		Form <b>990</b>		OMB No 1545-0047		
j.		Return of Organization Exempt From I	ept private foundations)	2017		
	Depa Interi	rtment of the Treasury  Do not enter social security numbers on this form as it me the Treasury  Go to www.irs.gov/Form990 for instructions and the late	ay be made public.	Open to Public Inspection		
		For the 2017 calendar year, or tax year beginning , 2017, and en		-1.4161		
	В	Check if applicable C	1- ' '	Employer identification number		
		Address change International FIRST Committee Associatio  Name change C/O Toohey Law Group	E Telephon	060352		
		H 1340 Commercial Street	- ·			
		Initial return Final return/terminated Manchester, NH 03101	603-	-669-5139		
		Amended return	G Gross red	ceipts \$ 2,259,885.		
		Application pending F Name and address of principal officer Kevin Wensing	H(a) Is this a group return			
		Same As C Above	His) Are all subordinates i	ncluded? Yes No		
	ī	Tax-exempt status	The, allocity a list (	see maddedonsy		
	J	Website: ► www.first.global	H(c) Group exemption num			
	K	Form of organization X Corporation Trust Association Other L Year of fo	rmation 2016 M St	ate of legal domicile DE		
	Pa					
		1 Briefly describe the organization's mission or most significant activities See Sci	hedule_O			
	5c					
	Activities & Governance					
	ove	2 Check this box ► ☐ if the organization discontinued its operations or disposed of	more than 25% of its n			
	2	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Rart VI, line 1b)	<u> </u>	3 <u>1</u>		
	es	5 Total number of individuals employed in calendar year 2017 (Page Vi line 2a)	-	5 17		
	ivit	6 Total number of volunteers (estimate if necessary)		6 600		
	Ac	7a Total unrelated business revenue from Part VIII, column (C), line (2)		7a 0.		
		b Net unrelated business taxable income from Form 990-T, line 34	Duine View	7b 0.		
		8 Contributions and grants (Part VIII, line 1h)	Prior Year 1, 281, 10	Current Year 1,850,000.		
	ne	9 Program service revenue (Part VIII, line 2g)	1,201,10	409,885.		
	Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)				
	æ	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				
	_	12 Total revenue — add lines 8 through 11 (must equal Part Viti, column (4) line 12)	1,281,10			
-		13 Grants and similar amounts paid (Part IX, column (A), lines 13)		556,235.		
SCANNE		<ul> <li>Benefits paid to or for members (Part IX, column (A), line 4)</li> <li>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</li> </ul>	143,72	700 100		
Š	98	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16a Professional fundraising fees (Part IX, column (A), line 11e)	143,74	29. 709,108.		
3	Expenses					
m	Exp	b Total fundraising expenses (Part IX, column (D), line 25)	124 54	1 007 455		
O		<ul> <li>17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)</li> <li>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</li> </ul>	134,59			
H		18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12	278,32			
EB.	<b>x</b> 8	13 Nevenue less expenses subtract file to from file 12	Beginning of Current			
-	ete or Iancee	20 Total assets (Part X, line 16)	1,040,4			
8	Ase	21 Total liabilities (Part X, line 26)	37,6			
2019	ş <u>Ş</u>	22 Net assets or fund balances. Subtract line 21 from line 20	1,002,7	79. 189,866.		
2		rt II Signature Block				
	Unde	r penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, ar blete Declaration of prepares (other than officer) is based on all information of which preparer has any knowledge	nd to the best of my knowledge a	and belief, it is true, correct, and		
		Grendar L. Justin	· ·,· · · · · · · · · · · · · · · · ·	VEMBER ZOIS		
	Sig	Signature of officer	Date			
	He					
		Type or print name and title		Torus		
		Print/Type preparer's name Preparer's signature Date	Check	If PTIN		
	Pa		self employe	<u> </u>		
		e Only   Firm's address   Firm's address	Eumin File B			
	US	Firm's address	Firm's EIN			
	Max	the IRS discuss this return with the preparer shown above? (see instructions)	Phone no	Yes No		
		A Far Bananyari Badyation Act Nation and the generate instructions	TECA01131 00/00/17	Form 990 (2017)		

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	990 (2017) International FIRST Committee Associatio	81-1	0603	52	F	age 2
	tillI■ Statement of Program Service Accomplishments					
	Check if Schedule O contains a response or note to any line in this Part III					X
1	Briefly describe the organization's mission					
۶,	See Schedule O		. <b>-</b>			
2	Did the organization undertake any significant program services during the year which were not listed on the principle.	or	_			
	Form 990 or 990-EZ?			Yes	X	No
	If 'Yes,' describe these new services on Schedule O.		_		_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O		_			
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported.	ices, as i s to othe	measur ers, the	ed by o total e	expen xpens	ses ses,
4 6	(Code. ) (Expenses \$ 2,890,130. including grants of \$ 556,235.) (F	levenue	\$	40	9,8	35.)
	In July 2017, FIRST Global hosted the inaugural FIRST Global Cha.					
	DC. An olympic-style competition, the 2017 games hosted teams f					
	plus several continental teams. Each team is allowed a maximum					
	competitors to attend the event with an unlimited number of team	membe	rs a	īlow	ed t	0
	work on the challenge in their home country in preparation for the					
	guidance of volunteer mentors, approximately 1,100 high school st	udent	s at	tend	ed t	he
	event. In preparation for the 2017 FIRST Global Challenge, over					
	actively mentored participants. These community-based volunteers	rano	e fr	OM C	 i wi c	
	minded high school and college students, to entire university rol	ontics	and	<u> </u>		
	engineering departments, and provided teams with mechanical, elec-					
		LLICO	T-1- F	rogr	<u> </u>	119,
	and strategic advice.					
41	(Code: ) (Expenses \$ including grants of \$ ) (F	evenue	\$			)
			-			
				<b>-</b>		
				<b>-</b>		
				<b>-</b>		
			<del>-</del>			
			<del>-</del>			
				<del>-</del>		
4	(Code: ) (Expenses \$ including grants of \$ ) (F	Revenue	\$			)
71						
		<b></b> -				
		<b>-</b>				
		<b>. – –</b> – -				
		<b>. – –</b> – -				
40	Other program services (Describe in Schedule O.)					
	(Expenses \$ including grants of \$ ) (Revenue \$				)	
	Total program service expenses ► 2,890,130.					/001=
BAA	TEEA0102L 12/05/17			Forr	n <b>990</b>	(2017)

