Return of Organization Exempt From Income Tax

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

DLN: 93493122000427 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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

Open to Public

A F	or th	e 2016 c	alendar year, or tax year beginning 01-01-2016 , and ending 12-31-	-2016	1							
		pplicable	C Name of organization FONKOZE USA INC		D Employer i	dentıfı	cation number					
□ Na		change nange			52-202211	52-2022113						
☐ Ini	tial re	-	Doing business as									
Fin Detur		minated			E Telephone n	umber						
		d return	Number and street (or P O box if mail is not delivered to street address) Room/suite 1718 CONNECTICUT AVE NW STE 201	9								
☐ Ap	olicati	on pending	City or town, state or province, country, and ZIP or foreign postal code		(202) 628-	9033						
			WASHINGTON, DC 20009		G Gross receip	ts \$ 2,	950,744					
			F Name and address of principal officer	H(a) Is the	s a group returi	n for						
			LEIGH CARTER	subor	dinates?		□Yes ☑ No					
				H(b) Are a	ll subordinates		☐ Yes ☐No					
I Tax	(-exer	mpt status	☑ 501(c)(3) ☐ 501(c)() ◀ (insert no) ☐ 4947(a)(1) or ☐ 527		o," attach a list	(see	instructions)					
J W	ebsit	te:► WW			exemption nu	•	•					
				L Year of form	ation 1997 M	State	of legal domicile NY					
K Forn	n of o	rganization	☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L rear of form	udon 1337 14	State	or regar dofficite. Wi					
Pa	άI	Sum	mary									
			scribe the organization's mission or most significant activities	IN OPPER T	-0 PD0\/IDE CD	ANTO	LOANC AND					
e)			INIZATION WAS FORMED TO RAISE BOTH DONATED AND INVESTED FUNDS IL ASSISTANCE TO THE ORGANIZED POOR OF HAITI	IN ORDER I	O PROVIDE GR	AN IS	, LUANS, AND					
anc T	-											
Ĕ	-											
0 Ve	,	Chack the	is box $lacktriangle$ If the organization discontinued its operations or disposed of mo	ro than 25%	of its not asso	+c						
<u> </u>	3	∣з	11									
≫ 0	4	Number o	4	8								
Activities & Governance	5	Total nur	Total number of individuals employed in calendar year 2016 (Part V, line 2a)									
Ę	6	Total nur		6 16								
ď	7a	Total unr		7a	0							
	ь	Net unrel	ated business taxable income from Form 990-T, line 34		7b							
				Pri	ior Year		Current Year					
O.	8	Contribut	ions and grants (Part VIII, line 1h)		2,654,656		2,676,615					
Ě	9	Program	service revenue (Part VIII, line 2g)				77,063					
Ravenue	10	Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		111,473		20,455					
ш	11	Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		31,646	10,552						
	12	Total rev	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5 2,784,68								
	13	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1–3)		2,691,190		1,757,610					
	14	Benefits	paid to or for members (Part IX, column (A), line 4)				0					
SS.	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)		459,355		580,756					
Expenses	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)		0							
e d	b	Total fund	raising expenses (Part IX, column (D), line 25) ▶309,116									
Ð	17	Other ex	penses (Part IX, column (A), lines 11a–11d, 11f–24e)		502,765							
	18	Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		3,684,717		2,841,131					
	19	Revenue	less expenses Subtract line 18 from line 12		-886,942		-56,446					
& &				Beginning	of Current Year		End of Year					
an an	20	Total	ote (Part V. lino 16)		A 762 FOA		4 F00 F41					
Ass 1Be			ets (Part X, line 16)		4,762,594		4,590,541					
Net Assets or Fund Balances			ulities (Part X, line 26)		3,953,970 808,624		3,804,746 785,795					
Par			ature Block		000,024		/65,/95					
			erjury, I declare that I have examined this return, inclu									
knowl	edge	and belie	f, it is true, correct, and complete Declaration of prepa									
any k	nowle	eage										
		*****	*									
Sign		Signati	ure of officer									
Here	:	LEIGH	CARTER FOUNDER									

Paid Preparer **Use Only** Type or print name and title Print/Type preparer's name JOHN N CRAFT Preparer's signature JOHN N CRAFT Firm's name ► CRAFT NOBLE & COMPANY PLLC Firm's address ► 1018 IVAL JAMES BLVD STE B RICHMOND, KY 40475

May the IRS discuss this return with the preparer shown above? (see instru For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (20	16)				Page 2
Par	t III	Statement of Program	Service Accomplis	hments		
		Check if Schedule O contains	a response or note to	any line in this Part III		🗆
1		describe the organization's m				
				ID INVESTED FUNDS I	N ORDER TO PROVIDE GRANTS, LO	DANS, AND TECHNICAL
A551	STANCE	TO THE ORGANIZED POOR O	- HAITI			
2	Did the	organization undertake any s	agnificant program ser	vices during the year	which were not listed on	
		or Form 990 or 990-EZ? .		5 ,		☐ Yes 🗹 No
	If "Yes.	" describe these new services	on Schedule O			
3		organization cease conductin		changes in how it con-	ducts, any program	
	service	s [?]				🗌 Yes 🗹 No
	If "Yes,	" describe these changes on S	Schedule O			
4	Section		anizations are required	to report the amount	e largest program services, as mea: of grants and allocations to others,	
4a	(Code) (Expenses	\$ 1,757,610	including grants of \$	1,757,610) (Revenue \$)
		PROGRAM - TO SUPPORT AND REL AKEN BY OTHER ORGANIZATIONS			ED IN HAITI GRANTS ARE MADE TO SUP IN HAITI	PORT PROJECTS
4b	(Code) (Expenses	\$ 197,448	ıncludıng grants of \$) (Revenue \$)
		TON PROGRAM - TO EDUCATE AND THE POOR IN HAITI	INFORM THE U.S. POPUL	ATION ABOUT THE WORK	OF ORGANIZATIONS FORMED FOR THE	CHARITABLE PURPOSE OF
4c	(Code) (Expenses	\$ 291,599	ıncludıng grants of \$) (Revenue \$)
	OTHER F	PROGRAMS - VARIOUS SUPPORT P	ROGRAMS AND ACTIVITIE	S BENEFITING THE POOR	IN HAITI	
4d	Other p	program services (Describe in	Schedule O)			
	(Expen	ses \$	including grants of	\$) (Revenue \$)
4e	Total p	orogram service expenses i	2,246,6	57		

