Click on the question-mark icons to display help windows.
The information provided will enable you to file a more complete return and reduce the chances the IRS has to contact you

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C&E 989

# Form 990-EZ

## 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.

▶ Go to *www.irs.gov/Form990EZ* for instructions and the latest information.

OMB No 1545-1150

**2017**

**Open to Public Inspection**

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning Jan 1 , 2017, and ending Dec 31 , 20 17

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

C Name of organization
Conscious Connections Foundation

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
PO Box 342

City or town, state or province, country, and ZIP or foreign postal code
Spokane, WA 99224 03

D Employer identification number
47-160219O

E Telephone number
509-499-3320

F Group Exemption Number ▶

G Accounting Method: ☐ Cash ☑ Accrual Other (specify) ▶

H Check ▶ ☐ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I **Website:** ▶ www.consciousconnectionsfoundation.org

J **Tax-exempt status** (check only one) – ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527

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

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 54,921.00

**Part I** **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I ☑

| | | | | | |
|---|---|---|---|---|---|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received | | 1 | 54,819.00 |
| | 2 | Program service revenue including government fees and contracts | | 2 | 0 |
| | 3 | Membership dues and assessments | | 3 | 0 |
| | 4 | Investment income | | 4 | 102.00 |
| | 5a | Gross amount from sale of assets other than inventory | 5a 0 | | |
| | b | Less: cost or other basis and sales expenses | 5b 0 | | |
| | c | Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) | | 5c | 0 |
| | 6 | Gaming and fundraising events | | | |
| | a | Gross income from gaming (attach Schedule G if greater than $15,000) | 6a 0 | | |
| | b | Gross income from fundraising events (not including $ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000) | 6b 0 | | |
| | c | Less: direct expenses from gaming and fundraising events | 6c 0 | | |
| | d | Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) | | 6d | 0 |
| | 7a | Gross sales of inventory, less returns and allowances | 7a 0 | | |
| | b | Less: cost of goods sold | 7b 0 | | |
| | c | Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) | | 7c | 0 |
| | 8 | Other revenue (describe in Schedule O) | | 8 | 0 |
| | 9 | **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶ | | 9 | 54,921.00 |
| Expenses | 10 | Grants and similar amounts paid (list in Schedule O) | | 10 | 33,470.00 |
| | 11 | Benefits paid to or for members | | 11 | 0 |
| | 12 | Salaries, other compensation, and employee benefits | | 12 | 0 |
| | 13 | Professional fees and other payments to independent contractors | | 13 | 0 |
| | 14 | Occupancy, rent, utilities, and maintenance | | 14 | 0 |
| | 15 | Printing, publications, postage, and shipping | | 15 | 0 |
| | 16 | Other expenses (describe in Schedule O) | | 16 | 775.00 |
| | 17 | **Total expenses.** Add lines 10 through 16 ▶ | | 17 | 34,245.00 |
| Net Assets | 18 | Excess or (deficit) for the year (Subtract line 17 from line 9) | | 18 | 20,676.00 |
| | 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | | 19 | 107,518.00 |
| | 20 | Other changes in net assets or fund balances (explain in Schedule O) | | 20 | 0 |
| | 21 | Net assets or fund balances at end of year. Combine lines 18 through 20 ▶ | | 21 | 128,194.00 |

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**Part II Balance Sheets** (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II . . . . . ☐

| | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|
| 22 | Cash, savings, and investments | 107518.00 | 22 | 128,194.00 |
| 23 | Land and buildings | 0 | 23 | 0 |
| 24 | Other assets (describe in Schedule O) | 0 | 24 | 0 |
| 25 | **Total assets** | 107,518.00 | 25 | 128,194 00 |
| 26 | **Total liabilities** (describe in Schedule O) | 0 | 26 | 0 |
| 27 | **Net assets or fund balances** (line 27 of column (B) **must** agree with line 21) | 107,518.00 | 27 | 128,194.00 |

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III . . ☑

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**Expenses** (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

28 **Power of 5 Educational Stipends (see schedule O)**

(Grants $ 25,000.00) If this amount includes foreign grants, check here . . . . ▶ ☑ **28a** 25,000.00

