organization complete Scheducompleted Schedule A	return, including accompar officer) is based on all info	ection 501(c)(3) orga	nizations mu	▶[est of my knowle ge	edge and	bekef,	
Under petrue, com	Did the organization complete Scheducompleted Schedule A	return, including accompar officer) is based on all info	ection 501(c)(3) orga	nizations mu	▶[est of my knowle ge	edge and	bekef,	
Under petrue, com	Did the organization complete Scheducompleted Schedule A	return, including accompar officer) is based on all info	ection 501(c)(3) orga	nizations mu	▶[est of my knowle ge	edge and	bekef,	
Under petrue, com Sign Here	Did the organization complete Scheducompleted Schedule A	return, including accompar officer) is based on all info	ection 501(c)(3) organization of which preparer	nizations mu	est of my knowle	edge and	bekef,	
Under petrue, com Sign Here	Did the organization complete Scheducompleted Schedule A	return, including accompar n officer) is based on all info	ection 501(c)(3) organization of which preparer	ents, and to the bhas any knowledg	▶[est of my knowle ge	O/	bekef,	
Under petrue, com Sign Here Paid Prepa	Did the organization complete Scheduc completed Schedule A	return, including accompar n officer) is based on all info	ection 501(c)(3) organization of which preparer	ents, and to the b has any knowledg	est of my knowle ge // 4 Check	O/	bekef,	
Under petrue, com Sign Here	Did the organization complete Scheduc completed Schedule A	return, including accompar n officer) is based on all info	ection 501(c)(3) organization of which preparer	ents, and to the b has any knowledg	est of my knowle Check I if self-employed	O/	bekef,	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

2017

Department of the Treasury Internal Revenue Service Name of the organization

International Forgiveness Institute, Inc.

Employer identification number

39-1832533 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is. (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iv) Is the organization (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 isted in your governing support (see other support (see above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

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

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

Section	on A. Public Support						
Calen	dar 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.")	65,601.	29,408	57,752.	73,030.	91,060.	316,851.
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	65,601.	29,408.	57,752	73,030.	91,060.	316,851
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						316,851
Secti	on B. Total Support				•		
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	65,601.	29,408.	57,752.	73,030.	91,060.	316,851
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	58.	41.	46.	55.	62.	262.
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.)	560.	1,049.	5,450.	2,329.	2,620.	12,008.
11	Total support. Add lines 7 through 10	-					329,121
12	Gross receipts from related activities, etc.					12	12,270.
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he						▶ □
Secti	on C. Computation of Public Suppor				 -		_ ,
14	Public support percentage for 2017 (line 6	6, column (f) di	vided by line 1	1, column (f))		14	96.27 %
15	Public support percentage from 2016 Sch 331/3% support test—2017. If the organi	nedule A, Part I	ii, iine 14 .		[15	97 27 %
16a	box and stop here. The organization qua						
b	33 ¹ / ₃ % support test—2016. If the organi						
D	this box and stop here. The organization						
17a	10%-facts-and-circumstances test – 20		• • •	-			_
170	10% or more, and if the organization me Part VI how the organization meets the " organization	eets the "facts- facts-and-circl	-and-circumsta umstances" te 	ances" test, ch st. The organia	eck this box a zation qualifies	and stop here. s as a publicly	Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	ation meets the neets the "fact	e "facts-and-c s-and-circums 	ercumstances" stances" test.	test, check to the transfer transfer to the transfer transfer to the transfer transf	this box and son qualifies as	a publicly ▶ □
18	Private foundation. If the organization di instructions						
	motractions	<u> </u>	<u> </u>		· · · · ·		<u> </u>

,	
Page	3

Part							
	(Complete only if you checked th						der Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	11.)	
Secti	on A. Public Support						
Calen	dar 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.")						
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			Ī			
	unrelated trade or business under section 513			1	/	ĺ	
4	Tax revenues levied for the		7				
	organization's benefit and either paid to				/		
	or expended on its behalf				/		
5	The value of services or facilities				1		
	furnished by a governmental unit to the				/		
	organization without charge				/		
6	Total. Add lines 1 through 5				ĺ		
	Amounts included on lines 1, 2, and 3				ĺ		
	received from disqualified persons .			/	1	1	
b	Amounts included on lines 2 and 3			1		1	-
D	received from other than disqualified						
	persons that exceed the greater of \$5,000					1	
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b			/		1	· · · · · · · · · · · · · · · · · · ·
8	Public support. (Subtract line 7c from			/		· · ·	·
	line 6.)			/			
Secti	on B. Total Support			1	I		_
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	(u) 2010	(0) 2014	(1)	(0) 2010	(6) 2017	(i) Total
10a	Gross income from interest, dividends,		. /	1			
iva	payments received on securities loans, rents,						
	royalties, and income from similar sources .		/				
h	Unrelated business taxable income (less		 		1	1	
b	section 511 taxes) from businesses		/				
	acquired after June 30, 1975		/	ļ			
•	Add lines 10a and 10b		/			+	
	Net income from unrelated business		 			 	
11	activities not included in line 10b, whether		/	1			
	or not the business is regularly carried on		/				
40	- '		/	 	 - -		
12	Other income. Do not include gain or loss from the sale of capital assets		/	1			
	(Explain in Part VI.)	,	Į.	1	Ì	l i	
13	Total support. (Add lines 9, 10c, 11,					+	
13	and 12.)	/			Į.		
14	First five years. If the Form 990 is for the	o organization	'e firet secon	d third fourth	or fifth tax v	ear as a section	501(c)(3)
17	organization, check this box and stop he	~ <i>u</i>		_	•		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2017 (line 8			13 column (fl)		15	%
16	Public support percentage for 2017 (line of Public support percentage from 2016 Sch		•				
	on D. Computation of Investment Inc			<u></u>		1.01	
17	Investment income percentage for 2017 (v line 13 colu	mn (fl)	17	%
18	Investment income percentage for 2017 (-			
19a	331/3% support tests—2017. If the organi						
ıJd	17 is not more than 331/3%, check this box	,					
b	331/3% support tests—2016. If the organiz						_
D	line 18 is not more than 331/3%, check this t						
20	Private foundation If the organization di		-				