2

3

4

5

6

7

8

9

10

11a

11b

11c

11d

11e

11f

12a

13

14a

14b

15

16

17

18

19

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

: IV	Checkli	st	of I	Req	uir	ed	Sch	ied	lule	es						
	organizati															
Sched	ule A 🔧															

or X as applicable

		L
1	Is th	e
	Caba	
	Sche	·C

Form 990 (.	2016)
Part IV	Checklist of Required Schedules

2016)	
Checklist of Required Schedules	
e organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete	_

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII.

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

	No
Yes	

Page 3

No

Nο

Nο

No

Nο

Νo

Nο

Nο

Nο

Nο

Nο

Νo

Nο

Nο

Form **990** (2016)

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 💆 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 😏

Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 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?

29

33

Part IV	Checklist of Required Schedules (continued)		
		Yes	No
30- D.J.H	a supervised and a supervised and a supervised for all the supervised for the supervised		

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

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,"

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

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?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 📆

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20b Yes 21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

38

Yes

Form 990 (2016)

Yes

Yes

Νo

Νo No

Νo

Nο

Nο

No

No

Nο

Nο

Nο

Nο

Nο

Nο

No

No

Nο

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a No b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

orm	990 (2016)			Page !
Par	t 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			_Ц_
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 17 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 10			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
L		2b	Yes	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-	103	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►HA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
·	If res, to fine 3a of 3b, did the organization me form 6000-1.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
_	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
Qa	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	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)			
2-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	124		
U	12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		1

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 11			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		.,	
_	officer, director, trustee, or key employee?	2	Yes	
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		
_	Σ		Yes	No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		No_
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
4	Did the organization have a written document retention and destruction policy?	14	Yes	
.5	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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
6a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	190		
7	List the States with which a copy of this Form 990 is required to be filed▶			
	.´´	M , NC	:, он , _'	oĸ,
8	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available.	, 1	, 110	, v
	✓ Own website ✓ Another's website ✓ Upon request ☐ Other (explain in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
0	policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records			
-	►THE ORGANIZATION 1718 CONNECTICUT AVE NW SUITE 201 WASHINGTON, DC 20009 (202) 628-9033			

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest
- compensated employees, and former such persons Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Name and Title	Average hours per week (list any hours		ne b	ox, ι n of	t che unle: ficer	ss pers	son	Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) THERESE FENG BOARD CHAIR	10 00	Х		x				0	0	0	
(2) BETH DANIELS VICE CO-CHAI	1 00	Х		x				0	0	0	
(3) JEAN GUY NOEL VICE CO-CHAI	1 00	X		x				0	0	0	
(4) DANIEL ROBINSON SECRETARY	1 00	х		х				0	0	0	
(5) JAMES KURZ TREASURER	1 00	Х		х				0	0	0	
(6) MARGUERITE LATHAN BOARD MEMBER	1 00	Х						0	0	0	
(7) JOSEPH B PHILIPPE BOARD MEMBER	1 00	Х						0	0	0	
(8) MAJORIE RAWLS ROBERTS BOARD MEMBER	1 00	Х						0	0	0	
(9) LAURA STEPHENS BOARD MEMBER	1 00	Х						0	0	0	
(10) LAURA ROBERTS WRIGHT BOARD MEMBER	1 00	х						0	0	0	
(11) HEROLD RODRIGUE BOARD MEMBER	1 00	X						0	0	0	
(12) MARGARET A FOURRE EXECUTIVE DI	40 00			x				114,677	0	7,679	
										Form 990 (2016)	

(A)

Name and Title

compensation from the organization >

(B)

Average

Part VII

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

Page 8

		hours per week (list any hours for related			n of	ficer	and a		fro organiz	ensation m the ation (W- 9-MISC)	compensation from related organizations (2/1099-MISC	W-	compens W- from t	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/109	9-1113C)	2/1099-1413C	,	relate organiza	ed
												+		
												+		
												+		
												_		
												+		
c	Total from continuation sheets to P	art VII, Sectio	nΑ.				*			114,677				7,679
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos	e list	ed al	bove		rec	eived mo	re than \$1	00,000			<u> </u>
												_	Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> .			ee, k	ey e	mple •	oyee,	or hi	ghest cor	mpensated • • •	employee on	3		No
4	For any individual listed on line 1a, is organization and related organization individual										n the	4		No
5	Did any person listed on line 1a recei services rendered to the organization					,			_		vidual for	5		No
S	ection B. Independent Contract	tors												
1	Complete this table for your five high from the organization Report compe											mpens	sation	
	Name :	(A) and business addre	ess							Desc	(B) ription of services		(C Compen	
												\dashv		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

(C)