29 **Deuralie Community Service Center Clinic Salaries (see schedule O)**

(Grants $ 2840.00) If this amount includes foreign grants, check here . . . . ▶ ☑ **29a** 2840.00

30 **Girl's Higher Education (class 11/12) Scholarships**

(Grants $ 2,000.00) If this amount includes foreign grants, check here . . . . ▶ ☑ **30a** 2000.00

31 Other program services (describe in Schedule O) . . . . . .
(Grants $ 3630.00) If this amount includes foreign grants, check here . . . . ▶ ☑ **31a** 3630.00

32 **Total program service expenses** (add lines 28a through 31a) . . . . . ▶ **32** 33,470.00

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated—see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV . . . . . ☐

| (a) Name and title | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|---|---|---|---|---|
| Denise Attwood<br>Chair/President | 5 | 0 | 0 | 0 |
| Cameron Conner<br>Co-Vice Chair/Vice President | 1 | 0 | 0 | 0 |
| Austin Zimmerman<br>Secretary | 3 | 0 | 0 | 0 |
| Saskia Peck<br>Treasurer | 1 | 0 | 0 | 0 |
| James Conner<br>Co-Vice chair/Vice President | 1 | 0 | 0 | 0 |
| Martha Newell<br>Board Member | 1 | 0 | 0 | 0 |
| Kimberly Maynard<br>Board member | 1 | 0 | 0 | 0 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

ABO



**Part V** **Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V . ☐

| | | | Yes | No |
|---|---|---|---|---|
| 33 | Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a 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 | If "Yes" to line 35a, has the organization filed a Form 990-T for the year? *If "No," provide an explanation in Schedule O* | 35b | | ✔ |
| c | 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 | 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 ▶ 37a | | | |
| 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 | | ✔ |
| b | If "Yes," complete Schedule L, Part II and enter the total amount involved 38b | | | |
| 39 | Section 501(c)(7) organizations. Enter: | | | |
| a | Initiation fees and capital contributions included on line 9 39a | | | |
| b | Gross receipts, included on line 9, for public use of club facilities 39b | | | |
| 40a | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶ | | | |
| 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 | | ✔ |
| c | 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 ▶ | | | |
| e | 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 ▶ **Washington**

42a The organization's books are in care of ▶ **Denise Attwood** Telephone no. ▶ **509-499-3320**
Located at ▶ **13212 South Austin Road, Spokane, WA** ZIP + 4 ▶ **99224-8257**

| | | | Yes | No |
|---|---|---|---|---|
| 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)? 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 Financial Accounts (FBAR). | 42b | | ✔ |
| c | 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 . . . . . ▶ 43

| | | | Yes | No |
|---|---|---|---|---|
| 44a | Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be 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 | | ✔ |
| 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 | | ✔ |

| | | | Yes | No |
|---|---|---|---|---|
| 46 | Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 46 | | ✔ |

**Part VI** **Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

| | | | Yes | No |
|---|---|---|---|---|
| 47 | 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 | 47 | | ✔ |
| 48 | Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 48 | | ✔ |
| 49a | Did the organization make any transfers to an exempt non-charitable related organization? | 49a | | ✔ |
| b | If "Yes," was the related organization a section 527 organization? | 49b | | ✔ |

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

| (a) Name and title of each employee | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|---|---|---|---|---|
| none | none | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

f Total number of other employees paid over $100,000 ▶ none

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

| (a) Name and business address of each independent contractor | (b) Type of service | (c) Compensation |
|---|---|---|
| none | none | |
| | | |
| | | |
| | | |
| | | |

d Total number of other independent contractors each receiving over $100,000 ▶ none

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ ☑ Yes ☐ No

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**

▶ Denise Attwood — Signature of officer — Date: May 12, 2018

▶ Denise Attwood Chair/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 |
|---|---|---|---|---|
| | | | | |

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

**SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No 1545-0047

**2017**

**Open to Public Inspection**

| Name of the organization | Employer identification number |
|---|---|
| Conscious Connections Foundation | 47-1602190 |

**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.)

07

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 **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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized 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) |
|---|---|---|---|---|---|---|
| (A) | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | | |

**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 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.") . . . | none | 46,632 00 | 41,570 00 | 39,448.00 | 54,864.00 | 182,514.00 |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . | none | 0 | 0 | 0 | 0 | 0 |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . | none | 0 | 0 | 0 | 0 | 0 |
| 4 **Total.** Add lines 1 through 3 . . . . | none | 46,632.00 | 41,570.00 | 39,448.00 | 54,864.00 | 182,514.00 |
| 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) . . | | | | | | 25,025.00 |
| 6 **Public support.** Subtract line 5 from line 4 | | | | | | 157,489 00 |

**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 . . . . . | none | 46,632.00 | 41,570 00 | 39,448.00 | 54,864.00 | 182,514.00 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . | | .24 | | | .04 | 28 |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . | | | | 255.00 | 55.00 | 310 00 |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . | | | 172,422.00 | 17,233.00 | 55.00 | 189,655.00 |
| 11 **Total support.** Add lines 7 through 10 | | | | | | 372,479.00 |
| 12 Gross receipts from related activities, etc. (see instructions) . . . . . | | | | | 12 | 372,479.00 |

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 from 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.") | | | | | | |
| 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 | | | | | | |
| 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.) | | | | | | |

### 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 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether 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.) | | | | | | |

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 | % |
| 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 | % |
| 18 | Investment income percentage from **2016** Schedule A, Part III, line 17 | 18 | % |

19a **33 1/3% 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

| | | 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* | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).* | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below* | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.* | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.* | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.* | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.* | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).* | | |
| b | **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | | |
| c | **Substitutions only.** Was the substitution the result of an event beyond the organization's control? | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.*** | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)* | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.*** | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.*** | | |
| c | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.*** | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.* | | |
| b | Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)* | | |

**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): | | | |
| **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. 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: | | | |
| a | Excess from 2013 | | | |
| b | Excess from 2014 . . . | | | |
| c | Excess from 2015 . . . | | | |
| d | Excess from 2016 . . . | | | |
| e | Excess from 2017 . . . | | | |

**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, Section B, Line 10:

CCF was established in September of 2014 for the purposes of providing educational stipends, scholarships, health care, economic skills development for marginalized individulas and their families in Nepal. Our expectation was to raise between $30,000 to $40,000 a year for the programs, including the Deurali Community Service Center Basari Clinic, that was built in 2010. On April 25, 2015 Nepal experienced a 7.9 magnitude earthquake and the every program that CCF was involved with was impacted heavily by the earthquake as were many others. The Deurali Community Service Center Baseri Clinic was completely destroyed. CCF was immediately identified as a reliable and trusted source for earthquake relief because of its founders 30 years of connections to Nepal. The clinic had to be rebuilt and much relief work had to be done. Because of our trusted and valuable relationships in Nepal we were able to receive donations and distribute them widely We were able to rebuild the Baseri Clinic by March of 2016. Please see http://consciousconnectionsfoundation.org/nepalearthquakerelief/ for more details about our earthquake relief work from 2015-2017.

The total in Section B Line 10 column (c)2015 are funds specifically donated for Earthquake relief in 2015=$172,422.00

The total in Section B Line 10 column (d) 2016 are funds specifically donated for Earthquake relief in 2016= $17,233

CCF was no longer soliciting funds for earthquake relief in 2017 and is currently finishing earthquake related projects with funds remaining.

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

OMB No 1545-0047

2017

Open to Public Inspection

| Name of the organization | Employer identification number |
|---|---|
| Conscious Connections Foundation | 47=160219 |

**Part I: Revenue, Expenses and Changes in Net Assets or Fund Balances**

Line 10: Grants and similar amounts paid-$ 33,470 (for full description of programs see Part III)

1. Power of 5 Child Education Stipends-$ 25,000

2. Deurali Community Service Center (aka Baseri Clinic) Salaries-$ 2840

3. Girl's Higher Education Class 11/12 Scholarships-$ 2000

4. Girl's Education Program Administrator-$ 1950

5. Ghatbesi Girl's Higher Education Program-$ 1200

6. Girl's Menstrual Education Program-$ 480

Line 16: Other Expenses-$ 775

1. Website Expenses-$ 114

2. Bank, Credit Card and Brokerage Fees- $ 661

**Part II: Balance sheets**

Line 22A- Cash Savings and Investments-Beginning of 2017-$ 107,518

Breakdown of the starting funds in 2017 is as follows:

Restricted Funds:

1. Baseri Clinic-$ 24,546.79 donated in 2014 for the sole use of maintenance, salaries and expenses in the normal operations of the Deurali Health Clinic in Dhadagaun, Nepal.

