### CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to: NYS Office of the Attorney General Charities Bureau Registration Section 120 Broadway New York, NY 10271

**2016**Open to Public Inspection

1. General Informatio	n	A	2 2 2	
For Fiscal Year Beginning (	mm/dd/yyyy) 03 /	/ <b>2016</b> ar	nd Ending (mm/dd/yyyy)	02,28,2017
Check if Applicable:	Name of Organization:			Employer Identification Number (EIN):
Address Change	SOFTWARE FR	EEDOM C	ONSERVANCY	412203632
☐ Name Change	Mailing Address:			NY Registration Number:
☐ Initial Filing	137 MONTAG	SUE ST	STE 380	40-39-09
Final Filing	City / State / Zip:			Telephone:
Amended Filing	BROOKLYN,	NY 11	201	212-461-3245
Reg ID Pending	Website: https://sfcon	SECUANCY	009	Email: info@sfconservancy.org
Check your organization's registration category:	7A only EPTL only		FPTI) T EXEMPT	Confirm your Registration Category in the
2. Certification				Charities Registry at www.CharitiesNYS.com.
See instructions for certification	requirements. Improper certifi	cation is a violatio	on of law that may be subject	to penalties
	equilements. Improper certifi		The subject	to penalties.
We certify under pend	lties of perjury that we reviewed ue, correct and complete in acco	this report, includ	ing all attachments, and to the	e best of our knowledge and belief,
line) are a	D O AA	b	BRADLEY	
President or Authorized Officer	July 1. 1	1	PRESIDE	NT 18 JAN 2018
	Signature	1	Print Name a	nd Title Date
Chief Financial Officer or Treasu	rer:/ / / (	~	TREASUR	
	Signature		Print Name a	
3. Annual Reporting E	xemption	-		
categories (DUAL filers) that app	y to your registration, complet cannot claim an exemption or	te only parts 1, 2, a	and 3, and submit the certifie	egory (7A or EPTL only filers) or both d Char500. No fee, schedules, or additional on, you must file applicable schedules and
and the organization d	: Total contributions from NY S d not engage a professional fu alifies for another 7A exemptio	ınd raiser (PFR) or	fund raising counsel (FRC) to	nent agencies, etc. did not exceed \$25,000 o solicit contributions during the fiscal year.
3b. EPTL filing exempti fiscal year.	on: Gross receipts did not exce	ed \$25,000 and th	e market value of assets did	not exceed \$25,000 at any time during the
4. Schedules and Atta	chments			
See the following page for a checklist of schedules and attachments to complete your filing.	fund raising activity	in NY State? If ye	s, complete Schedule 4a.	ng counsel or commercial co-venturer for
Tes	No 4b. Did the organiza	ition receive gove	rnment grants? If yes, comp	lete Schedule 4b.
5. Fee				
	A filing fee: EPTL	filing fee:	Total fee:	Make a simple shoot array
next page to calculate your fee(s). Indicate fee(s) you are submitting here:	\$25	250	\$275	Make a single check or money order payable to: "Department of Law"
		a a see Sillonia		

### CHAR500

**Annual Filing Checklist** 

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)

Checklist of Schedules and Attachment	st of Schedules and Attachments
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Check the schedules you must submit with your CHAR500 as described in Part 4:

If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:	
IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable	
All additional IRS Form 990 Schedules, including Schedule B (Schedule of Con	atributors).
Our organization was eligible for and filed an IRS 990-N e-postcard. We have	included an IRS Form 990-EZ for state purposes only.
If you are a 7A only or DUAL filer, submit the applicable independent Certified Publi	ic Accountant's Review or Audit Report:
Review Report if you received total revenue and support greater than \$250,0	00 and up to \$750,000.
Audit Report if you received total revenue and support greater than \$750,000	0
No Review Report or Audit Report is required because total revenue and sup	port is less than \$250,000
We are a DUAL filer and checked box 3a, no Review Report or Audit Report is	required
Calculate Your Fee	
For 7A and DUAL filers, calculate the 7A fee:	Is my Registration Category 7A, EPTL, DUAL or EXEMPT? Organizations are assigned a Registration Category upon
\$0, if you checked the 7A exemption in Part 3a	registration with the NY Charities Bureau:
\$25, if you did not check the 7A exemption in Part 3a	<b>7A</b> filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")
For EPTL and DUAL filers, calculate the EPTL fee:	EPTL filers are registered under the Estates, Powers & Trusts
\$0, if you checked the EPTL exemption in Part 3b	Law ("EPTL") because they hold assets and/or conduct activites for charitable purposes in NY.
\$25, if the NET WORTH is less than \$50,000	<b>DUAL</b> filers are registered under both 7A and EPTL.
\$50, if the NET WORTH is \$50,000 or more but less than \$250,000	
\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000	<b>EXEMPT</b> filers have registered with the NY Charities Bureau

### Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

\$1500, if the NET WORTH is \$50,000,000 or more

NYS Office of the Attorney General Charities Bureau Registration Section 120 Broadway New York, NY 10271 EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration Exemption for Charitable Organizations. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.

#### Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS From 990 Part I, line 22
- IRS Form 990 EZ Part I line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