Position (do not check more

(D) Reportable

(E) Reportable

Part		III Statement of	Revenue							rage 3
				a respo	onse or note to any	/ line in this Part V	III .			🗆
						(A) Total revenue	f	(B) elated or exempt unction evenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1	a Federated campaig	ns	1a	8,335			evenue		312-314
ons, Gifts, Grants Similar Amounts		b Membership dues		1b						
Gra no		c Fundraising events		1c	313,504					
15 A A		d Related organizatio	ns	1d						
<u>a</u>		e Government grants (co	ontributions)	1e						
ns,		f All other contributions,		 						
ıtio er S		and similar amounts na above	ot included	1f	2,354,776					
혈		g Noncash contribution								
Contributions, Gifts, Grants and Other Similar Amounts		ın lınes 1a-1f \$		120,	<u>,961</u>					
ತ ರ	Ļ	h Total.Add lines 1a-1	lf			2,676,615				
HI e					Busines	s Code				
75V	2	a LOAN FUND INTEREST					77,063			77,063
Service Revenue	ı	b ————								
rwc	•	c								
3	•	d								
ran	'	e ————————————————————————————————————								
Program					_	77,063				
		Total.Add lines 2a-2f				1	<u> </u>			
		Investment income (ii similar amounts) .			nterest, and other	19,	344			19,844
	4	Income from investme	ent of tax-exe	empt bo	ond proceeds	•				
	5	Royalties				<u> </u>				
	6	- Cross ronts	(ı) Rea	I	(II) Personal	4				
	0.	a Gross rents								
		b Less rental expenses								
		c Rental income or				_				
		(loss)								
		d Net rental income o			· · · •					
	_ ا	a Gross amount	(ı) Securi	ties	(II) Other	_				
	′	from sales of assets other		86,727						
		than inventory								
		b Less cost or other basis and		06.116						
		sales expenses		86,116						
		C Gain or (loss)		611			511	611		
		d Net gain or (loss) . a Gross income from fi		• entc	<u> </u>	<u> </u>	711	611	-	
<u> </u>	-	(not including \$	313,504							
en		contributions reporte See Part IV, line 18		. al	 59,15!	5				
Other Revenue		b Less direct expense		ь	79,943					
er		c Net income or (loss)		ing ev	ents		788			-20,788
Oth	9	a Gross income from g		ies						
0		See Part IV, line 19		a						
		b Less direct expense	s	b		\dashv				
		c Net income or (loss)	from gaming	activit	ies					
	10	aGross sales of invent	ory, less							
		returns and allowand	.es	a	l					
		b Less cost of goods s	sold	b		\dashv				
		c Net income or (loss)		ا invent:	ory >					
		Miscellaneous			Business Code					
	1	1a TI KOZE PRESS				17,	702			17,702
		b DELEGATION INCOM	1E			13,	538			13,638
		с								
		d All other revenue .								
		e Total. Add lines 11a	-11d		•	31,	340			
	1	2 Total revenue. See	Instructions			2.784.		611		107,459
						2,764,		011	· I	Form 990 (2016)

Forr	n 990 (2016)				Page 10
	ITT IX Statement of Functional Expenses				
Sect	tion $501(c)(3)$ and $501(c)(4)$ organizations must complete all co	_	·	lete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX			<u> ⊔</u> '
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	50,000	50,000		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	1,707,610	1,707,610		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	122,355	55,060	12,235	55,060
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	391,955	205,968	96,753	<u> </u>
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	24,000	9,035	10,710	4,255
9	Other employee benefits	3,727	1,834	653	1,240
10	Payroll taxes	38,719	19,370	8,685	10,664
11	Fees for services (non-employees)				
<i>=</i>	a Management				
ŀ	o Legal	7,199	1,564	5,635	
c	a Accounting	16,501		16,501	
ď	il Lobbying				
€	e Professional fundraising services See Part IV, line 17				
f	Investment management fees			!	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,958	1,349	996	613
12	Advertising and promotion				
13	Office expenses	42,495	9,145	7,887	25,463
14	Information technology				
15	Royalties				
16	Occupancy	57,913	24,248	21,056	12,609
17	Travel	34,137	15,902	5,574	12,661
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	29,026		29,026	
20	Interest	48,013	48,013		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,809		6,809	
23	Insurance	10,025	3,907	4,917	1,201
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				

69,243

66,911

23,288

21,820

66,427

2,841,131

48,996

2,283

21,820

20,553

2,246,657

19,462

38,459

285,358

69,243

17,915

1,543

7,415

309,116

Form **990** (2016)

exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. 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)

expenses on Schedule O)

a FUNDRAISING EXP

c TECHNOLOGY

b SOCIAL MEDIA/COMM

d DELEGATION EXPENSE

e All other expenses

- 1	-	Savings and temporary easi investments	1 2.,555	_	02,010
	3	Pledges and grants receivable, net	207,162	3	263,459
	4	Accounts receivable, net	21,494	4	25,522
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) wollintary employees; hencefolder organizations (see instructions). Complete		6	

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

30

31

32

33

34

iabilities 22

Fund Balances

Assets or

Net

Part II of Schedule L Notes and loans receivable, net . . Inventories for sale or use Prepaid expenses and deferred charges .

10a Land, buildings, and equipment cost or other

basis Complete Part VI of Schedule D

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities.Add lines 17 through 25 .

Intangible assets

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

10a 10b **b** Less accumulated depreciation

Investments—other securities See Part IV, line 11 .