2. Earthquake Relief Funds-$ 74,288.79

a. Baseri Clinic rebuild-$ 16,191.91

b. General Earthquake relief funds-$ 41,000.24

c. Artisan Earthquake relief funds-$ 17,096.64

Non-restricted Funds:

1. General Fund-$ 6907.20

Line 22B-Cash Savings and Investments-End of 2017-$ 128,194.20

The breakdown of the remaining funds is as follows:

Restricted Funds:

Name of the organization: Conscious Connections Foundation

Employer identification number: 47-160219

1 Baseri Clinic-$ 25,268.79 donated in 2014 for the sole use of maintenance, salaries and expenses in the normal operations of the Deurali Health Clinic in Dhadagaun, Nepal

2. Earthquake Relief Funds-$ 73,303.79 donated for use in earthquake rebuilding, assistance and disaster risk reduction after the 2015 earthquake n Nepal. Broken down as follows:

a. Baseri Clinic rebuild-$ 15,191.91

b. General Earthquake relief funds-$ 41,015.24

c Artisan Earthquake relief funds-$ 17,096.64

3. Power of 5 ACP Child Education Fund-$ 2369.30 for 2018 funding commitment

4. ACP Girl's College Scholarship fund-$ 1547.51 for 2018 funding commitment

5 ACP administrative educational assistant-$ 1050 for 2018 funding commitment

6. Menstrual Pad Project-$ 481.29 for 2018 project startup

7. Ghatbeso Girl's Scholarship and Teacher Salaries program-$ 2291.76 for 2018 funding commitment

8. Solar Light purchases-$ 16 for 2018 distribution

Non-Restricted Funds:

1. General Fund-$ 21,865.76 from year end giving campaign for 2018 program expenses

Part III· Primary Exempt Purpose: Conscious Connections Foundation is organized to raise funds to provide educational stipends and scholarships, health care, economic skills development and facilities improvement to marginalized individuals and their families in Nepal.

Statement of Purpose Service Accomplishments: Three largest programs

Line 28) Power of 5 Educational Stipends, 2017 $ 25,000 grant

Impact in 2017: 117 low income children stayed in school ($ 14,040 in stipends) End of Year awards ceremony and appreciation event for children and parents held ($ 360), $ 10,600 reserve set aside for the future stability of the program

Grantee: Association for Craft Producers, Child Education Fund

Grantee Address: GPO Box 3701 Ravi Bhawan Mode, Kathmandu, Nepal Phone: 977-1-427-5108

Executive Director. Meera Bhatterai, Social Program Director Revita Shrestra

Conscious Connections Foundation (CCF) understands the positive change that comes from empowering women and educating their daughters in Nepal. We have seen the lack of infrastructural support for women who are often the sole income earners for their entire extended families and the impact this has on their daughters, who are often taken out of school due to lack of finances. The longer a girl is able to stay in school the longer she remains unmarried and the more choice she has in life. "Around the world, girls face complex

(continued from page 2) physical, cultural nd financial barriers in accessing education. As a girl grows older the fight to get an education becomes even harder. Her family must be willing to pay school fees....She may be forced to marry. And she often lacks the support she needs to learn. Yet, we know that educating girls can transform lives, families, communities, and entire countries. When girls are educated, they lead healthier and more productive lives. They gain the skills, knowledge, and confidence to break the cycle of poverty and help strengthen their societies." www.letgirlslearn.gov

CCF's fundraising for girl's education came into being to support a program created by the Association for Craft Producers (ACP in Nepal to give struggling artisans the funds necessary to keep their children, especially their girl children, in school. ACP is a Nepali based, not for profit, Fair Trade organization providing services to low-income Nepalese craft producers to help them establish better lives for themselves and their families.