			Yes	No
į	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
á	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a		Х
١	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
(	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
(	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	,	Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х

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			Yes	No
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
ı	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	Х	
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a.	24a		Х
	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
i	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
-	<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
1	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV.	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ا	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

- 17

Check if Schedule O contains a response or note to any line in this Part V .			П
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .   1 a	1		1
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	: `	:, 1
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	<u>-</u>		- "
(gambling) winnings to prize winners?	1 c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	2,00	. 4	. ·
ments, filed for the calendar year ending with or within the year covered by this return . 2a	17	<del></del>	
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<del></del>		<del></del> -
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a		Х
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.	3 Ь		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
<b>b</b> If 'Yes,' enter the name of the foreign country: ▶	7,4	÷ ,	. 1
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		_*	
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	. 5c		
6.2 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7 Organizations that may receive deductible contributions under section 170(c).	,2r	7, -	.4.1
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	A14	
services provided to the payor?	7 a		X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			7,
Form 8282?	7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	<del></del> _		X
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		•
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	<u> </u>		(~,", I
organization have excess business holdings at any time during the year?	8		المنبخت.
9 Sponsoring organizations maintaining donor advised funds.	7	• ,	7:1
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		<u> </u>
10 Section 501(c)(7) organizations. Enter:	ŧ3 "		<u>ئ</u> وخۇ
a Initiation fees and capital contributions included on Part VIII, line 12	[ , ]		,
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>─</b>  - ;	, ,	
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders	[ , , ]		'
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources	┤ " [	,	
against amounts due or received from them )		<u>.                                    </u>	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ.,
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year . [12b]		\ . •	"
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	-	<del></del>	لننا
a Is the organization licensed to issue qualified health plans in more than one state?	13a		, ,
Note. See the instructions for additional information the organization must report on Schedule O		1 1	*-
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	,	.	[' .]
c Enter the amount of reserves on hand		,	• •
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		<del></del>
BAA TEEA0105L 08/08/17		990 (	(2017)

Form 990 (2017) International FIRST Committee Associatio 81-1060352 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI XSection A. Governing Body and Management Yes Nο 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members ٠. of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other See Schédule O X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 See Schedule O 6 Did the organization have members or stockholders? X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8 a X **b** Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No Yes X 10 a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х Schedule O how this was done 12c  $\overline{X}$ 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official 15 a Х **b** Other officers or key employees of the organization 15<sub>b</sub> If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Χ taxable entity during the year? 16a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website Other (explain in Schedule O) Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

Alexandria VA 22314

Jake Shuford 325 Commerce Street

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Form 990 (2017)	International FIRST Committee Associatio	81-1060352	Page 2
Part VII Com Inde	pensation of Officers, Directors, Trustees, Key Employees, Highes pendent Contractors	t Compensated Employe	es, and
- Chec	s if Schedule O contains a response or note to any line in this Part VII	•	
Séction A. Of	ficers, Directors, Trustees, Key Employees, and Highest Compensa	ited Employees	
organization's tax	able for all persons required to be listed. Report compensation for the calendar year ending year.		

• List all of the organization's current key employees, if any See instructions for definition of 'key employee.'

compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

	T			(C)				rrent officer, directo	<del> </del>	
(A) Name and Title	(B) Average hours per	director/trustee)					'	(D)  Reportable compensation from the organization	(E)  Reportable compensation from	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Dean Kamen	10									
President	0	X					L	0.	0.	0
(2) Maureen Toohey	5	]								
Secretary	0			X		L_		0.	0.	0
(3) Brendan Duffy Treasurer	1			х				0.	0.	0
(4) Kevin Wensing	40									
Executive Dir.	0			X				36,458.	0.	0
(5) Joseph Sestak, Jr.	40									
President	0	<u> </u>		X		<u> </u>	Ш	177,083.	0.	0
_(6)	<b>-</b> -									
<u></u>										
(8)										
(9)								- "		
(10)										
(11)										
(12)		-								<del></del>
(13)					-					
(14)		-			_	-				

- 19

	(A) Name and title	Average hours per week (list any hours for related organiza - trons below dotted line)	(do box	not o	Pos check ess poind a	sition more erson direct		one h an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other
<u>(15)</u>			-								
(16)						-					
<u>(17)</u>		<del>-</del> -									-
<u>(18)</u>			-				_				
(19)											
(20)						 					-
(21)						-				· · · · ·	
(22)								-			
(23)						_					
(24)		 									
(25)										<del></del>	
	Sub-total .	<u> </u>		Щ		<u> </u>	L—	<b></b>	213,541.	0	. 0.
	Total from continuation sheets to Part VII, Secti	on A .	-					<b>&gt;</b>	0.	0	<del></del>
	Total (add lines 1b and 1c)							<b></b>	213,541.	0	
2	Total number of individuals (including but not limited	to those li	sted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable con	npensation
	from the organization • 1										Yes No
3	Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru h ındıvıdu	stee, al	key	, em	ploy	yee,	or h	nighest compensa	ted employee	3 X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportabler than \$1	le coi 50,00	mpe	ensa If '\	tion ∕ <i>es,</i>	and ' <i>con</i>	oth <i>iple</i>	er compensation te Schedule J for	from	4 X
5	Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e compen s,' comple	satio	n fr chea	om lule	any J fo	unre r suc	late ch p	ed organization or erson	ındıvıdual	5 X
Sec	tion B. Independent Contractors										
1	Complete this table for your five highest compen compensation from the organization Report compen	sated indi sation for	epend the ca	deni alen	t co	ntra year	ctors endı	tha	at received more the truth or within the or	nan \$100,000 of ganization's tax ye	ar.
	(A) Name and business add								(B) Description (		(C) Compensation
Qui	nce Imaging 22601 Davis Drive S	Sterlin	ıg,	VA	2	016	54		Event Servi	ces	273,053.
								_			
2	Total number of independent contractors (including t		ted to	tho	se I	ıstec	abo	ve)	l who received more	than ;	18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
BAA	\$100,000 of compensation from the organization		TEEAO								Form <b>990</b> (2017)