\$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000

\$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000

### Form **990**

### **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Internal Revenue Service For the 2016 calendar year, or tax year beginning 2016, and ending February 28 March 1 , 20 17 C Name of organization Software Freedom Conservancy, Inc. D Employer identification number В Check if applicable: Address change Doing business as 41-2203632 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 137 MONTAGUE ST **STE 380** 212-461-3245 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated ~ Amended return BROOKLYN, NY 11201-3548 G Gross receipts \$ 2,125,670 Application pending | F Name and address of principal officer: H(a) Is this a group return for subordinates? Yes Vo KAREN M. SANDLER, Postal address as in C above. **H(b)** Are all subordinates included? Yes No If "No," attach a list. (see instructions) 501(c)(3) 501(c) ( ) **◄** (insert no.) ☐ 4947(a)(1) or Tax-exempt status: Website: ▶ https://sfconservancy.org **H(c)** Group exemption number ▶ Form of organization: V Corporation Trust L Year of formation: Association M State of legal domicile: NY Part I Summary Briefly describe the organization's mission or most significant activities: Conservancy promotes, improves, develops, & defends Free, Libre and Open Source Software projects & provides a non-profit home & infrastructure for them. We directly Activities & Governance handle many key tasks for our projects, which are mostly created by volunteer developers, improving FLOSS for the public good. 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . . . 6 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 5 5 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 6 5,292 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h). 1,780,653 1,810,882 Revenue 9 Program service revenue (Part VIII, line 2g) 140,435 306,971 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . 1,555 3,608 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 3,439 4,209 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,926,082 2,125,670 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . . 14,231 200 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 393,040 473,442 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 753,977 1,026,567 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 1,161,248 1,500,209 Revenue less expenses. Subtract line 18 from line 12 . 19 764,834 625,461 End of Year Assets or Balances **Beginning of Current Year** 20 1,924,887 2,746,338 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) . 264,276 460,226 22 Net assets or fund balances. Subtract line 21 from line 20 1,660,611 2,286,072 **Signature Block** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 18 Ian. 2018 Sign Signature of officer Bradley M. Kuhn, President Here Type or print name and title Print/Type preparer's name Preparer's signature Date **Paid** Check | if self-employed **Preparer** Firm's EIN ▶ Firm's name **Use Only** Phone no.

May the IRS discuss this return with the preparer shown above? (see instructions) .

Form 990 (2016) Page **2** 

Part		ment of Program Service			
1		k if Schedule O contains a recribe the organization's mission	esponse or note to any line in this Paon:	art III	<u> L</u>
2			ficant program services during the ye		☐ Yes ☐ No
3		scribe these new services on			
3	services? .		g, or make significant changes in h		☐ Yes ☐ No
4	Describe the expenses.	e organization's program ser Section 501(c)(3) and 501(c)(4	rvice accomplishments for each of its 4) organizations are required to report for each program service reported.		
4a			including grants of \$		
4b	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other progr	ram services (Describe in Sch	edule O.)		
40	(Expenses S			\$ )	

**Checklist of Required Schedules** 

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	2		
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
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		
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		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		
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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		
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		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i> .	11e		
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		
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		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
14 a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a 14b		
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		
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		
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		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		
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		

Part I	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
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		
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		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
		240		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	<b>.</b>		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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		
	•	230		
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		
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		
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," complete	200		
D	Schedule L, Part IV	001-		
	,	28b		
С	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		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<u> </u>		
	complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- JZ		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			
0.4	•	33		
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		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI			
00		37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.			
	19: 110te: All 1 Ultil 330 lilei3 ale requireu lu cultiplete schedule U.	38	1	ı

Form 99	90 (2016)		F	Page :
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-	Yes	No
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2b		
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b	If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		
	gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
c	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b 7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b		
10 a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	-		
11	Section 501(c)(12) organizations. Enter:	-		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	-		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. 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? . . . . .

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

14b

Form 990 (2016) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following: 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. . . . . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? . . . . . . . . . . . . . . . 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official . . . . . . 15a 15b 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 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18

- available for public inspection. Indicate how you made these available. Check all that apply.
  - Own website Another's website ☐ Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

Form 990 (2016)	Page <b>7</b>
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### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

— Check this box if heither the organization no	r any relate	a orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, director	r, or trustee.
				(0						
(A)	(B)	(do n	ot oh		ition	e than o	ono	(D)	(E)	(F)
Name and Title	Average					is both		Reportable Reportable		Estimated
	hours per week (list any		er and		_	or/trust		compensation from	compensation from related	amount of other
	hours for	Indi or d	Insti	Officer	Key employee	High	Former	the	organizations	compensation
	related organizations	/idu	tutic	ě	em	nest loye	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	or tr	nal		oloy	com		,		and related
	line)	Individual trustee or director	Institutional trustee		W	pens				organizations
			ee			Highest compensated employee				
(1)	ļ									
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(7)	<del> </del>									
(8)										
(0)										
(9)	<del> </del>									
(10)										
(40)										
(11)										
(12)										
(10)										
(13)										
(14)										

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (	continue	ed)		
	(A) Name and title	(B) Average hours per	rage box, unless person is bo officer and a director/tru						(D)  Reportable compensation	(E)  Reportable compensation fro		( <b>F</b> ) Estima amour		
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-N		compe fror orgar and i	ensation n the nization related izations	
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c d	Sub-total .  Total from continuation sheets to Part Total (add lines 1b and 1c)			•		 	•	<b>&gt; &gt; &gt;</b>						
2	Total number of individuals (including but reportable compensation from the organic	not limited					above	e) w	ho received me	ore than \$1	00,000	of		
3	Did the organization list any <b>former</b> of employee on line 1a? If "Yes," complete							-	loyee, or high	=		3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual											4		
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or ind		5		
Section	on B. Independent Contractors	· · ·	<u> </u>						<u>'</u>					
1	Complete this table for your five highest compensation from the organization. Repyear.												n's ta	ax
	(A) Name and business add	ress							(B) Description of s	ervices	C	(C) Compens	ation	
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				

Form 9	90 (201	6)					Page \$
Part	: VIII	Statement of Revenue					
		Check if Schedule O contains a respor	nse or note to	any line in this			[
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b					
	С	Fundraising events <b>1c</b>					
	d	Related organizations 1d					
	е	Government grants (contributions) 1e					
utio er S	f	All other contributions, gifts, grants,					
g H		and similar amounts not included above 1f					
nd a	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f	usiness Code				
Program Service Revenue	2a		dolless code				
Rev	b						
<u>8</u>	C						
ěΓ	d						
Ē	е						
ogra	f	All other program service revenue .					
<u> </u>	g	Total. Add lines 2a-2f					
	3	Investment income (including dividend					
		and other similar amounts)					
	4	Income from investment of tax-exempt bond	· -				
	5	Royalties	►				
	C-	· ·	(ii) Personai				
	6a	Gross rents					
	b	Less: rental expenses  Rental income or (loss)	-				
	C d	Net rental income or (loss)	•				
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	b	Less: cost or other basis and sales expenses .					
	С	Gain or (loss)	-				
		Net gain or (loss)	▶				
		,					
Other Revenue	8a	Gross income from fundraising events (not including \$					
er Re		of contributions reported on line 1c). See Part IV, line 18					
돧	b	Less: direct expenses b					
_		Net income or (loss) from fundraising ever	ents . ►				
		Gross income from gaming activities.  See Part IV, line 19					
	С	Less: direct expenses <b>b</b> Net income or (loss) from gaming activities	es <b>&gt;</b>				
	10a	Gross sales of inventory, less returns and allowances a					
		Less: cost of goods sold b					
	С	Net income or (loss) from sales of inventor	-				
		Miscellaneous Revenue B	usiness Code				
	11a						
	b						
	C d	All other revenue					
	u	/ WI JUI I G V G I I G G G			l		I

Total. Add lines 11a-11d.