Part IV Supporting Organizations

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

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).			
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		لــــا
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	_	

Part	Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	<u> </u>				
L	below, the governing body of a supported organization?	11a		-		
	A family member of a person described in (a) above? A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11b 11c	ļ <u> </u>			
	on B. Type I Supporting Organizations	1110	L	1,		
000	5.1 21 1 Jpo 1 cupporting Cigarina discons		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	ł				
	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,	ľ				
	supervised, or controlled the supporting organization.	2				
Section	on C. Type II Supporting Organizations		1-,			
			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).	_	 			
Saction	on D. All Type III Supporting Organizations	1	L	L		
Occur	on D. All Type III Supporting Significations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1.00			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax					
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the					
	organization's governing documents in effect on the date of notification, to the extent not previously provided?					
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	ľ				
	the organization maintained a close and continuous working relationship with the supported organization(s).					
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2				
_	significant voice in the organization's investment policies and in directing the use of the organization's					
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's					
	supported organizations played in this regard.	3				
Section	on E. Type III Functionally Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s)		
а	☐ The organization satisfied the Activities Test. Complete line 2 below.					
b	The organization is the parent of each of its supported organizations. Complete line 3 below.					
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).		
2	Activities Test. Answer (a) and (b) below.		Yes	No		
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of					
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify					
	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	-				
h	•	2a	<u> </u>			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1				
	reasons for the organization's position that its supported organization(s) would have engaged in these	1		!		
	activities but for the organization's involvement.	2b				
3	Parent of Supported Organizations. Answer (a) and (b) below.	ĺ				
а	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	<u></u>		ļ		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	L			

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

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
_ 1	Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted	-
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			<u> </u>
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 whice	h the organization is res	ponsive	
	(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			
Se	ection 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	•		
а	1			
b	From 2013			
С	From 2014			-
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
•	Carryover from 2012 not applied (see instructions)			-
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: \$	- 1,	- J K b	- '
а	Applied to underdistributions of prior years			!
b	Applied to 2017 distributable amount			
С	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. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result 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:			
а	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			
_				

	_
D	
Mage	•

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.)	
Part II, Line 10 - Other Income: Sales of forgiveness curriculum guides, forgiveness manuals and forgiveness CE Course.		

	•	
••••		
***************************************	,	
	,	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2017
Open to Public Inspection

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

International Forgiveness Institute, Inc.	39-1832533	
Part I, Line 4, Investment Income:		
Description [.]	Amount:	
Interest Income (Bank Savings Account)	\$ 62	
Part I, Line 16, Other Expenses		
Research/Education Development Materials	\$ 6,892.	
Office Expenses (Supplies)	3,662.	
Information Technology/Website & Social Media Development	14,541	
Travel	31,324.	
Conference Hosting Expenses (Venue, Audio-Visual, Materials, Speakers, Food, Interpreters)	32,887	
Miscellaneous Expenses	1,114.	
Total (to Line 16)	\$ 90,420	
Part III, Primary Exempt Purpose:		
The International Forgiveness Institute is dedicated to helping people gain knowledge about forgiveness and to encourage them to		
use that knowledge for personal, group, and societal renewal		
Part III, Line 28, Program Service Accomplishments.		
The primary focus of the International Forgiveness Institute (IFI) during calendar year 2017 was contin	nuation of its Forgiveness Education	
Programs In schools throughout the world, partiularly those in war-torn or oppressed areas The IFI I	nas established programs, using its	
copyrighted Curriculum Guides for grades pre kindergarten through 12, in 33 countries around the wo	orld. To expand its educational outreach	
to additional areas, the IFI conducted an international Forgiveness Education Conference during 2017. "The Jerusalem Conference on		
Forgiveness for Individual, Family, and Community Renewal" was hosted by the IFI on July 12 and 13	, 2017, in Jerusalem, Israel Nineteen	
speakers presented to more than 300 attendees from 22 countries around the world. The ultimate goal of our education programs is to help		
children learn about and adopt forgiveness attitudes that will enable them to promote inherent worth and respect for others leading to more		
peaceful communities.		