L	Check if Schedule O contains a response or note to an	y line in this Part VI	IL		
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns . 1 a b Membership dues . 1 b c Fundraising events . 1 c d Related organizations . 1 d e Government grants (contributions) . 1 e  f All other contributions, gifts, grants, and similar amounts not included above . 1 f 1,850,000.  g Noncash contributions included in lines 1a-1f . \$				
Son	h Total. Add lines 1a-1f	1,850,000.			
<u>a</u>	Business Code				
Program Service Revenue	2a Team Participation Fees 611710 b c	409,885.	409,885.		
gram Sen	e f All other program service revenue .				
Po	g Total. Add lines 2a-2f	409,885.		<del></del>	
Other Revenue	Investment income (including dividends, interest and other similar amounts)  Income from investment of tax-exempt bond proceeds.  Royalties  (i) Real (ii) Personal  Caross rents (ii) Real (iii) Personal  Caross rental expenses (iv) Real (iv) Personal (iv				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities .   10 a Gross sales of inventory, less returns and allowances a  b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code  11 a  b				
	с	_			
	d All other revenue .				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions .	2,259,885.	409,885.	0.	0.

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) (C) (D) Do not include amounts reported on lines Total expenses Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. ٠, See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 556,235 556,235 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 213,541 170,833 42,708 0. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 0. Other salaries and wages 446,862 357,489 89,373 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes 9,741 48,705 38,964 Fees for services (non-employees): a Management **b** Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 41,279 41,279 13 Office expenses 18,403 14,722 3,681 14 Information technology 15 Royalties 16 Occupancy 13,963 17 17,454 3,491 Payments of travel or entertainment 18 expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 1,273 20 Interest 1,591 318 21 Payments to affiliates 22 Depreciation, depletion, and amortization 3,828 23 Insurance 19,142 15, 314 24 Other expenses Itemize expenses not other expenses itemize expenses not covered above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) ,.,<sup>(</sup> ٠.٠. 593,395 a Event Services 603,793 10,398 b Automobile Expense 33,321 26,657 6,664 c Rent & Lease Expense 5,520 27,600 22,080 d Postage & Shipping 16,353 13,082 3.271 24,844. 28,519 3,675 e All other expenses 25 Total functional expenses. Add lines 1 through 24e 3,072,798 2,890,130. 182,668 0. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. SOP 98-2 (ASC 958-720)

Page 11

		Check if Schedule O contains a response or note to any line in this Part	x .		
	-		(A) Beginning of year		(B) End of year
$\neg$	1	Cash – non-interest-bearing	1,040,442.	1	409,532.
	2	Savings and temporary cash investments	1,040,442.	2	405,552.
	3	Pledges and grants receivable, net	· <del>  </del>	3	
l	4	Accounts receivable, net	<del></del>	4	
Ì	4		·	-	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete		}	-,
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined un section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employee beneficiary organizations (see instructions) Complete Part II of Schedule L	s'	6	· : :
<sub>o</sub>	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Asi	9	Prepaid expenses and deferred charges	<del></del>	9	
- 1	_		,	<del>                                     </del>	,
	10 a	Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D . 10a	•		' · .
	h	Less: accumulated depreciation 10b		10 c	
	11	Investments – publicly traded securities	<del></del>	11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11	<del></del>	13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	<del></del>
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,040,442.	16	409,532.
$\rightarrow$	17	Accounts payable and accrued expenses .	34,328.	17	592.
	18	Grants payable	31/3331	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
8	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
7	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties .		24	195,000.
}	25	Other liabilities (including federal income tax, payables to related third part and other liabilities not included on lines 17-24). Complete Part X of Sched	ries, Jule D 3, 335.	25	24,074.
_ ]	26	Total liabilities. Add lines 17 through 25	37,663.	26	219,666.
es		Organizations that follow SFAS 117 (ASC 958), check here ► X and comp lines 27 through 29, and lines 33 and 34.	lete		
2	27	Unrestricted net assets	1,002,779.	27	189,866.
ala	28	Temporarily restricted net assets .		28	··
	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.	,		,
9	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<del> </del>
As	32	Retained earnings, endowment, accumulated income, or other funds	"	32	<del></del>
<u>e</u>	33	Total net assets or fund balances	1,002,779.	33	189,866.
Z	34	Total liabilities and net assets/fund balances	1,040,442.	34	409,532.
BA	4				Form 990 (2017)

Ford	n 990 (2017) International FIRST Committee Associatio 8	<u>31-106035</u>	2	Pag	ge 12		
Pa	rt XI髹 Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,25	9,8	85.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,07	2,7	98.		
3	Revenue less expenses Subtract line 2 from line 1 .	3	-81	2,9	13.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,00				
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities .	6					
7	Investment expenses	. 7		-			
8	Prior period adjustments .	8					
9	Other changes in net assets or fund balances (explain in Schedule O).	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	18	9,8	66.		
Pa	rt·XIII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII .						
			,	Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		· 高温 /				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O							
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis							
ŀ	Were the organization's financial statements audited by an independent accountant?		2 b	İ	X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate, consolidated basis, or both:  Separate basis  Both consolidated and separate basis	parate	A CONTRACTOR OF THE CONTRACTOR				
C	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the arreview, or compilation of its financial statements and selection of an independent accountant?	udıt,	2 c				
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.							
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	•	3 a		Х		
t	s If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit	3 b				
BAA			Form 9	990 (2	2017)		