**Total revenue.** See instructions.

12

## Page 10 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 respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	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				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d					
е	All other expenses				
25	<b>Total functional expenses.</b> Add lines 1 through 24e				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here    if following SOP 98-2 (ASC 958-720)				
	following SOP 98-2 (ASC 958-720)				

	Part X	Balance	Sheet
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		Check if Schedule O contains a response or note to any line in this Pa	rt X		🗆
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		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 under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
<b>"</b>		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
`	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16 17	
	17 18	Accounts payable and accrued expenses		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Ş	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
abi		disqualified persons. Complete Part II of Schedule L		22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and		20	
ses		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
lρι	29	Permanently restricted net assets		29	
Ful		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
Net Assets or Fund Balances		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
188	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et/	32 33	Retained earnings, endowment, accumulated income, or other funds.  Total net assets or fund balances		32	
Ž	34	Total liabilities and net assets/fund balances		34	
	<del></del>	TOTAL HADINGS AND HEL ASSETS/TUND DAIANGES		UT	- 000

Form 990 (2016) Page **12** 

Part	XI 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	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses. Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10			
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			<u></u>	<u>,                                    </u>
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other		<u>.                                    </u>		
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piain	in		
0-			0-		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were com-				
	reviewed on a separate basis, consolidated basis, or both:	pileu	OI		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		
b	If "Yes," check a box below to indicate whether the financial statements for the year were audit	 ed on			
	separate basis, consolidated basis, or both:	Ju 011	"		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versia	ht		
	of the audit, review, or compilation of its financial statements and selection of an independent according				
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	in		
	Schedule O.	•			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in		
	the Single Audit Act and OMB Circular A-133?		. За		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		ne		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		
			Fc	rm <b>990</b>	(2016)

Form **990** (2016)

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

### **Public Charity Status and Public Support**

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Do	et I	Doggon for Dublic Cha	rity Status (All	organizations must	oomplo	to this n	art / Coo instructio	no	
Par		Reason for Public Chazation is not a private founda						ns.	
1	_	church, convention of churc		,		-	•		
2		school described in <b>section</b>							
3		hospital or a cooperative hospital		·			• •		
4		medical research organization	•					'iii\ Fn	ter the
4	_	ospital's name, city, and state	•	onjunction with a nosp	Jilai desc	indea in s	section Tropy(T)(A)(	, <i>,</i>	ter trie
5	□ A	n organization operated for ection 170(b)(1)(A)(iv). (Com	the benefit of a	college or university	owned c	or operate	ed by a government	al unit	described in
6		federal, state, or local govern	•	mental unit described	l in <b>secti</b>	on 170/h)	/1)(Δ)(γ)		
7	□ A	n organization that normally escribed in section 170(b)(1)	receives a subs	tantial part of its sup				the g	eneral public
8	□ A	community trust described i	n <b>section 170(b</b> )	(1)(A)(vi). (Complete	Part II.)				
9	$\Box$ A	n agricultural research organ	ization described	d in <b>section 170(b)(1)</b>	( <b>A</b> )(ix) op	erated in	conjunction with a la	and-gr	ant college
	oı uı	r university or a non-land-gra niversity:	nt college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the co	llege or
10	∐ A	n organization that normally i eceipts from activities related	receives: (1) mor	e than 331/3% of its su	upport fro	om contri	butions, membership	o fees,	and gross
	SI	upport from gross investmen	t income and un	related business taxa	ble incon	ne (less s	ection 511 tax) from	busine	SSES
	a	cquired by the organization a	fter June 30, 197	75. See <b>section 509(</b> a	a)(2). (Co	mplete Pa	art III.)		
11		n organization organized and	•	•	-				
12		n organization organized and							
		f one or more publicly support							
		heck the box in lines 12a thro	J	, ,		Ū	•		,
а	L	Type I. A supporting organ	•		•		• , ,	<i>-</i> .	, , , ,
		the supported organization supporting organization. Y					the directors or trust	ees of	tne
	_		-	•				, , .	
b		Type II. A supporting orga							
		control or management of organization(s). You must				e persons	that control or man	age the	e supported
_		Type III functionally integ				onnoctic	n with and functions	ally into	aratad with
С		its supported organization(	s) (see instructio	ns). You must comp	lete Part	IV, Secti	ions A, D, and E.	-	
d		Type III non-functionally							
		that is not functionally integred requirement (see instruction						a an a	ttentiveness
_			-	_					
е	L	Check this box if the organ functionally integrated, or						e II, Typ	oe III
£	Ent	er the number of supported of				•			
		vide the following information	0						
9		me of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi)	Amount of
	(,, , , , , ,	o o. oapportoa organization	(,	(described on lines 1–10	listed in you	ur governing	support (see	othe	support (see
				above (see instructions))	docu	ment?	instructions)	in	structions)
					Yes	No			
/A)									
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	l I								

	(Complete only if you checked the Part III. If the organization fails to				-	•	alify under
Secti	on A. Public Support	1 7		/ 1		,	
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support		T	T	1		
_	dar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the	•	•		or fifth tax v	12	n 501(c)(3)
	organization, check this box and <b>stop her</b>						
Secti	on C. Computation of Public Suppor	t Percentag	е				
14	Public support percentage for 2016 (line 6	6, column (f) di	vided by line 1	1, column (f))		14	%
15	Public support percentage from 2015 Sch					15	%
16a	331/3% support test—2016. If the organi						
	box and <b>stop here.</b> The organization qualifies as a publicly supported organization						
b	this box and <b>stop here.</b> The organization qualifies as a publicly supported organization						
17a	10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	tion meets the	e "facts-and-o	circumstances stances" test.	" test, check	this box and	stop here.
18	Private foundation. If the organization die	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