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here ▶ 🔲 and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

34,878

29,368

8 13,073 9

10,738

690.840

501,600

12.457

8.314

468.000

3.477.656

3.953.970

274,153

354.834

179,637

808,624

4.762.594

4.762.594

2.832.508

7

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

17,600

5,510

745.000

501.600

13.346

70.674

470.000

3.262.572

3.804.746

201.071

385.087

199.637

785,795

4.590.541 Form **990** (2016)

1.500

4.590.541

2.693.675

Form	990 (2016)			Page 12
Par	t XI Reconcilliation	of Net Assets		
	Check if Schedule C) contains a response or not	e to any line in this Part XI	<u> </u>
1	Total revenue (must equal	Part VIII, column (A), line 1	12)	2,784,685
2	Total expenses (must equa	al Part IX, column (A), line 2	5)	2,841,131
3	Revenue less expenses Su	ubtract line 2 from line 1 .		-56,446
4	Net assets or fund balance	s at beginning of year (must	t equal Part X, line 33, column (A)) 4	808,624
5	Net unrealized gains (losse	es) on investments		33,617
6	Donated services and use	of facilities	6	
7	Investment expenses .			
8	Prior period adjustments			
9	Other changes in net asset	s or fund balances (explain	ın Schedule O) 9	
10	Net assets or fund balance	s at end of year Combine lii	nes 3 through 9 (must equal Part X, line 33, column (B))	785,795
Par	t XIII Financial State	ments and Reporting		
	Check if Schedule	O contains a response or no	te to any line in this Part XII	🗆
		·	·	Yes No
1	Accounting method used to	o prepare the Form 990	☐ Cash ☑ Accrual ☐ Other	
•	_	• •	rom a prior year or checked "Other," explain in	
2a	Were the organization's fin	ancial statements compiled	or reviewed by an independent accountant?	No
	If 'Yes,' check a box below separate basis, consolidate		incial statements for the year were compiled or reviewed on a	
	Separate basis	Consolidated basis	☐ Both consolidated and separate basis	
Ь	Were the organization's fin	nancial statements audited b	y an independent accountant?	Yes
	If 'Yes,' check a box below consolidated basis, or both		incial statements for the year were audited on a separate basis,	
	✓ Separate basis	☐ Consolidated basis	☐ Both consolidated and separate basis	
С			committee that assumes responsibility for oversight ements and selection of an independent accountant?	Yes
	If the organization change	d either its oversight process	s or selection process during the tax year, explain in Schedule O	

За

Зb

Νo

Form **990** (2016)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Form 990 (2016)

Software ID:

Software Version:

EIN: 52-2022113

Name: FONKOZE USA INC

Form 990 or Complete if the				plete if the o	Charity Staturganization is a sect 4947(a)(1) nonexe	ion 501(c)(3) o mpt charitable 990 or Form 99	organization of trust. 0-EZ.	r a section	2016
nternal Re	v enu			ormation abou	ıt Schedule A (Form <u>www.irs.g</u>	990 or 990-EZ) <u>ov/form990</u> .) and its instru		Open to Public Inspection
lame of ONKOZE		e organizat INC	tion					Employer identific	ation number
Part I		Reason f	or Public (Charity Stat	us (All organization	s must complet	te this part) 9	52-2022113 See instructions	
					ent is (For lines 1 thro			see man decional	
1 [A church, c	onvention of	churches, or as	sociation of churches	described in sect	ion 170(b)(1)	(A)(i).	
2 [A school de	scribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3 [A hospital c	r a cooperati	ve hospital ser	vice organization desci	ribed in section :	170(b)(1)(A)(iii).	
4 [_	name, city,	and state	•	ed in conjunction with	•			·
5			tion operated iv). (Comple		t of a college or univei	rsity owned or op	erated by a gov	ernmental unit descri	bed in section 170
6 [_			•	governmental unit de	scribed in sectio	n 170(b)(1)(A	۸)(v).	
7 🗸	Z			mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	ınıt or from the gener	al public described in
8		A communi	y trust descr	ribed in section	170(b)(1)(A)(vi)	(Complete Part II	[)		
9 _					escribed in 170(b)(1) ee instructions Enter				ege or university or a
o [_	from activit investment	es related to income and	its exempt fur unrelated busir	(1) more than 331/3% octions—subject to cert ess taxable income (learnplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
1 [An organiza	tion organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
2	_	more public	ly supported	organizations (d exclusively for the be described in section 5 the type of supporting	09(a)(1) or sec	tion 509(a)(2). See section 509(a	
a [_	organizatioi	n(s) the powe		ated, supervised, or co appoint or elect a majo				
ь [Type II. A managemen	supporting on	rganization sup	ervised or controlled in ation vested in the sar				
c []	Type III fu	inctionally i	ntegrated. A	supporting organizatio lons) You must com				ited with, its
d [_	functionally	integrated -	The organizatio	d. A supporting organi n generally must satis 't IV, Sections A and	fy a distribution r			
e [Check this I	oox if the org	anızatıon recei	ved a written determir	ation from the IF	RS that it is a Ty	pe I, Type II, Type II	I functionally
f En				on-functionally Lorganizations	integrated supporting	organization			
				-	ipported organization(s)			
i)Name	e of	supported o	rganization	(ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiza your governin	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
otal									
	erw	ork Reduct	ion Act Not	ice, see the I	nstructions for	Cat No 11285	F	L Schedule A (Form 9	90 or 990-EZ) 2016

b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

organization

instructions

supported organization

▶□

Schedule A (Form 990 or 990-EZ) 2016

Part III

(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.)