## 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

lame o	f the	organization			nittee Associat	' '	Employer identification number		
		ID	c/o Toohey	Law Group	ganisations	Same !=	40 4b.c	81-106035	
								part.) See instruct	
	rga ┌┐		•		For lines 1 through 12,				1
1	Н				nurches described in <b>sec</b>			"·	]
2	Ц				Schedule E (Form 990 or		-	( )	Į.
3	Ц				zation described in sec				<u> </u>
4				tion operated in conju	inction with a hospital o	escribe	a ın sec	tion 170(b)(1)(A)(iii) E	nter the nospital's
_	_	name, city,							. <b></b>
5		An organiza	ation operated for 0(b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or opera	ated by	a governmental unit de	escribed in
6		A federal, s	state, or local gove	ernment or governme	ntal unit described in s	ection 1	<b>70(b)(</b> 1)	(A)(v).	
7	X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(bX1XAXvi). (Complete Part II.)								
8		A communi	ity trust described	ın section 170(b)(1)(	A)(vi). (Complete Part I	l.)			
9		or university	ral research organi or a non-land-grar	zation described in <b>sec</b> nt college of agriculture	tion 170(b)(1)(A)(ix) oper (see instructions) Enter	ated in c the nam	onjunctione, city, a	on with a land-grant colle and state of the college o	ge or
10	$\Box$	university	<b></b>				. <b></b> -		<u>-</u>
10		from activit investment June 30, 19	nes related to its e income and unrel 1975. See <b>section !</b>	exempt functions—sublated business taxable 509(a)(2). (Complete F	oject to certain exception e income (less section Part III.)	ons, and 511 tax)	(2) no r from bi	, membership fees, and o more than 33-1/3% of it usinesses acquired by t	ts support from gross
11		An organiza	ation organized ar	nd operated exclusive	ly to test for public saf	ety See	section	1 509(a)(4).	
12		or more pu	blicly supported o	rganizations describe	ely for the benefit of, to d in <b>section 509(a)(1)</b> outporting organization	or sectio	n 509(a)	ctions of, or to carry ou (2). See section 509(a)	ut the purposes of one (3). Check the box in
а		Type I. A su	pporting organizations) the power to re-	on operated, supervised gularly appoint or elect	d or controlled by its sur	norted o	roanizati	ion(s), typically by giving he supporting organization	the supported on. <b>You must</b>
b	П	Type II A s	Part IV, Sections A supporting organize	ration supervised or c	ontrolled in connection	with its	support	ed organization(s), by	having control or
		managemer must comp	nt of the supporting plete Part IV, Secti	organization vested in ions A and C.	the same persons that c	ontrol or	manage	the supported organizati	ion(s) <b>You</b>
С	Ш	Type III fund organizatio	ctionally integrated. n(s) (see instructi	. A supporting organizat ons). <b>You must com</b> t	ion operated in connection plete Part IV, Sections	n with, ar <b>A, D, an</b> :	na tunctio <b>d E.</b>	onally integrated with, its	supportea
d		Type III non functionally	-functionally integrated The o	rated. A supporting org	anization operated in coi	nection tion regi	with its s	supported organization(s) t and an attentiveness	that is not requirement (see
е		Instructions Check this	<ul><li>S) You must com box if the organiz</li></ul>	plete Part IV, Section ation received a writte	is A and D, and Part V.	the IRS		a Type I, Type II, Type	
f	Εn		ber of supported						
			• •	n about the supported	d organization(s).				
	) Na	ame of supported	d organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat	s the tion listed poverning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
						res	INO	-	
<b>'Δ</b> \									
(A)						<del>                                     </del>	_		
(B)									
رد,			<del></del>			<del> </del>	<del> </del>		
(C)									
<u>,</u>						-			
(D)									
<u>,                                    </u>						_			
(E)									
<u>,-,</u>					1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1E 4 5	1. 5		
Γotal					· · · · · · · · · · · · · · · · · · ·	· • • • •			

Schedule A (Form 990 or 990-EZ) 2017 International FIRST Committee Associatio 81-1060352

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 lis	ted below, please	complete Part II	1)			
	tion A. Public Support	T		<u> </u>	<del> </del>	<del> </del>		
begi	ndar year (or fiscal year nning in) > Gifts grants contributions and	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total	
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')				1,281,108.	2,259,885.	3,540,993.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	0.	0.	0.	1,281,108.	2,259,885.	3,540,993.	
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).	1		***			2,508,468.	
	Public support. Subtract line 5 from line 4.	The second of the second	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ووان ما فعلي مل	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,032,525.	
	tion B. Total Support	г						
begi	ndar year (or fiscal year nning in) ►	(a) 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	(f) Total	
7	Amounts from line 4	0.	0.	0.	1,281,108.	2,259,885.	3,540,993.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.	
11	Total support. Add lines 7 through 10		A STATE OF THE PARTY OF THE PAR	20 11 12 21 E1 E1		3. T. 15	3,540,993.	
12	Gross receipts from related activ	vities, etc (see ins	structions)			. 12	0.	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, the	ırd, fourth, or fıfth t	ax year as a section	on 501(c)(3)	<u> </u>	
	tion C. Computation of Pu	<del></del>						
	Public support percentage for 20			ne 11, column (f))		14	<u>%</u>	
	Public support percentage from			•	•	15	%%	
16a	<b>33-1/3% support test—2017.</b> If to and <b>stop here.</b> The organization				d line 14 is 33-1/3	3% or more, check	this box	
b	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 to or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	re, Explain in Part	VI how	
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' f	and-circumstances test. The organiza	s' test, check this ation qualifies as a	box and <b>stop he</b> a publicly support	re. Explain in Part ed organization	VI how the ▶ □	
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a,	, or 17b, check th	is box and see ins	structions	
BAA					Scl	nedule A (Form 99	00 or 990-FZ) 2017	

81/ <del>-</del>1060352 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 test's listed below, please complete Part II ) Section A. Public Support (c) 2015 Calendar year (or fiscal year beginning in) (a) 2013 **(b)** 2014 (d) 2016 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.') 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 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 **Public support.** (Subtract line 7c from line 6) Ser le rep ٠, 's # Section B. Total Support (c) 2015 (a) 2013 **(b)** 2014 (d) 2016 (e) 2017 (f) Total Calendar year (or fiscal year beginning in) 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 Other income. Do not include gain or loss from the sale of čapital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12) 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 왕 16 Public support percentage from 2016 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2017/(line 10c, column (f) divided by line 13, column (f)) 17 ş 18 Investment income percentage from 20/16 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. 20

BAA

TEEA0403L 08/10/17

Schedule A (Form 990 or 990-EZ) 2017

81-1060352

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.	ΑII	Supporting	<b>Organizations</b>