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

### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	if the organization falls to qualify	under the te	sts listed belo	ow, piease co	ompiete Part	11.)	
	on A. Public Support		1	T	1		
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
J	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total
9	Amounts from line 6	(a) 2012	(2) 2010	(6) 2011	(4) 2010	(6) 2010	(i) rotar
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
••	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	e organization	⊥ n's first_secon	Ld third fourth	or fifth tax v	Lear as a sectio	n 501(c)(3)
	organization, check this box and <b>stop he</b> l	•					. , . ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8			3. column (f))		15	%
16	Public support percentage from 2015 Sch		-			16	%
	on D. Computation of Investment Inc					1 - 7	,,,
17	Investment income percentage for 2016 (I			y line 13. colui	mn (f))	17	%
18	Investment income percentage from 2015			-		18	<u>%</u>
19a	331/3% support tests—2016. If the organi					_	
	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box						
b	331/3% support tests—2015. If the organiz		_	-		-	_
J	line 18 is not more than 331/3%, check this b						
20	<b>Private foundation.</b> If the organization di	_	_	•			_

### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

			Yes	Na
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by		res	No
2	class or purpose, describe the designation. If historic and continuing relationship, explain.  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	1		
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <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.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <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		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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? <i>If "Yes," provide detail in Part VI.</i>	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			
8	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).  Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	7		
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b>	00		
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>	9a 9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9b 9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	30		
<b>L</b>	supporting organizations)? If "Yes," answer 10b below.	10a		
D	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	406		

Part I	V Supporting Organizations (continued)						
			Yes	No			
11	Has the organization accepted a gift or contribution from any of the following persons?						
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)						
	below, the governing body of a supported organization?	11a		<u> </u>			
	A family member of a person described in (a) above?	11b		<u> </u>			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c					
Section	on B. Type I Supporting Organizations			I			
_			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 approximation approach fourth a homeful of any approximation at how there the approached	-					
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? <i>If "Yes," explain in Part</i>						
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,						
	supervised, or controlled the supporting organization.	2					
Section	on C. Type II Supporting Organizations			<u> </u>			
Occur	on or Type in 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		163	140			
•	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					
Section	on D. All Type III Supporting Organizations			·			
			Yes	No			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the						
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax						
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the						
	organization's governing documents in effect on the date of notification, to the extent not previously provided?						
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported						
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how						
	the organization maintained a close and continuous working relationship with the supported organization(s).	2					
3	By reason of the relationship described in (2), did the organization's supported organizations have a						
	significant voice in the organization's investment policies and in directing the use of the organization's						
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's						
	supported organizations played in this regard.	3					
Section	on E. Type III Functionally Integrated Supporting Organizations						
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).			
а	☐ The organization satisfied the Activities Test. Complete line 2 below.						
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>						
С	☐ The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (	see in	struct	ions).			
•	Activities Test Anguar (a) and (b) below		Vaa	No			
2	Activities Test. Answer (a) and (b) below.		Yes	NO			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of						
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes,						
	how the organization was responsive to those supported organizations, and how the organization determined						
	that these activities constituted substantially all of its activities.	2a					
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	a					
J	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the						
	reasons for the organization's position that its supported organization(s) would have engaged in these						
	activities but for the organization's involvement.	2b					
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>						
	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? <i>Provide details in Part VI.</i>	3a					
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each						
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b					

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ly int	egrated Type III support	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D - Distributions	,	,	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
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 whic	h the organization is res	sponsive	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
_1_	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2016 distributable amount			
_ <u>i</u>	Carryover from 2011 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	<b>Excess distributions carryover to 2017</b> . Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	5 ( 2012			
b	Excess from 2013			
C	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			

Part VI	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)

**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.

OMB No. 1545-0047
2016

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

Par			r Accounts.
	Complete if the organization answered '	"Yes" On Form 990, Part IV, line 6.  (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Donor advised funds	(b) I unds and other accounts
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets held in	donor advised
	funds are the organization's property, subject to th	e organization's exclusive legal control?.	· · · · · □ Yes □ No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that grant fun-	ds can be used
	only for charitable purposes and not for the benef		
	conferring impermissible private benefit?		· · · · · □ Yes □ No
Par			
	Complete if the organization answered '		
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recreating the second		-
	Protection of natural habitat	☐ Preservation of a cel	rtified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization he	ald a qualified conservation contribution in t	he form of a conservation
_	easement on the last day of the tax year.	sid a qualified conscivation contribution in t	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement		2b
C	Number of conservation easements on a certified h		2c
d	Number of conservation easements included in	. ,	
	historic structure listed in the National Register .		2d
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terminate	ed by the organization during the
	tax year >		
4	Number of states where property subject to conse		
5	Does the organization have a written policy requipolations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspect		
6	Stan and volunteer nours devoted to monitoring, inspect	ing, nanding of violations, and emorcing conser	rvation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	a, handling of violations, and enforcing conse	ervation easements during the year
-	<b>▶</b> \$	ig, manaming or trouvier, and officeroning contest	aranen eusennerne uuring ine yeur
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of section	on 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · □ Yes □ No
9	In Part XIII, describe how the organization reports of	conservation easements in its revenue and	expense statement, and
	balance sheet, and include, if applicable, the text of		I statements that describes the
	organization's accounting for conservation easeme		
Part	Organizations Maintaining Collection		er Similar Assets.
4.	Complete if the organization answered '		and belowed the
ıa	If the organization elected, as permitted under SF. works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the f	•	
b	If the organization elected, as permitted under S		
-	works of art, historical treasures, or other similar		
	public service, provide the following amounts relati		
	(i) Revenue included on Form 990, Part VIII, line 1	=	▶ \$
	(ii) Assets included in Form 990, Part X		• \$
2	If the organization received or held works of art,	historical treasures, or other similar asse	ets for financial gain, provide the
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1 .		<b>▶</b> \$
b	Assets included in Form 990 Part X		<b>▶ ¢</b>