_	the organization rans to				•	•	
56	ection A. Public Support					1	
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grants`")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
•	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
•	from line 6)						
Se	ection B. Total Support						
	Calendar year	(-)2012	(5)2012	(-)2014	(4)201E	(-)2016	(6\Tabal
	Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f) Total
9		(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f) Total
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,	(a) 2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
L0a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f) Total
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
L0a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
L0a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f) Total
LOa b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
LOa b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
LOa b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
LOa b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
b с 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
LOa b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
b с 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
b с 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
b c 111	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)						
b c 111	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for						ganization,
b c 111 12 13 14	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, tl				
b c 111 12 13 14	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th	nird, fourth, or fiftl			ganization,
b c 11 12 13 14 Se	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th	nird, fourth, or fiftl			ganization,
tioa b c 11 12 13 14 Se 15	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization Support Perce e 8, column (f) d	's first, second, the intage vided by line 13,	nird, fourth, or fiftl		ection 501(c)(3) or	ganization,
tioa b c 11 12 13 14 Se 15	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public Services.	r the organization Support Perce e 8, column (f) d chedule A, Part I	's first, second, the second of the second o	nird, fourth, or fiftl		ection 501(c)(3) or	ganization,
10a b c 111 12 13 14 Se 15 16 Se	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public services. Public support percentage from 2015 S	r the organization Support Perce e 8, column (f) d chedule A, Part I: nent Income	's first, second, the intage livided by line 13, II, line 15	nird, fourth, or fifti	n tax year as a se	ection 501(c)(3) or	ganization,
10a b c 11 12 13 14 Se 15 16 Se 17	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public section D. Computation of Investigation exterior D. Computation of Investigation.	r the organization Support Perce e 8, column (f) d chedule A, Part I: ment Income 16 (line 10c, colu	's first, second, the second of the second o	nird, fourth, or fifti	n tax year as a se	15 16 17	ganization,
b c 11 12 13 14 Se 15 16 Se 17 18	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public section D. Computation of Investi Investment income percentage from 2015 Investment i	r the organization Support Perce e 8, column (f) d ichedule A, Part I: ment Income 16 (line 10c, colui 015 Schedule A,	's first, second, the second of the second o	column (f))	n tax year as a se	15 16 17 18	ganization, ▶ □
10a b c 11 12 13 14 Se 15 16 Se 17 18 19a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public section Public support percentage from 2015 Section D. Computation of Investi	r the organization Support Perce e 8, column (f) d chedule A, Part I: ment Income 16 (line 10c, colum 015 Schedule A, organization did r	's first, second, the second of the second o	column (f))	h tax year as a se	15 16 17 18 n 33 1/3%, and line	ganization, ▶ □

not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

ightharpoons

ightharpoons

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)

answer line 10b below

the organization had excess business holdings)

2

Section A. All Supporting Organizations Yes Nο

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No." describe in Part VI how the supported organizations are designated. If designated by class or purpose. describe the designation. If historic and continuing relationship, explain

1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described 2

in section 509(a)(1) or (2) Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) helow the public support tests under section 509(a)(2)? If "Yes." describe in Part VI when and how the organization made the determination

3а Did the organization confirm that each supported organization gualified under section 501(c)(4), (5), or (6) and satisfied 3h Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use

3с 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 Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported

organization? If "Yes" describe in Part VI how the organization had such control and discretion despite being controlled or 4h supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c

Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed. (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? 5b 5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (1) 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

6 organization's supported organizations? If "Yes," provide detail in Part VI. 6

7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7 8

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ) 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes."

provide detail in Part VI.

9a

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

9b

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding 10a

Par	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		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
Se	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Par VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
Se	ction C. Type II Supporting Organizations			
	Green Co. Type 12 Cupper ting Crystinations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	f		
		1		
Se	ection 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		163	140
•	tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			
				I
	ction E. Type III Functionally-Integrated Supporting Organizations			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction and the Activities Test Complete line 2 below	LIONS)		
a b				
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (se	e instru	ctions))
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the			
	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <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 Part VI. the role played by the organization in this regard			
	, , , , , , , , , , , , , , , , , , , ,	3b		<u>L</u>

2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

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

Schedule A (Form 990 or 990-F7) 2016

temporary reduction (see instructions)

instructions)

Schedule A ((Form 990 or 990-EZ) 2	2016	Page 8
Part VI	Provide the explar lines 1, 2, 3b, 3c, line 1; Part IV, Se Section B, line 1e;	nformation. Inations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A., 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section B, lines 2 and 3; Part IV, Section B, lines 2 and 3; Part IV, Section B, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, b; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this tional information. (See instructions).	on C,
		Facts And Circumstances Test	
990 Scher	dule A, Supplemen	ntal Information	
Ret	urn Reference	Explanation	

CONTRACT 47,927 TI KOZE PRESS 17,702

DELEGATION INCOME 100,384 OTHER MISCELLANEOUS INCOME 2 LOAN PAYABLE REVERSAL 10,010 IDRF

PART II, LINE 10

Schedule A (Form 990 or 990-F7) 2016

efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

As Filed Data -

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990,

OMB No 1545-0047

DLN: 93493122000427

(Form 990)