In the 1990's ACP started their educational stipend allowance for producers to help them keep their girl children in school. ACP provides a "girl child" stipend to help struggling families keep their girls in school without any cost to the family. The family in return provides monthly evidence of the girl's attendance and progress in school. ACP found that even this small stipend helped many families and girls were, as a result, staying in school. Due to lack of a consistent funding source, however, and due to high demaand, the stipend could only be extended to each child for a maximum of 3 years. Many girls were forced to leave school after the 3 year stipend was exhausted leaving them vulnerable and without education. It was obvious to CCF that ACP had an effective program that children and families wanted to take part in but that they needed a reliable funding partner to create the stability in their program so that all children could remain in school for their entire 1-10 year education.

Every year CCF raises funds and makes grants to ACP to strengthen their educational stipend program. ACP administers the funds raised by CCF and understands CCF's desire to focus on girls but their stipend is now also open to boys in need as well. They feel that no child should want for education. Therefore, although CCF emphasizes girl's education we cannot guarantee to our donors that all of the funds raised go exclusively to girls. We do know, however, that all funds go to girls first and then, when necessary , to boys in need. For more detailed information on the history of this program please visit CCF's website at www.consciousconnectionsfoundation.org and read our Part 1 of our 2016 full annual report.

In early 2015, 75 children were enrolled in the program, 50% girls and 50% boys and by July and additional 25 students were added bringing the total to 100 students for the 2015/16 school year. In 2017 that number rose to 120 children. By the end of 2017, according to ACP's records, their child education program has helped over 590 children stay in school longer than they would have otherwise been able.

Name of the organization: Conscious Connections Foundation

Employer identification number: 47-160219

How ACP's Educational Program works·

Acp's Child Education Fund is run and administered entirely by Meera Bhatterai, the Executive Director of ACP and Revita Shrestra, the head of the social programs department of ACP. Meera and Revita work hard to make this program successful. Applications for stipends are submitted and reviewed annually and stipends are given on a monthly basis as proof of attendance and progress of each student is provided. Any family applying for a stipend must first get it for their girl child, if there is no girl child in the family, or if the family qualifies for more than one stipend then a boy can receive it. An annual event of games and acknowledgement of top scholars is held at ACP for all of the children and their parents to congratulate them on their successful participation.

CCF is currently the major donor/supporter of ACP's Child Education Fund. This makes the program vulnerable. As a result, in 2015 CCF made a commitment to ACP to help them create a solid financial foundation for the program for the years ahead. CCF agreed to raise $ 25,000 a year from 2015-2019 for a total of $ 100,000, part to be used for stipends and part to enable ACP to create reserves for the programs continued operation. Creating reserves has been an important issue for ACP because they do not want to promise stipends if they don't have the funds to follow through with their commitment They also want to be able to cover inflation and be able to expand the stipends to eligible studens for their entire 10 year education. At the end of 2019 ACP hopes to add 20 eligible children each year for the following 5 years with a maximum of 200 students enrolled each year.

According to Revita Shrestra, "every year ACP's Child Education Fund has targeted one more goal and has achieved it, whether it is increasing the monthly stipend, the number of children supported or extending the years of support. In 2017 the program continued to be a success . There are currently 117 children enrolled and each child receives $ 10 per month as their educational stipend.".

In an email to CCF, Revita stated that in 2016 the program gained more in popularity as the number of producer families applying for the program increased dramatically Now there are hundreds of staff/producers etting the benefit and they are exptremely appreciative. There are instances were producers that have planned to discontinue their work have decided otherwise, as they did not want to pass up the scholarship for their children. "The Child Education Fund is considered, by far, as one of the most appreciated and successful benefit packages provided to the producers. It has continued to bestow a positive impact in the lives of the children whose attainment of education was once in question due to their financial instability."

Line 29) Deurali Community Service Center Clinic Salaries-$ 2840 grant

Impact: In 2017 approximately 10 people per day visit the clinic for primary health care concerns- approximately 3000 people per year. 3 local women are employed at the clinic and receive well paid salaries. 7 villages in remote Nepal have access to primary health care within a 30 minute walk and many other even more remote villages can access the clinic.