	le D (Form 990) 2016						Page 2
Part	<u> </u>						
3	Using the organization's acquisition, access collection items (check all that apply):	ssion, and other reco	ords, check any of the	ne follow	ring that are a sig	gnificant ι	use of it
а	☐ Public exhibition	d	Loan or exchan	ge progr	ams		
b	Scholarly research		Other				
С	☐ Preservation for future generations						
4	Provide a description of the organization's XIII.	s collections and exp	ain how they further	the org	anization's exem <sub>l</sub>	pt purpos	e in Par
5	During the year, did the organization solic assets to be sold to raise funds rather than						. □ No
Part	IV Escrow and Custodial Arrange	ments.					
	Complete if the organization ans 990, Part X, line 21.				•		orm
1a	Is the organization an agent, trustee, cus						
	included on Form 990, Part X?					☐ Yes	□ No
b	If "Yes," explain the arrangement in Part XI	II and complete the f	ollowing table:				
					Am	nount	
С	Beginning balance			1c			
d	Additions during the year			1d			
е	Distributions during the year			1e			
f	Ending balance			1f			
2a	Did the organization include an amount on	Form 990, Part X, lin	e 21, for escrow or c	ustodial	account liability?	□ Yes	□ No
b	If "Yes," explain the arrangement in Part XI	II. Check here if the	explanation has been	provide	d on Part XIII .		
Par			•				
	Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lin	e 10.			
	(a)	Current year (b) P	rior year (c) Two yea	ars back	(d) Three years back	(e) Four ye	ears back
1a	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and						
	losses						
d	Grants or scholarships						
e	Other expenditures for facilities and						
	programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the cu	ırrent vear end halan	ce (line 1g. column (s	all held a	ie.		
a	Board designated or quasi-endowment	=	ce (iiile 19, coluitiii (i	ajj riela e			
b	Permanent endowment ► %						
	Temporarily restricted endowment	%					
С	The percentages on lines 2a, 2b, and 2c sh						
За	Are there endowment funds not in the pos	•	ization that are hold	and adr	ministered for the		
Ja	organization by:	ssession of the organ	ization that are neid	and adi	ministered for the		'aa Na
	-						es No
	(i) unrelated organizations					3a(i)	
	(ii) related organizations					3a(ii)	
b 4	If "Yes" on line 3a(ii), are the related organi.					3b	
4	Describe in Part XIII the intended uses of the		owinent lunas.				
Part	Land, Buildings, and Equipmer		000 D 11/4 "		) F 000 F	3-4-V #	- 10
	Complete if the organization ans						
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)		ccumulated preciation	(d) Book	value
		(mivesument)	(Otrier)	ue ue	production		
	Land						
b	Buildings						
C	Leasehold improvements	1	1	1			

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

	Complete if the organization answered "Ye	0			
	<ul><li>(a) Description of security or category (including name of security)</li></ul>		(b) Book value		Method of valuation: end-of-year market value
) Financial	derivatives				
) Closely-l	neld equity interests	[			
Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
tal. (Column (	b) must equal Form 990, Part X, col. (B) line 12.) ▶				
art VIII	Investments – Program Related.				
are viii	Complete if the organization answered "Ye	es" on For	m 990 Part IV lir	e 11c. See Fo	rm 990 Part X line 1
	(a) Description of investment	011101	(b) Book value		Method of valuation:
	(4)		(2) 2001. Talab		end-of-year market value
<u>)</u> 2)					
s)					
l)					
5) *\					
<u>s)</u>					
)					
9)	b) must aqual Form 000 Part V cal (P) lina 12 )				
<b>9)</b> <b>tal.</b> (Column (	b) must equal Form 990, Part X, col. (B) line 13.)				
8) 9) tal. (Column ( Part IX	Other Assets.	oo" on For	m 000 Port IV lin	on 11d. Son En	rm 000 Part V line 1
<b>9)</b> <b>tal.</b> (Column (	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lir	ne 11d. See Fo	
e) tal. (Column ( Part IX	Other Assets.	es" on For	m 990, Part IV, lir	ne 11d. See Fo	rm 990, Part X, line 1
al. (Column (Part IX	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lir	ne 11d. See Fo	
e) tal. (Column ( Part IX	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lir	ne 11d. See Fo	
2) tal. (Column (  Part IX  1) 2)	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lir	ne 11d. See Fo	
2) Part IX  1) 2) 3)	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lir	ne 11d. See Fo	
e)  Part IX  Part IX  ()  ()  ()  ()  ()  ()  ()  ()  ()  (	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lir	ne 11d. See Fo	
2) tal. (Column (  Part IX  1) 2) 3)	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lir	ne 11d. See Fo	
2) 2) 2art IX 2) 2) 3) 3) 4) 5) 6) 6)	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lir	ne 11d. See Fo	
) al. (Column (  Part IX  ) ) ) ) ) ) ) )	Other Assets. Complete if the organization answered "Yes	es" on For	m 990, Part IV, lin	ne 11d. See Fo	
) al. (Column ( Part IX ) ) 2) 3) 5) 6) 6) 7)	Other Assets. Complete if the organization answered "Ye (a) Description		m 990, Part IV, lir		(b) Book value
Description (Column (C	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line		m 990, Part IV, lir		(b) Book value
2) tal. (Column (  Part IX  1) 2) 3) 4) 5) 7) 3)	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line 1  Other Liabilities.	15.)			(b) Book value
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al. (Column (C	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line  Other Liabilities. Complete if the organization answered "Ye line 25.	<i>15.)</i> es" on For			(b) Book value
al. (Column (C	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line: Other Liabilities. Complete if the organization answered "Ye line 25.  (a) Description of liability (b)	<i>15.)</i> es" on For			(b) Book value
al. (Column (C	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line: Other Liabilities. Complete if the organization answered "Ye line 25.  (a) Description of liability (b)	<i>15.)</i> es" on For			(b) Book value
Part IX	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line: Other Liabilities. Complete if the organization answered "Ye line 25.  (a) Description of liability (b)	<i>15.)</i> es" on For			(b) Book value
Part IX	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line: Other Liabilities. Complete if the organization answered "Ye line 25.  (a) Description of liability (b)	<i>15.)</i> es" on For			(b) Book value
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Part IX	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line: Other Liabilities. Complete if the organization answered "Ye line 25.  (a) Description of liability (b)	<i>15.)</i> es" on For			(b) Book value
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Part IX  Par	Other Assets. Complete if the organization answered "Ye (a) Description  mn (b) must equal Form 990, Part X, col. (B) line: Other Liabilities. Complete if the organization answered "Ye line 25.  (a) Description of liability (b)	<i>15.)</i> es" on For			(b) Book value