1

6

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** FONKOZE USA INC 52-2022113 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) 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 the organization's exclusive legal control? ☐ Yes □ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 20 C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year > Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations Ma	aintaining Col	lections of Art, I	listor	ical Tı	reas	ures, or	Other	Similar A	ssets (continued)	
3		the organization's acque (check all that apply)	uisition, accessior	, and other records	, check	any of	the f	ollowing t	hat are a	significant	use of its	s collection	ı
а		Public exhibition			d		Loar	n or excha	ange prog	rams			
b		Scholarly research			e		Othe	er					
С		Preservation for future	generations										
4	Provide Part	de a description of the d	organızatıon's coll	ections and explain	how th	ey furtl	ner th	ne organiz	ation's ex	empt purpo	ose in		
5	Durin	g the year, did the orga s to be sold to raise fur								ılar	□ Ye	es 🗆	No
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			m 990), Part	IV,	line 9, or	r reporte	d an amo	unt on I	orm 990	, Part
1a		e organization an agent ded on Form 990, Part)		an or other intermed	liary for	contri	butio	ns or othe	er assets r	not	☐ Ye	es 🗆	No
b	If "Y∈	es," explain the arrange	ement in Part XIII	and complete the fo	llowing	table					mount		
c	Begin	ining balance							1c				
d	Addıt	ions during the year							1d				
е	Dıstrı	butions during the year							1e				
f	Endın	g balance							1f				
2a	Did th	ne organization include	an amount on Fo	rm 990, Part X, line	21, for	escrow	or c	ustodial a	ccount lia	bility?	Y€		— No
L		•			•					·		_	NO
b		s," explain the arrange											
Pa	rt V	Endowment Fund	ds. Complete if									(-)5	ll-
1.	Reginn	ing of year balance .		(a)Current year 690,840	(b)⊦	rior yea	r 5,255	(c) I wo ye	786,202	(d)Three ye	ars back 666,776	(e)Four ye	243,733
	_	outions		20,000			,637		4,715		55,000		396,891
				53,313			,320		39,321		64,426		26,152
		estment earnings, gain		10,000			,702		104,013		- 1,120		
		or scholarships		10,000		100	1,702		104,013				
е		expenditures for facilitie ograms	es										
f	Admını	strative expenses .											
g	End of	year balance		754,153		690	,840		726,225		786,202		666,776
2	Provid	de the estimated percei	ntage of the curre	ent year end balance	(line 1	g, colu	mn (a	a)) held a	s				
а	Board	d designated or quasi-e	ndowment 🟲	75 000 %									
b	Perm	anent endowment 🕨	25 000 %										
С	Temp	orarily restricted endov	vment ▶										
	The p	ercentages on lines 2a,	, 2b, and 2c shou	ld equal 100%									
3a		nere endowment funds	not in the posses	sion of the organiza	tion tha	t are h	eld aı	nd admını	stered for	the			
	_	nization by									_	Yes	
		nrelated organizations			•	•		• •				a(i)	No
ь		elated organizations . es" on 3a(ii), are the rel		s listed as required	on Sche	 Dalula P					_	a(ii) 3b	No
4		ribe in Part XIII the inte	-	· ·			•					<u> </u>	
	rt VI	Land, Buildings,											
		Complete if the ord			m 990	, Part :	IV, lı	ne 11a.	See Forr	n 990, Pa	rt X. lın	e 10.	
	Descri	ption of property	(a) Cost or oth (investme	er basis (b)Cost	or other				umulated d			(d) Book val	ue
	Land												
	Buildin	ŀ						1					
		iold improvements						1					
		· · · · · · · · · · · · · · · · · · ·						1					
		nent					34,878	1		29,368			5 510
		· · · lines 1a through 1e (Co	olumn (d) must o	Jual Form 990 Part	X colu				4	29,300			5,510
-50	Auu	mics to unough te (Co	zamii (u) must et	qual Form 330, Fait	A, COIU	(D)	, ,,,,,,,	10(0//	•	-			5,510

Part VII	Investments—Other Securities. Complete if	the organiz	zation answ	ered 'Yes' on F	orm 990, Part	: IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category	(b) Bo	ok value		c)Method of va	
(1)Financial	(including name of security) derivatives			Cost	or end-of-year r	market value
	eld equity interests					
	ENT IN FONKOZE SA		501,600		F	
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Column	(b) must equal Form 990, Part X, col (B) line 12)	•	501,600			
Part VIII	Investments—Program Related. Complete	ıf the organ	ization ans	swered 'Yes' on	Form 990, Pa	rt IV, line 11c.
	See Form 990, Part X, line 13. (a) Description of investment	(b) Boo	k value		c) Method of va	
(1)LOANS RE	ECEIVABLE		2,693,675	Cost	or end-or-year r	narket value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7) (8)						
(8) (9)						
	(h) must soul 5 m 200 But V and (D) (m 12)		2 602 675			
	(b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answer	ed 'Yes' on F	2,693,675 orm 990, Pa	rt IV, line 11d Se	ee Form 990, Pa	rt X, line 15
(1)	(a) Descripti	ion				(b) Book value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colur	nn (b) must equal Form 990, Part X, col (B) line 15)				>	
	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	answered	'Yes' on Fo	rm 990, Part IV	, line 11e or :	11f.
1. (1) Federal ır	(a) Description of liability		(b) Bo	ook value		
	icome taxes					
LOAN PAYABI	ES			3,243,675		
INTEREST PA	YABLE ON LOANS			18,897		
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	(b) must equal Form 990, Part X, col (B) line 25)	•	-1	3,262,572	and at the state of	that are a second as
	r uncertain tax positions In Part XIII, provide the text s liability for uncertain tax positions under FIN 48 (ASC					_
					Schedu	ıle D (Form 990) 2016

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

Explanation

Schedule D (Form 990) 2015

Part XIII

Return Reference

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,

	orm 990) 2015	Page 5	
Part XIII	Supplemental Info	rmation (continued)	
Return Reference		Explanation	
			Schedule D (Form 990) 2016