Grantee: Deurali Community Service Center (aka Baseri Clinic, Dhadagaun)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
Conscious Connections Foundation

Employer identification number
47-160219



(continued from page 4) Grantee Address: Dhadagaun, Baseri VDC, Dhading District Nepal

Administrator: Dhan Bahadur Gurung, Deurali Community Service Center Board Treasurer, gurungdhanee@hotmail.com

The Deurali Community Service Center's Baseri Clinic is located in the remote village of Dhadagaun, Nepal. The clinic was established because it was identified as an area without basic healthcare and because lack of access to basic healthcare for even the simplest issues can turn fatal. Dhadagaun needed a primary healthcare facility to assess and address these basic needs.

The clinic was build using private funds and opened in February of 2010,serving thousands of people in 7 nearby communities and even more in remote areas. Within 7 months of opening, over 1600 patients had been seen at the clinic for everything from maternal healthcare issues to burns, breaks, and intestinal disorders. When CCF was created in 2014 the clinic became a project of CCF. Tragically on April 25, 2015 the Baseri clinic was reduced to rubble in the massive 7.9 earthquake that struck Nepal. With CCF's help a temporary clinic was constructed within 2 weeks of the earthquake, new land was purchased and a beautiful 5 room, insulated, quiet and earthquake resilient building was completed in early 2016. This new clinic is easily accessible to all of the surrounding communities and was fully built and functioning within 14 months of the earthquake. Once again, it is a valuable asset to this remote area of Nepal.

The Deurali Community Service Center (DCSC) is operated by a village non-profit board that is registered with the Nepali Government All funds paid by CCF for medical supplies and staff salaries are transferred to the board treasurer Dhane Gurung and distributed by their board. In 2015 after 2.5 years of hard work by former CCF board member Sita Gurung (who sits on the DCSC board) the clinic was formally recognized as a "model clinic" by the government of Nepal and DCSC entered into a public-private partnership with the Nepali government. Under this arrangement the government pays a portion of the salaries of 2 of the clinic staff for 9 months of the year and provides so me medicines and supplies. CCF provides for a portion of the salries for 9 months of the year and the full salaries for 3 months plus 1 month of festival allowance. CCF also provides for the maintenance of the clinic building itself as well as any extra amenities that the government does not provide.

The clinic currently has a staff of 3 dedicated women:

1) Maya Gurung, an Associate Nurse Midwife (ANM) with 5 years experience working in a government clinic delivering 30-35 babies per month. She is on call 24/7 for birthing and maternity issues only.

2) Basanti Gale, a Certified Medical Assistant (CMA) who previously worked for 4 years in a private clinic as a nurse after which she spent 3 years at a government clinic. She works 10-3 and treats primary care issues such as diarrhea, coughs, bronchitis, boils, eye problems, fever allergy, ringworm and some burns.

Name of the organization: Conscious Connections Foundation

Employer identification number: 47-160219

3) Sita Gale who is Maya and Basanti's assistant and does all of the cleaning, opeing and closing of the clinid and takes care of staff and patients needs.

In 2017 the clinic was staffed from 10am-3pm 6 days a week with the nurse midwife on call 24/7 for pregnancy related issues. There were over 3000 patient visits, an average of 10 perople per day. Treatments include IV rehydration, fevers, minor burns, rashes and other primary care issues CCF's costs for maintaining the clinic in 2017 was $2840 which equates to about .95 cents per person cared for. Because of the limitations of the facilities, the clinic staff does not perform operations and x-rays so they had to refer and transfer some patients on to more advanced facilities in Dhading and Kathmandu.

Line 30) Girl's Higher Education (class 11/12) Scholarships-$2,000 Grant

Impact: 3 young Nepali women in 2017 got a total of $1000 grant toward higher education. $1000 was set aside as reserve for future stability and growth of the program.

Grantee: Association for Craft Producers, Child Education Fund

Grantee Address: GPO Box 3701 Ravi Bhawan Mode, Kathmandu, Nepal phone-977-1-427-5108

Executive Director Meera Bhatterai, Social Program Director Revita Shrestra

In 2014, CCF and ACP wanted to encourage merit and need based girls to continue on to college (11 and 12th class in Nepal) and provide younger girls with examples of older girls going on into higher education. One of the girls who had inspired CCF's power of 5 program was the first recipient of a 2 year scholarship for college This program reflects and supports CCF's and ACP's vision to give Nepali girls, who have the need, ability and desire, the means to continue their education past the 10th class.