Schedule D (Form 990) 2016 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . . . . . . . . Amounts included on line 1 but not on Form 990. Part VIII, line 12: 2 Net unrealized gains (losses) on investments . . . . . . . . . . . . 2a Donated services and use of facilities . . . . . . . . . h 2e 3 Subtract line **2e** from line **1** . . . . . . . . . . . . . . . . . . 3 Amounts included on Form 990. Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a Add lines 4a and 4b . . . 4c Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: 2a 2b 2c 2d Add lines **2a** through **2d** . . . . . . . . . . . 2e 3 Subtract line **2e** from line **1** . . . . . . . . . . . . . . . . . 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.


Schedule D (For	m 990) 2016	Page 5
Part XIII	Supplemental Information (continued)	
<b>-</b>		

### **SCHEDULE F** (Form 990)

### **Statement of Activities Outside the United States**

OMB No. 1545-0047

2016

Open to Public

Department of the Treasury Internal Revenue Service

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

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Inspection **Employer identification number** 

Part			es Outside	the United States. Comp	olete if the organization ans	wered "Yes" on
	Form 990, Part IV, line					
1	For grantmakers. Does the					
	assistance, the grantees' eli grants or assistance?		_		criteria used to award the	
	grants or assistance:					∐Yes
2	For grantmakers. Describe	e in Part V t	he organizati	on's procedures for monit	oring the use of its grant	s and other
	assistance outside the Unite		· ·	·		
3	Activities per Region. (The fo	llowing Part I				
	(a) Region	(b) Number of offices in the	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as,	(e) If activity listed in (d) is a program service,	<b>(f)</b> Total expenditures for
		region	agents, and independent	fundraising, program services, investments, grants to recipients	describe specific type of service(s) in the region	and investments in the region
			contractors in the region	located in the region)	(-)g	
			u.e regien			
(1)						
(2)						
(0)						
(3)						
(4)						
( - /						
(5)						
(6)						
( <del>7</del> )						
(7)						
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(10)						
(4.4)						
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· ,						
(13)						
(14)						
(15)						
(13)						
(16)						
• ,						
(17)						
3a	Sub-total					
b	Total from continuation					
_	sheets to Part I					
С	Totals (add lines 3a and 3b)	1				

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description (i) Method of section and EIN of noncash assistance organization grant cash grant cash noncash valuation (if applicable) disbursement assistance (book, FMV, appraisal, other) (1) (2) (3) (4) (5) (6) **(7)** (8) (9) (10) (11) (12)(13)(14) (15) (16) Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 

Schedule F (Form 990) 2016

Part III 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)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2016 Page **4** 

Part	IV Foreign Forms	
1	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)	☐ 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)	□ 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 Certain Foreign Corporations (see Instructions for Form 5471)	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing 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).	□ 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 Foreign Partnerships (see Instructions for Form 8865)	☐ 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 (see Instructions for Form 5713; do not file with Form 990)	☐ No

Schedule F (Form 990) 2016 Page 5 Part V **Supplemental Information** 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.

### **SCHEDULE 0** (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization	Employer identification number

Schedule O (Form 990 or 990-EZ) (2016)		Page 2
Name of the organization	Employer identification number	
·		

Software Freedom Conservancy, Inc. Financial Statements February 28, 2017

### Software Freedom Conservancy, Inc. Financial Statements February 28, 2017

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Statement of Activities	3
Statement of Functional Expenses	4
Statement of Cash Flows	5
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271 Madison Avenue, Suite 602, New York, N.Y. 10016 Telephone (212) 689-2655 Fax (646) 619-4723 gary@eisenkraftcpa.com

### Independent Auditor's Report

To the Board of Directors of Software Freedom Conservancy, Inc.

I have audited the accompanying financial statements of Software Freedom Conservancy, Inc., which comprise the Statement of Financial Position as of February 28, 2017, and the related Statements of Activities, Functional Expenses and Cash Flows for the year then ended, and the related notes to the financial statements.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### **Auditor's Responsibility**

My responsibility is to express an opinion on these financial statements based on my audit. I conducted my audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that I plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, I express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

### Opinion

In my opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Software Freedom Conservancy, Inc., as of February 28, 2017, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

### **Report on Summarized Comparative Information**

I have previously audited Software Freedom Conservancy, Inc.'s, February 29, 2016 financial statements, and I expressed an unmodified audit opinion on those audited financial statements in my audit report dated January 12, 2017. In my opinion, the summarized comparative information presented herein, as of, and for the year ended February 28, 2017, is consistent, in all material respects, with the audited financial statements from which it has been derived.

January 16, 2018

# Software Freedom Conservancy, Inc. Statement of Financial Position February 28, 2017 (With Summarized Financial Information for 2016)

	February 28, <u>2017</u>		F	February 29, 2016
Assets				
Current Assets Cash Prepaid expenses Contributions receivable Security deposit Total Current Assets	\$	2,203,969 3,668 538,101 600 2,746,338	\$	1,351,786 4,895 567,606 600 1,924,887
Total Assets	\$	2,746,338	\$	1,924,887
Liabilities  Liabilities  Current Liabilities  Accounts payable and accrued expenses Unearned income - advance program registration fees Total Current Liabilities	\$	181,479 278,787 460,266	\$	50,664 213,612 264,276
Net Assets				
Net Assets Unrestricted Temporarily restricted Total Net Assets	_	482,172 1,803,900 2,286,072		310,860 1,349,751 1,660,611
Total Liabilities and Net Assets	\$	2,746,338	\$	1,924,887

# Software Freedom Conservancy, Inc. Statement of Activities For the Year Ended February 28, 2017 (With Summarized Financial Information for 2016)