360	Cition 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.		_	
1	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 <b>Part VI</b> when and how the organization made the determination	3b		
•	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c	·	
4	a 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		
j	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	کار با 4b	1.00	<u> </u>
•	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 <b>Part VI</b> 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		1
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a	*, ©,	
Į	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	ام .	- 1
•	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 <b>Part VI</b> .	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	<u>., </u>	25
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	<u></u>	لت
9:	a 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 <b>Part VI</b>	9a		
١	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 <b>Part VI</b>	9b		
	c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9c	<u> </u>	الث
10	a 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		
ı	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		

<del></del>	dule A (Form 990 or 990-EZ) 2017 International FIRST Committee Associatio 81-106035	52		age 5
Par	t IV Supporting Organizations (continued)			
11 -	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the	-		<u></u>
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_	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		<u> </u>
Sec	tion B. Type I Supporting Organizations			
	Bullion to the form of the control o		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 <b>Part VI</b> 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				لئا
	supporting organization	2		
Sec	tion 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	•	<u>اية .</u>
Sect	tion D. All Type III Supporting Organizations			
<del></del>	tion B. 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	1 1	٠ <u>.</u>	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			لند
	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	" ا	-4,	
	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		<del>`</del> -
			2+1	
	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	• • •		*
3	all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
3	in this regard.	3		

2	Activities Test. Analysis (a) and (b) helevy	
c	c The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instruction	s).
t	<b>b</b> The organization is the parent of each of its supported organizations Complete line 3 below.	
а	a The organization satisfied the Activities Test Complete line 2 below.	

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.
- **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
- 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.*
- **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

	,	,
• •		
2a		
		7.
2b		
	1	
3a		
3b		

	• •			
Sch	edule A (Form 990 or 990-EZ) 2017 International FIRST Committee A	sso	ciatio 81-1	060352 Page 6
Pa	rt V.Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on N	Nov. 20, 1970 (explain i	n Part VI) <b>See</b> A through E.
Sec	ction A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Sec	tion B — Minimum Asset Amount	•	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
ě	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	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):			1 2 50
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount		J	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	1,4	•
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	11 4	·

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

**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)

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Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 International FIRST Part V Type III Non-Functionally Integrated 509(a)(3) Su			60352 Page 7
Section D - Distributions	<u></u>		Current Year
Amounts paid to supported organizations to accomplish exempt pur	poses		
2 Amounts paid to perform activity that directly furthers exempt purposes of	<del></del>	ς	
in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purposes of su	pported 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 in Part VI) See instructions	on is responsive (provide	details	
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
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>b</b> From 2013			
c From 2014			
<b>d</b> 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	<del></del>	<del> </del>	<u> </u>
i Carryover from 2012 not applied (see instructions)		11 11	
j Remainder. Subtract lines 3g, 3h, and 3i from 3f	·	<u> </u>	
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years	<u> </u>		
Applied to directional buttons of prior years     Applied to 2017 distributable amount	<del></del>	<del> </del>	
c Remainder Subtract lines 4a and 4b from 4		<del> </del>	
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		ļ	<u> </u>
8 Breakdown of line 7:			
d Excess trom 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			

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e Excess from 2017

Schedule A (Form 990 or 990-EZ) 2017

Part VIX Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Supplemental Financial Statements

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. 
► Attach to Form 990.

► 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 International FIRST Committee Associatio c/o Toohey Law Group 81-1060352 Rart | Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year). Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No Yes impermissible private benefit? Partill Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2 a b Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds? |Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? No Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Rart IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the

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

following amounts relating to these items

(ii) Assets included in Form 990, Part X

a Revenue included on Form 990, Part VIII, line 1

(i) Revenue included on Form 990, Part VIII, line 1

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Schedule D (Form 990) 2017 Inter	national	FIRS ctions	T Committe	ee A	ssociatio   Treasures, or	81-106 Other Similar Ass		Page <b>2</b> ntinued)
3 Using the organization's acquisition items (check all that apply):					<u> </u>			·
a Public exhibition			d 🗌 Loan	or exc	change programs			
b Scholarly research			e Other	0. 0	mango programo			
c Preservation for future gener	ations		• 🗀					
Provide a description of the organiz     Part XIII.		ons and	explain how they	/ furth	er the organization's	exempt purpose in		
5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or nan to be mai	receive	donations of ar	t, hist organi	orical treasures, or zation's collection?	other similar assets	Yes	No
Partival Escrow and Custodial line 9, or reported an	Arrangen	ents. (	Complete if t	he o	rganızation ans	wered 'Yes' on Fo	rm 990,	Part IV,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodia	n or othe	er intermediary	for co	ontributions or othe	r assets not included	Yes	∏No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIII a	nd comp	lete the follow	ng tal	ole:			L
							Amount	
c Beginning balance						1 c		
d Additions during the year						1 d		
e Distributions during the year					•	1 e		
<b>f</b> Ending balance .						1f		
2 a Did the organization include an a							Yes	No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIII	Check he	ere if the explai	nation	has been provided	d on Part XIII .		
B=0.4515						000 Dart IV Iv	. 10	
Part V Endowment Funds. C								r voore beek
1 - Decimaling of upon bolomos	(a) Current	year	(b) Prior yea	r 	(c) Two years back	(d) Three years back	(e) Fou	r years back
1 a Beginning of year balance								
<b>b</b> Contributions	<del> · · · · · · · · · · · · · · · · · ·</del>						ļ —	
c Net investment earnings, gains,							İ	
and losses  d Grants or scholarships							<del></del>	
e Other expenditures for facilities						-		<del></del>
and programs								
f Administrative expenses								
g End of year balance.							<u> </u>	
2 Provide the estimated percentage	e of the curre	nt year e	end balance (lir	ne 1g,	column (a)) held a	as:		
a Board designated or quasi-endowm	ent ►		%					
<b>b</b> Permanent endowment ▶	- %							
c Temporarily restricted endowmer	nt ►		_ %					
The percentages on lines 2a, 2b, ar	nd 2c should e	qual 100	%.					
3a Are there endowment funds not in t	he possession	of the or	ganization that a	are he	ld and administered	for the		
organization by:	·							es No
(i) unrelated organizations		•					3a(i)	
(ii) related organizations				_			3a(ii)	
<b>b</b> If 'Yes' on line 3a(ıı), are the rela							3b	
4 Describe in Part XIII the intended			tion's endowm	ent tu	nas			-
PartiVII Land, Buildings, and			N/ 1 F:		00 Deat IV Pres	11- 0 5 00	0 0-4	V I 10
Complete if the organi				m 99	o, Part IV, line			
Description of property			or other basis estment)	(b	) Cost or other basis (other)	(c) Accumulated depreciation	<b>(d)</b> Bo	ok value
1 a Land								
<b>b</b> Buildings	• •						~	
c Leasehold improvements							···	
<b>d</b> Equipment								
e Other .								
Total. Add lines 1a through 1e. (Colum	nn (d) must e	ual Fori	m 990, Part X,	colum	nn (B), line 10c.)	<u> </u>		0.
RAA						Sched	ule <b>D</b> (Forn	n 990) 2017