Every year CCF raises money for a $2000 grant that is administered by ACP. The grant provides a $1000 scholarship to one or more girls who apply based on need and merit. The grant also provides $1,000 in reserve for the program to provide for the financial stability and expansion in the future. The scholarship is exclusive to girls seeing to go on to the 11th and 12th class and the girl scholar recipient must have one parent that works at ACP. The emphasis of the scholarship award is to grant it to the most outstanding girl scholar with the greatest need but all applicants must have passed the Student Leaving Certificate exams with distinction (80%).

Since 2014 the Girl's College Scholarship program has been funded entirely by CCF. In 2016, however, ACP decided to institutionalize this program which will allow them to seek funding from other donors and means that they are fully invested in the future of this program as well as its expansion As with the Child Education program, the College Scholarship program is administered by Meera Bhatterai and Revita Shrestra of ACP.

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
Conscious Connections Foundation

Employer identification number
47-160219



(continued from page 6) Line 31a) ACP Girl's Education Program Administrator-$1950 Grant

Impact: 120 children receiving the child education stipends and girl's college scholarships plus their parents receve mentorship and help navigating the educational system for their children.

Grantee: Association for Craft Producers, GPO 3701 Ravi Bhawan Mode Kathmandu, Nepal phone: 977-1-427-5108

Executive Director: Meera Bhatterai Social Program Director: Revita Shrestra

As the Child Education Fund and Girl's Higher Education Fund of ACP have both grown in recent years the administration and reporting requirements have grown along with it. Also, there has been an increasing awareness that some of the children involved need mentoring in how to do their homework and plan their future into higher education. In August of 2017 ACP and CCF agreed to hire a young woman graduate of higher education and split the salary to provide a full time administrative position as an employee of ACP. This position is intended to help oversee the education programs, report to CCF and ACP and mentor and counsel the girls as they move through the educational system and puberty.

Line 31b) Ghatbesi Girl's Higher Education Program-$1200 grant

Impact: 7 rural need and merit based girl scholars receive scholarships to go on to class 11/12

Grantee: Jageshwor Secondary School. Gorkha District Bhimsen VDC, Ward 8, Ghatbesi-Mahadevtar, Nepal

Administrator AD Aryal

CCF is strongly committed to creating educational opportunities for girls in Nepal, especially those who come from marginalized families or rural villages. Through Mr. AD Aryal, CCF was introduced to the village of Ghatbesi and engaged in a pilot project to help the communities girls advance on to hgher education. Mr. Aryal explained that although the village of Ghatbesi has a strong commitment to girl's education through the 10th class, the financial situation of the families and the costs of further education often prohibit girls from moving on.

In 2016 CCF agreed to provide funding for 7 merit and need based college scholarships to the top girl scholars of Ghatbesi. The Ghatbesi scholarships provide 6 scholarships to local schools at $100/year and one $600 scholarship for an exceptional girl student to attend college in Kathmandu. Each year CCF pays $1200 and we will renew our commitment every 2 years based on the results of this pilot project.

Line 31 c) ACP Girl's Menstrual Education Program- $480 grant

Impact: Girl's and their mothers involved in the Girl Child Education Program and Girl's Higher Education Scholarship program will receive menstrual hygiene education and demystification of the menstrual process.

Grantee: ACP (please see address in 31a))

| Name of the organization | Employer identification number |
|---|---|
| Conscious Connections Foundation | 47-160219 |

CCF understands that there is a large taboo on the topic of menstruation in Nepal. Much of that taboo is based on cultural myths that menstruation is not clean and should not be talked about. Because CCF is invested in sending girls to school our programs for girl's education are directly affected by these cultural misconceptions. Many girls miss up to a week of class due to having their period. In an effort to help educate about and dispel the myths of menstruation CCF purchased 120 copies of the book "Menstrupedia" for distribution to girls involved in all of the education and health care programs that CCF funds. Menstrupedia is a book written in India and translated into Nepali that helps to end the menstruation myth in culturally sensitive ways and to empower girls by opening up the conversation and developing language to address the topic. This tool will be used by the ACP administrative assistant to help women break through the barriers of damaging cultural myths about women and their periods.

Denise Attwood — May 12, 2018