	Unrestricted	Temporarily <u>Restricted</u>	Total Year Ended February 28, <u>2017</u>	Year Ended February 29, <u>2016</u>
Support and Revenue				
Contributions Conference registration fees Honoraria Book royalties Trademark licensing income Interest and currency conversion gains Conference sponsorship income Promotional items sales	\$ 717,245 216 200 1,090 5 718,756	\$ 1,093,637 286,767 1,993 1,800 2,518 19,437 762 1,406,914	\$ 1,810,882 286,767 - 2,209 2,000 3,608 19,437 767 2,125,670	\$ 1,780,653 108,110 14,650 3,439 1,555 17,675
Net Assets released from restrictions: Satisfaction of program restrictions	952,767	(952,767)	-	iei
Total Support and Revenue	1,671,523	454,147	2,125,670	1,926,082
Expenses				
Program services	1,255,859	(元)	1,255,859	968,363
Supporting services: General and administrative Fund-raising Total Supporting services	184,043 60,307 244,350	)# 	184,043 60,307 244,350	140,964 51,921 192,885
Total Expenses	1,500,209	( <del>4</del> )	1,500,209	1,161,248
Change in Net Assets	(548,080)	1,161,903	625,461	764,834
Beginning Net Assets	1,030,252	641,997	1,660,611	895,777
Ending Net Assets	\$ 482,172	\$ 1,803,900	\$ 2,286,072	\$ 1,660,611

# Software Freedom Conservancy, Inc. Statement of Functional Expenses Year Ended February 28, 2017 (With Summarized Financial Information for 2016)

	Program Services		,	Supporting Services				
			Ac	General and Iministrative	į	Fund-raising	Total Year Ended February 28, 2017	Year Ended February 29, <u>2016</u>
Salaries and wages	\$	200,706	\$	100,355	\$	36,353	\$ 337,414	\$ 281,035
Employee benefits		65,690		31,006		11,671	108,367	88,803
Internships		457,265		¥		\$#\$	457,265	261,250
Payroll taxes		16,471		8,201		2,989	27,661	23,202
Technology expenses		9,309		5,094		(#2)	14,403	11,429
Bad debt expenses		1(4)		10,130		353	10,130	370
Bank charges and other fees		:::::::::::::::::::::::::::::::::::::::		9,427			9,427	10,545
Office supplies and other		275		2,174		4,797	7,246	7,883
Travel, meals and lodging		2,327		1,295		1,400	5,022	3,205
Taxes and government assessments		4,307		476		1963	4,783	751
Trademark registration & enforcement		3,371		*		9 <del>7</del> 7	3,371	2,229
Membership		2,357		121		257	2,478	449
Insurance		656		1,687		•	1,687	1,687
Payroll processing fees		819		384		153	1,356	1,073
Copyright license enforcement		1,075		2		320	1,075	14,363
Occupancy		225		105		42	372	584
Grants		200		=		980	200	200
Mentoring student software developers Professional services:		S#3		5		351	Ē	5,000
Software development and design		90,884		<u>u</u>		**	90,884	45,865
Accounting and audit		-		12,742		(#C	12,742	11,800
Promotional		3,026		634		2,506	6,166	2,211
Non-license enforcement legal fees		424		212		71	707	960
Graphic design		412				50	462	20
Program Coordination		8,357		<u>u</u>		20	8,357	
Ů		867,500		184,043		60,032	1,111,575	774,544
Direct conference expenses:								
Travel, meals and lodging		292,418		Ti.		250	292,418	253,757
Venue rental		41,386		77.		275	41,661	62,060
Audio / video		28,672		-		920	28,672	37,312
Bank charges and other fees		10,066		Ψ:		2 <b>=</b> 2	10,066	7,762
Services		7,151		**		940	7,151	10,340
Registration service fees		5,135		*		(#)S	5,135	66
Materials		2,161		#:		18	2,161	9,188
Sponsorship		1,000		π:		-	1,000	, 20°
Badges		356		22		342	356	1,449
Honoraria		14		-		( <b>=</b> )	14	1,500
T-shirts	-	(40)		*		-		3,270
		388,359		Ē.,		275	388,634	386,704
Total Expenses	\$	1,255,859	\$	184,043	\$	60,307	\$ 1,500,209	\$ 1,161,248

# Software Freedom Conservancy, Inc. Statement of Cash Flows For the Year Ended February 28, 2017 (With Summarized Financial Information for 2016)

	Year Ended February 28, <u>2017</u>		Year Ended February 29, 2016
Cash Flows from Operating Activities			
Change in Net Assets Adjustments to reconcile changes in net assets to net cash provided by (used in) operating activities: (Increase) decrease in operating assets:	\$	625,461	\$ 764,834
Prepaid expenses Contributions receivable		1,227 29,505	(3,341) (494,345)
Increase (decrease) in operating liabilities: Accounts payable and accrued expenses Unearned income - advance program		130,815	(8,197)
registration fees  Net cash provided by operating activities	_	65,175 852,183	 151,018 409,969
Net cash provided by operating activities	_	002,100	100,000
Net Increase in Cash		852,183	409,969
Beginning Cash		1,351,786	941,817
Ending Cash	\$	2,203,969	\$ 1,351,786

### Software Freedom Conservancy, Inc. Notes to Financial Statements February 28, 2017

### Note 1 - Nature of Activities and Summary of Significant Accounting Policies

### Nature of Activities

Software Freedom Conservancy, Inc. (the Organization) is a not - for - profit organization that helps promote, improve, develop, and defend Free, Libre, and Open Source Software (FLOSS) projects. Conservancy provides a nonprofit home and infrastructure for FLOSS projects. This allows FLOSS developers to focus on what they do best — writing and improving FLOSS for the general public.

FLOSS projects whose applications are accepted become part of the Organization (akin to a separate department of a large agency). Once joined, the "member project" receives most of the benefits of existing as a non-profit corporate entity without engaging in the arduous work of forming a separate, new organization. The Organization aggregates the work of running a FLOSS non - profit for its many members.

The Organization provides many important services for its member projects. Member projects can take directed donations, which allows donors to earmark their donations for the benefit of a specific FLOSS project. The Organization provides fiscal oversight to ensure that these funds are spent in a manner that advances the project and fits with the Organization's 501(c)(3) mission to promote, advance, and defend software freedom.