24,074. Total. (Column (b) must equal Form 990, Part X, column (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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Schedule D (Form 990) 2017 International FIRST Committee RSSOCIATIO	61-1000332 rage +
Part XIA Reconciliation of Revenue per Audited Financial Statements With R	evenue per Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, lin	e 12a.
1. Total revenue, gains, and other support per audited financial statements	. 1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	<b>X</b> (5)
a Net unrealized gains (losses) on investments . 2a	
b Donated services and use of facilities 2b	
c Recoveries of prior year grants . 2c	
d Other (Describe in Part XIII.) 2d	10-12- 5-2-5-5
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	<b>设施</b>
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b Other (Describe in Part XIII ) .	
c Add lines 4a and 4b.	. 4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5
Part XIII Reconciliation of Expenses per Audited Financial Statements With I	Expenses per Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, lin	e 12a.
1 Total expenses and losses per audited financial statements	. 1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	5521
a Donated services and use of facilities	(4.25)
b Prior year adjustments 2 b	
c Other losses 2c	
d Other (Describe in Part XIII ) . 2d	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1.	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII )	
c Add lines 4a and 4b.	4 c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part XIII Supplemental Information.	
o	- 1b 10b, D 1/

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

Schedule **D** (Form 990) 2017

## SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** 

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

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Department of the Treasury Internal Revenue Service

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

Employer identification number

International FIRST Committee Associatio

81-1060352

Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . XYes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Part V

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.)

3 Activities per region (The	Tollowing raiti,	Table carr b	e duplicated if additional space	is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
Australia and New			-		
(1) Zealand			Grants to Recipients		9,556.
(2) Carribean			Grants to Recipients		17,477.
(3) Central America	_		Grants to Recipients		11,601.
(4) Central Asia			Grants to Recipients		12,450.
(5) Eastern Africa			Grants to Recipients		108,867.
(6) Eastern Europe			Grants to Recipients		8,255.
(7) Melanesia			Grants to Recipients		17,730.
(8) Middle Africa			Grants to Recipients		35,058.
(9) Northern Africa			Grants to Recipients		14,530.
(10) Northern Europe			Grants to Recipients		4,083.
(11) South America			Grants to Recipients		7,909.
(12) Southern Africa			Grants to Recipients		26,312.
(13) Southern Asia	ļ <u> </u>		Grants to Recipients		42,708.
(14) Southern Europe			Grants to Recipients		37,166.
(15) South-eastern Asia			Grants to Recipients		39,453.
(16) Western Africa			Grants to Recipients		119,279.
(17) Western Asia			Grants to Recipients		27,448.
3a Sub-total			dia w 1	1 2	539,882.
<b>b</b> Total from continuation sheets to Part I					16,352.
c Totals (add lines 3a and 3b)	0	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·	556,234.
RAA For Panerwork Reduction	Act Notice see t		e Form 990	<del></del>	dule F (Form 990) 2017

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

Schedule F (Form 990) 2017

## **Continuation Sheet for Schedule F (Form 990)**

► Attach to Form 990 to list additional information for Schedule F (Form 990) Part I, line 3; Part II, line 1; or Part III. ► See instructions for Schedule F (Form 990).

2017

Continuation Page 1 Of 1

Name of the organization

Employer Identification number

International FIRST Committee Associatio 81-1060352 Part I | Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (by type) (such as, (e) If activity listed in (f) Total (d) is a program service, describe specific type of offices in the expenditures employees, agents and independent fundraising, program for and region contractors in services, investments, grants to investments recipients located in the region) service(s) in the region in the region the region Western Europe Grants to Recipients 16,352. 0 16,352. Totals

81-1060352

International FIRST Committee Associatio

Schedule F (Form 990) 2017

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

SEE SCHEDULE F, PART V, PART I - ADDITIONAL	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
SUPPLEMENTAL INFORMATION (1)		Australia and	Event Support -				Travel	
. (2)			AUS Event			9, 556.	9,556. Expense	
(			Support -				Travel	
(3)		Central Asia	TKM			5, 439.	Expense	
(4)			Event Support -				Travel	
(5)		Central Asia	UZB Event			7,011.	7,011. Expense	
		Eastern	Support -				Travel	:
(9)		Africa	BDI			14,495.	Expense	
6		c	Event Support -				Travel	
	,		ETH			7,671.	7,671. Expense	
· (8)			Event					
(6)		Eastern Africa	Support - MDG		-	17,136.	Travel Expense	
(10)		c	Event Support -				Travel	
(μ)			MOZ Event			5,278	Expense	
. (12)		Eastern Africa	Support - MWI			11,298.	Travel Expense	
(13)		c	Event Support -				Travel	
(14)			RWA Event			10,867. Expense	Expense	:
(15)		Eastern Africa	Support - SSD			7,182	Travel Expense	
. (16)			Event Support -				Travel	

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

Schedule F (Form 990) 2017

3 Enter total number of other organizations or entitles BAA

TEEA3502L 08/10/17

Schedule F Cont (Form 990) 2017 International FIRST Committee Associatio

4

Continuation Page 1 of.