CII	le GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLN:	93493122000427		
	HEDULE F rm 990)	Statement of Activities Outside the United St				OMB No 1545-0047		
(1 01111 330)		► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.				2016		
-	rtment of the Treasurv			► See separate instructions.) and its instructions is at w		Open to Public Inspection		
	e of the organization KOZE USA INC				Employer ider	tification number		
FOINI	ROZE USA INC				52-2022113			
Pā	General Information Form 990, Part IV, lin		s Outside the	United States. Compl	ete if the organization a	nswered "Yes" to		
1	For grantmakers. Does the o	rganızatıon maı	ntaın records to	substantiate the amount	t of its grants and			
	other assistance, the grantees		he grants or ass	sistance, and the selection	n criteria used			
	to award the grants or assista	nce?				🗹 Yes 🗌 No		
2	For grantmakers. Describe in outside the United States	n Part V the org	anızatıon's proc	edures for monitoring the	e use of its grants and ot	her assistance		
3	Activites per Region (The follow	ıng Part I, lıne 3	table can be dup	olicated if additional space i	s needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1)	CENTRAL AMERICA AND THE CARIBBEAN			GRANTS		1,707,610		
(2)	CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		2,693,675		
	CENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICE	COMMUNICATION SERVIC	66,911		
(4)								
(5)								
	Sub-total Total from continuation sheets to Part I Totals (add lines 3a and 3b)					4,468,196 4,468,196		
C		111	1					

Schedule F (Form 990) 2	2016				•			Page 2
				es Outside the Unit . Part II can be duplic			n answered "Yes" t	o Form 990, Part
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		CENTRAL AMERICA & THE CARIBBEAN	EDUCATION & SUPPORT	1,323,591	WIRE TRANSFER			
(2)		CENTRAL AMERICA & THE CARIBBEAN	EDUCATION AND SUPPOR	241,092	WIRE TRANSFER			
(3)		CENTRAL AMERICA & THE CARIBBEAN	EDUCATION & SUPPORT	125,000	WIRE TRANSFER			
(4)		CENTRAL AMERICA & THE CARIBBEAN	EDUCATION & SUPPORT	16,000	WIRE TRANSFER			
2 Enter total numb exempt by the IF	er of recipient	t organizations listed ch the grantee or cou	above that are recogunsel has provided a s	gnized as charities by t section 501(c)(3) equi	the foreign country,	recognized as tax-	-	3
3 Enter total numb	er of other or	ganizations or entitie	3S				>	1

Schedule F (Form 990) 2016

(2)

(3) (4) (5) (6) (7)

(8) (9) (10) (11) (12) (13) $\overline{(14)}$ (15) (16)

(17) (18) Page 3

Schedule F (Form 990) 2016

Part III can be duplicated if additional space is needed. (c) Number of (a) Type of grant or assistance (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement non-cash of non-cash valuation (book, FMV, assistance assistance appraisal, other) (1)

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Sche	dule F (Form 990) 2016		Page 4
Par	t 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)	Yes	☑ 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)		
	Instructions for Forms 3320 and 3320-A)	☐ Yes	✓ 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)		
	Corporations (see Instructions for Form 5471)	☐Yes	✓ 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)	Yes	☑ 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)		
		☐ Yes	✓ 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)	☐ Yes	✓ No

Schedule F (Form 990) 2016	Page
Part V	amounts of investme method); and Part II	ormation tion required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method ents vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting II, column (c) (estimated number of recipients), as applicable. Also complete this part to provide nation (see instructions).
990 Sched	dule F, Supplementa	al Information
Re	turn Reference	Explanation

SCHEDULE F, PAGE 1, PART I, \parallel THE ORGANIZATION MONITORS USE OF GRANT FUNDS THROUGH REPORTS BY THE GRANTEE LINE 2 AND REGULAR SITE VISITS

990 Schedule F, Supplemental Information

Explanation

Return Reference	Explanation
SCHEDULE F, PAGE 1,	CENTRAL AMERICA AND THE CARIBBEAN 1,707,610 0 CENTRAL AMERICA AND THE CARIBBEAN 0
PART I, LINE 3	2,693,675 CENTRAL AMERICA AND THE CARIBBEAN 66,911 0

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493122000427 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. Name of the organization **Employer identification number** FONKOZE USA INC 52-2022113 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply e Solicitation of non-government grants | Mail solicitations ☐ Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Dıd (iv) Gross receipts (v) Amount paid to (vi) Amount paid to individual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No 8 10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Cat No 50083H

Schedule G (Form 990 or 990-EZ) 2016

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b) Event #2 (c)Other events (d) Total events **FUNDRAISING EVE** (add col (a) through (event type) (total number) (event type) col (c)) Revenue 1 Gross receipts. 372,659 372,659 2 Less Contributions. 313,504 313,504 Gross income (line 1 minus 59,155 line 2) 59,155 4 Cash prizes 5 Noncash prizes Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 79.943 79.943 **10** Direct expense summary Add lines 4 through 9 in column (d) . . . 79,943 11 Net income summary Subtract line 10 from line 3, column (d) . . . -20,788 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/Instant (d) Total gaming (add (c) Other gaming (a) Bingo bingo/progressive bingo col (a) through col (c)) 1 Gross revenue . Expenses | 2 Cash prizes 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % 6 Volunteer labor No 7 Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities _ ☐ Yes ☐ No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain . 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No If "Yes," explain _