If the member project's leaders want, the Organization can also hold other assets and titles on behalf of the projects, such as copyrights, trademarks, domain names, online hosting accounts, and title and ownership of physical hardware. Also at discretion of the project's leaders, the Organization can assist in defending the rights represented in these assets. For example, the Organization is available to assist member projects in enforcing the terms of the projects' FLOSS license.

Finally, developers of the Organization's member projects, when operating in their capacity as project leaders, could receive some protection from personal liability for their work on the project.

Software Freedom Conservancy, Inc., was incorporated in the State of New York in 2006.

### Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

#### Financial Statement Presentation

The Organization reports information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Unrestricted net assets represent revenues and expenses related to the operations and management of the Organization's primary programs and supporting services. If funds are raised and set aside by the Board for future use, these are considered unrestricted. Temporarily restricted contributions that are expended for their restricted purpose in the same reporting period as received may be recorded as unrestricted.

### Software Freedom Conservancy, Inc. Notes to Financial Statements February 28, 2017

### Note 1 - (Continued)

### Financial Statement Presentation (Continued)

Temporarily restricted net assets represent resources available for use, but expendable only for the purpose specifically stated by the donor. As of February 28, 2017, there were \$1,803,900 of temporarily restricted net assets.

Permanently restricted net assets are assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. Generally, the donors of these assets permit the Organization to use all or part of the income earned on only related investments for general or specific purpose. As of February 29, 2017, there were no permanently restricted net assets.

### **Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

### Functional Allocation of Expenses

The costs of providing various programs and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated between the program and supporting services benefited.

### Cash

Cash consists of demand deposit accounts held at major financial institutions and may at times exceed the insurable amount. Management believes it mitigates its risk by investing in a major financial institution and in funds that are currently U.S. federal government insured. Recoverability of investments is dependent upon the performance of the issuer.

### Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all highly liquid investments purchased with original maturities of three months or less when purchased to be cash equivalents.

### Revenue Recognition

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted depending on the existence and / or nature of any donor restrictions. The Organization has not received any contributions with donor-imposed restrictions that would result in permanently restricted net assets.

Income is recognized on an accrual basis when earned.

### Reclassifications

Certain reclassifications have been made to prior year amounts to conform to the current year presentations.

### Software Freedom Conservancy, Inc. Notes to Financial Statements February 28, 2017

### Note 1 - (Continued)

### Contributions Receivable

Contributions receivable are stated at the amount management expects to collect. Management provides for probable uncollectible amounts through adjustments to valuation allowances based on its assessment of the current status of individual receivables. Balances still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance. For the year ended February 28, 2017, the allowance for doubtful accounts was \$0.

All contributions receivable are expected to be collected within the current operating cycle of one year.

### Income Taxes

The Organization is exempt from federal income taxes under section 501(c)(3) of the Internal Revenue Code. Therefore, no provision for income taxes has been provided for in the accompanying financial statements.

### **Donated Services**

Donated services are recognized as contributions if the services (1) create or enhance nonfinancial assets or (2) require specialized skills, are performed by people with those skills, and would otherwise be purchased by the Organization. Volunteers provide various services that are not recognized as contributions in the financial statements since the recognition criteria were not met.

### Subsequent Events

In preparing these financial statements, the Organization, has evaluated subsequent events and transactions for potential recognition or disclosure in the financial statements January 16, 2018, the date the financial statements were available to be issued.

#### Note 2 - Unearned Income

Unearned income represents income for the year ending February 28, 2018, that was received during the year ended February 28, 2017.

**Note 3 - Temporarily Restricted Net Assets** 

Temporarily restricted net assets by revenue source and changes therein for the year ended February 28, 2017, were as follows:

	Balance as of February 29, 2016	Additions	Releases From Restrictions	Balance as of February 28, 2017
Restricted as to purpose for the following projects:				
ArgoUML	\$ 12,697	\$ 11	\$ =	\$ 12,708
Boost	143,743	81,613	(76,449)	148,907
Bro	199,988	139,237	(61,507)	277,718
Buildbot	19,900	-	(10,000)	9,900
BusyBox	66,460	375	(m))	66,835
Coreboot	1,800	22	2	1,800
Darcs	1,642	35	(2)	1,675
Diversity Grant	15,000	=	1 <del>2</del> 21	15,000
Evergreen	43,075	61,837	(49,724)	55,188
Foresight	393	<u>.</u>	**	393
Gevent	6,881	2,831	(96)	9,616
Git	18,740	4,745	(2,260)	21,225
Godot	5,097	25,905	(18,457)	12,545
Homebrew	9	4,617	(39)	4,578
Inkscape	36,765	13,058	(8,077)	41,746
K3D	2,858	23	(1)	2,880
Kallithea	91	186	(7)	270
Kohana	2,742	14	(445)	2,311
Libbraille	459	5	:=2	464
LibreHealth	100	947	(24)	923
Linux Compliance	35,517	*	(626)	34,891
Linux XIA	1,500	2,880	(1,731)	2,649
LuxRender	3,151	576	(39)	3,688
Mercurial	16,845	6,761	(6,363)	17,243
Metalink	928	-	(5)5557	928
OpenChange	2,545	_		2,545
Outreachy	255,140	568,634	(464,550)	359,224
PyGMO	1,000	-	(1,249)	(249)
РуРу	49,533	29,796	(12,151)	67,178
QEMU	4,796	4,771	(2,142)	7,425
SWIG	3,862	15	(1)	3,876
Samba	134,224	28,264	(11,582)	150,906
Selenium	92,169	250,602	(153,107)	189,664
SpecOps	02,100	28,350	(14,635)	13,714
Squeak	267	1,513	(38)	1,742
Sugar	84,655	5,924	(8,416)	82,163
Twisted	12,416	2,750	(1,585)	13,581
Wine	11,559	8,413	· (8,208)	11,764
Xapian	3,000	4,700	(2,959)	4,741
phpMyAdmin	58,313	118,529	(36,297)	140,545
priprity/ Cirilli	\$ 1,349,751	\$ 1,397,917	\$ (952,767)	\$ 1,794,900
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