90), Part II, line 1.)	(h) Description (i) Method of of non-cash assistance (book, FMV, appraisal, other)	Expense	Travel		Expense	Travel	rypenise	Travel	Expense	Travel	Expense		Travel	Expense		Travel Expense		Travel	Expense	Travel	Expense	Travel	Expense	Travel	Expense		Travel	Expense	Schedule F Cont (Form 990) 2017
Schedule F (Form 9)	(g) Amount (h of non-cash assistance	9,783. E	5,819.		13,361.		3, 440.	T	7,971. E	E-	9,760. E		E	7,642. E		9.882. E	_	T	7,008. E		10,527. E	I	5,081. E	E	, 5,011.		E	8, 936. E	Sche
ited States.	(f) Manner of cash disbursement																												
es Outside the Un	(e) Amount of cash grant																										į		21/01/
ons or Entiti	(d) Purpose of grant	TZA Event	Support - UGA	  ±	SWE	Support -	Can	Support -	SLB	Support -		Event	Support -	CMR	Event	Support - COD	Event	Support -	GAB Event	Support -	GNŌ	Event Support -	EGY	Support -		Event	Support -	PER Event	TEEA3602L 08/10/17
ance to Organizati	(c) Region	Africa	Eastern Africa		Eastern Africa		במפרבווו בחדמת		Melanesia		Melanesia			Middle Africa		Middle Africa			Middle Africa		Middle Africa		Northern Africa		Northern Africa			South America	
and Other Assist	(b) IRS code section and EIN (if applicable)																												
Part III Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	1 (a) Name of organization																												

Schedule F Cont (Form 990) 2017 International FIRST Committee Associatio

4

Continuation Page 2 of,

e   )	(i) Method of valuation (book, FMV, appraisal, other)																									orm 990) 2017
350), Fall II,	(h) Description of non-cash assistance	Travel Expense	Travel		Travel	Travel	Expense	Travel	Expense	Travel			Travel	Expense	Travel			Travel Expense	Travel	Expense	Travel	Expense	 Travel	Expense	Travel	Schedule F Cont (Form 990) 2017
Scriedale r (roill	(g) Amount of non-cash assistance	10,723.		6, 622.	7	12,007.	10,022.		9,116.		9,933.			19,992.		6,195.		10,747.		5,774.		5,183.		5,029.	5 192	Sci
ווכח אומוכא.	(f) Manner of cash disbursement																					,				
es Outside tile Of	(e) Amount of cash grant																									08/10/17
מווס כו בוונונו	(d) Purpose of grant	Support - KHM	Event Support -	LAO	Support -	Event Support -	1	Support -	BWA	Event Support -	NAM	Event	Support -	AFG	Event Support -	BGD	Event	Support - NPL	support -	PAK Event	Support -	ALB	Support -	BIH Event	Support -	EA3602L
alice to Organizat	(c) Region	South-eastern A		South-eastern A		אחרוו בפארביוו ע	South-eastern A	,	Southern Airica		Southern Africa			Southern Asia		Southern Asia		Southern Asia		Southern Asia		Southern Europe		Southern Europe	Southern Europe	
alla Villei Assist	(b) IRS code section and EIN (if applicable)																									
Faith Collingation of Graffs and Other Assistance to Organizations of Entitles Outside the Office States. (Schedule F (Forth 930), Part II, line I)	1 (a) Name of organization																									

Continuation Page 3 of 4 81-1060352 Schedule F Cont (Form 990) 2017 International FIRST Committee Associatio

Part III Continuation of Grants and Other Assistance to Organizations or Entities Outside the United Sta

Rart III Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II,	s and Other Assist	ance to Organizat	ions or Entitie	es Outside the Un	ited States. (	Schedule F (Form	990), Part II,	lińe 1.)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)
			1					
			Support -				Travel	
;		Southern Europe	SRB Event			7,736.	Expense	
		Hooten Merica	Support -	į		A C O E	Travel	
		3	Event				acinadyn	
			Support -				Travel	
		Western Africa	BFA Event			5, 388.	Expense	
			Support -				Travel	
		Western Africa	CIV			13,574.	Expense	
			Event					
			Support -				Travel	
		Western Africa	CPV			12,877.	Expense	
			1					[
		Western Africa	Support - GHA			11,278.	Travel Expense	
			Event Support -				Travel	
		*				000		
		western Airica	GMB Event			8,609.	Expense	
	•	Western Africa	Support - LBR			10,828	Travel	
			Event			_		
			Support -		-		Travel	
		Western Africa	MLI Event			12, 925.	Expense	
			Support -				Travel	i
		Western Africa	NER			6,310.	Expense	
			Event Support -				Travel	
		Western Africa				10,617.	Expense	
			Event				1	
			Support -				Travel	
		Western Africa	SEN			6, 788.	Expense	
			Event				i di	
			l _ loddnel			1.0	I Tavel	7,000
			IEEASOUZL U&/IU/I/	\		ine.	Schedule r Cont (Form 330) 2017	orm 550) 2017

(i) Method of valuation (book, FMV, appraisal, other) 4 ť . Inte 1) Continuation Page 4 (h) Description of non-cash assistance Part II. Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II. 8,002. Expense 8,345. Expense 8,938. Expense Expense Expense Travel Travel Travel Travel 7,120. 6,448. 81-1060352 (g) Amount of non-cash assistance cash disbursement (f) Manner of (e) Amount of cash grant Schedule F Cont (Form 990) 2017 International FIRST Committee Associatio (d) Purpose of grant Support Support Support Support Event Event Event Event JG IRQ SLE BEL Western Africa Western Africa Western Europe (c) Region Western Asia Western Asla (b) IRS code section and EIN (if applicable) (a) Name of organization

Schedule F Cont (Form 990) 2017

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Page 3.

Schedule F (Form 990) 2017 International FIRST Committee Associatio

Raftill | Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
ω							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)		:					
ВАА						Schedule F	Schedule F (Form 990) 2017

Schedule F (Form 990) 2017 International FIRST Committee Associatio	81-1060352	Page 4
Part IV Foreign Forms		
<ul> <li>Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</li> </ul>	Yes	X No
2 Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3 Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To C Foreign Corporations (see Instructions for Form 5471)	ertain Yes	X No
4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a quallecting fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	alified Yes	X No
5 Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreig Partnerships (see Instructions for Form 8865)	n Yes	X No
6 Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (so Instructions for Form 5713, do not file with Form 990)	ee Yes	X No

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Schedule F (Form 990) 2017

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## Supplemental Information Part V

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

## Part I. Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US

International FIRST Committee Association, FIRST Global, makes grants to organizations outside of the United States exclusively for the purpose of allowing teams of students, particularly from disadvantaged countries, to participate in the FIRST Global Challenge. Each grant was made via a credit card, held by FIRST Global, for the air travel for teams to participate in the event. FIRST Global monitors the use of grant funds by observing the actual funded event and confirming all teams receiving grants are participating. Travel expenses are reported at actual cost.

## Part I - Additional Supplemental Information

SCHEDULE F, PART II

International FIRST Committee Association provided financial assistance to certain teams and team members to travel to Washington, DC and participate in the FIRST Global Challenge.

## SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/form990 for instructions and the latest information

OMB No 1545-0047

2017

: Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

International FIRST Committee Associatio c/o Toohey Law Group

81-1060352

Employer identification number

Par	rt I Questions Regarding Compensation				
_ == =	<del>= - </del>		Y	'es	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a pers VII, Section A, line 1a Complete Part III to provide any relevant information regarding	on listed on Form 990, Part these items.	,		•
	First-class or charter travel Housing allowance or	residence for personal use			
	Travel for companions Payments for busines	s use of personal residence	١,		₹ .
	Tax indemnification and gross-up payments Health or social club of	dues or initiation fees	١		
		n as, maid, chauffeur, chef)	٠   .		٠
		·	*	ا بي	1
Ь	<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding reimbursement or provision of all of the expenses described above? If 'No,' complete P		ь		
_	Did the consensation require exhabitation areas to reimburging or ellegang expenses in	<u>•</u>	- -		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked	ed on line 1a?	+	$ \bot $	
3	Indicate which, if any, of the following the filing organization used to establish the compensation CEO/Executive Director Check all that apply. Do not check any boxes for methods use establish compensation of the CEO/Executive Director, but explain in Part III	on of the organization's d by a related organization to	-		57
	Compensation committee Written employment of	"	-	٠	•
	Independent compensation consultant Compensation survey	or study			ر نر
	X   Form 990 of other organizations   X   Approval by the board	for compensation committee		• ]	٠, ١
				.	<i>.</i> :
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with re organization or a related organization:	espect to the filing			
а	a Receive a severance payment or change-of-control payment?	4	a		Х
	<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4	Ь		X
c	c Participate in, or receive payment from, an equity-based compensation arrangement?	4	С		Х
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each	ch item in Part III			• ;
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9	).	- 1	^	• •
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accru contingent on the revenues of:	e any compensation	ं	;	* <b>4</b>
а	a The organization?	5	а —		X
	b Any related organization?	. 5	b	$\dashv$	X
	If 'Yes' on line 5a or 5b, describe in Part III.	·	1 '		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accru	e any compensation			F
	contingent on the net earnings of.		_ _	<u>:</u>	* * * * * *
	a The organization?	<u> </u>	a	$\dashv$	X
b	b Any related organization?	6	b	<u> </u>	X
	If 'Yes' on line 6a or 6b, describe in Part III		<u>- </u>		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide payments not described on lines 5 and 6? If 'Yes,' describe in Part III	de any nonfixed			Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contr to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If 'Yes,' describe in Part III	act that was subject			Х
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described section 53 4958-6(c)?	bed in Regulations			

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

Schedule J (Form 990) 2017

🚉 Page 2.\* Schedule J (Form 990) 2017 International FIRST Committee Associatio

| Part II | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

	-	(B) Breakdown of	Breakdown of W-2 and/or 1099-MISC compensation	C compensation				
(A) Name and Title	<u> </u>	() Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	(c) Retirement and other deferred compensation	( <b>U)</b> Nontaxable benefits	( <b>c</b> ) lotal of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
Joseph Sestak, Jr.	8	177,083.	0	0.	0	0.		
1 President	€	0	0		0	' 1	.0	
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# Schedule J (Form 990) 2017 Internation

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

# SCHEDULE O (Porm 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.

► Attach to Form 990 or 990-EZ.

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

2017
Open to Rublic Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

International FIRST Committee Associatio c/o Toohey Law Group

Employer Identification number 81-1060352

## Form 990, Part I, Line 1 - Organization Mission or Significant Activities

International FIRST Committee Association, holding competitions as FIRST Global, is a non-profit organization established to excite the youth and nations of the world about the value of investing in and pursuing STEM education (Science, Technology, Engineering and Mathematics) to help build the science, engineering, and technology skills needed by nations to work on global challenges together. Driven by the enthusiasm of the students as they cooperate in teams, each nation is invited to assemble their own robot and send a high school student-team to represent its country in an annual international olympics-style robotics competition.

## Form 990, Part III, Line 1 - Organization Mission

The mission of FIRST Global is to enhance the global call for STEM education in the international student community. FIRST Global does so by combining the excitement of sport through robotic challenges with the rigors of science and technology, while emphasizing the value of nations' cooperation in addressing the Grand Challenges of Engineering, as identified by the National Academy of Engineering of the United States, that our planet and people must tackle in order to thrive.

Because of this, the collaborative character of leadership brought out in international youth by this effort is a defining basis of FIRST Global's success.

## Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

An officer of FIRST Global is employed by a company that is owned by a director of FIRST Global.

## Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

The By-Laws of International FIRST Committee Association call for non-compensated, non-equity members whose powers include election of members, determine date, time and place of the FIRST Global Challenge, and the power to amend the By-Laws. In

Name of the organization International FIRST Committee Associatio
c/o Toohey Law Group

Employer identification number
81-1060352

## Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder (continued)

2017 there were ten members.

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

The 990 is reviewed by the Treasurer and the Secretary, and copies of the 990 is provided to all Directors prior to submission to the IRS.

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

The FIRST Global conflict of interest policy requires any interested person to disclose any known or potential conflict of interest prior to any action occurring in connection with the potential conflict. The board determines if a conflict exists. The interested person having the potential conflict does not participate in this determination. Annually, every director and officer is required to read and sign the policy and disclose any potential conflicts, or attest, in writing, to the fact that there are none. The annual disclosure statements are sent to the treasurer, who reports the results to the board.