Sche	dule G (Form 990 or 990-EZ) 2016					F	Page			
11	Does the organization conduct gamin	g activities with nonmembers	s?		☐Yes	□No				
12	Is the organization a grantor, benefic formed to administer charitable gami		member of a partnership or other entity		□Yes					
13	Indicate the percentage of gaming ac	tivity conducted in								
а	The organization's facility			13a						
b	An outside facility			13b						
14	Enter the name and address of the po	Enter the name and address of the person who prepares the organization's gaming/special events books and records								
	Name ▶									
	Address •	,								
15a	Does the organization have a contractive revenue?	t with a third party from who	om the organization receives gaming		□Yes	□No				
b			anization ▶ \$ and th	ne						
	amount of gaming revenue retained l	amount of gaming revenue retained by the third party ▶ \$								
С	If "Yes," enter name and address of the third party									
	Name •									
	Address ►									
16	Gaming manager information									
	Name ►									
	Gaming manager compensation $ hildsymbol{\blacktriangleright}$ \$_									
	Description of services provided ▶									
	☐ Director/officer	☐ Employee	☐ Independent contractor							
17	Mandatory distributions									
а	Is the organization required under started in the state gaming license?	ate law to make charitable di	stributions from the gaming proceeds to							
b	retain the state gaming license? Yes No Enter the amount of distributions required under state law distributed to other exempt organizations or spent									
U	n the organization's own exempt activities during the tax year ► \$									
Par	t IV Supplemental Informat	ion. Provide the explanat 15c, 16, and 17b, as app	cions required by Part I, line 2b, column licable. Also complete this part to provid							
	Return Reference		Explanation							
			<u>'</u>	ule G (F	orm 990 or	990-F7)	201			

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLN	l: 93493122000427
Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 .							
Name of the organization FONKOZE USA INC						52-202	="	tion number
	ntain records to sub- to award the grants anization's procedur Assistance to Dom	stantiate the amount of or assistance? es for monitoring the us	e of grant funds in the Un	ited States		,	Part IV, line	✓ Yes □ No
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descri non-cash as		(h) Purpose of grant or assistance
(1) APFUSA	47-3443733		50,000					EDUCATION & SUPPORT
2 Enter total number of section 2 Enter total number of other	r organizations liste	d in the line 1 table .						1
For Paperwork Reduction Act Notice	e, see the Instructio	ns tor Form 990.		Cat No 50055	۲		Sche	dule I (Form 990) 2016

Schedule I (Form 990) 2016					Page 2
	istance to Domestic Individed if additional space is needed		ganızatıon answered "Yes'	on Form 990, Part IV, line 22	-
(a) Type of grant or assistar		(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
Part IV Supplemental I	nformation. Provide the in	nformation required in	Part I, line 2, Part III	, column (b), and any other a	dditional information.
Return Reference	Explanation				

Schedule I (Form 990) 2016

efile GRAPHIC print - DO NOT PROCESS				iled Data -	DLN: 9349312200042							00427	
Schedule L (Form 990 or 990	-EZ)		► Compl rm 990, Pa	lete if the orga art IV, lines 2!	vith Interested Persons the organization answered lines 25a, 25b, 26, 27, 28a, 28b, or 28c, EZ, Part V, line 38a or 40b.								
Department of the Tre Internal Revenue Serv	isurv	ormation ab	► Attac	ch to Form 99 ule L (Form 99 www.irs.gov	0 or Form 99 00 or 990-EZ	0-EZ.	ructio	ns is	at		Dpen Inst	to P	ublic
Name of the org FONKOZE USA INC	anızatıon							•	yer ide 2113	entifica	tion n	iumb	er
	ss Benefit Trar lete if the organiza									ne 40b			
) Name of disquali			Relationship be				(c) [escript ansacti	tion of		(d) Corrected Yes No	
4958 3 Enter the ar	mount of tax incur mount of tax, if an ans to and/or I applete if the organ orted an amount o (b) Relationship with organization	y, on line 2, a From Inter ization answe n Form 990, I (c) Purpose	ested Per red "Yes" o Part X, line (d) Loan	bursed by the orsons. n Form 990-EZ, 5, 6, or 22	rganization .		90, Pa	•	line 26	\$ 5, or if t h) ived by	(janiza i)Wrii	tten
			То	From			Yes No		committee?		Yes	Yes No	
			10	110111			163	NO	163	NO	163		140
Total					\$								
	nts or Assistar					line 27.							
(a) Name of inter) Relationship erested perso organizat	n and the	(c) Amount	of assistance	(d) Type	of ass	stand	ce	(e) Pui	rpose o	of ass	ıstance
	luction Act Notice					at No 50056A				l (Form			

(a) Name of interested person	between interested person and the organization	transaction	(u) bescription of transaction	o organiz	of organization's revenues?	
				Yes	No	
(1) FONDASYON KOLE ZEPOL	3 BOARD MEMBERS		VARIOUS GRANTS		No	
(2) ASOSYASYON PEYIZAN FONDWA	1 BOARD MEMBER		VARIOUS GRANTS		No	

Part V **Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference **Explanation**

Schedule L (Form 990 or 990-EZ) 2016

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493122000427 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** FONKOZE USA INC 52-2022113 Part I **Types of Property** (c) (d) (a) (b) Check If Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art . . 2 Art—Historical treasures Art-Fractional interests Books and publications Clothing and household Cars and other vehicles Boats and planes . . Intellectual property . . Securities—Publicly traded . 9 87,188 9 Х Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . 12 Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . 14 Oualified conservation contribution-Other . Real estate—Residential . 16 Real estate—Commercial 17 Real estate—Other . . 18 Collectibles . . 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy Historical artifacts . 22 23 Scientific specimens . 24 Archeological artifacts . Other ► (9,955 25 Χ PRO FEES) Χ 1 26 Other ▶ (958 WINE DONATION) Other ▶ (Χ 1 21,410 AUCTION ITEMS) Other ▶ (Χ 1,450 EVENT TICKETS) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a Nο **b** If "Yes," describe the arrangement in Part II 31 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a No **b** If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2016) Cat No 51227J

Schedule M (Form 990) (2016)	Page 2				
Part II Supplemental Info					
Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Pai I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.					
Return Reference	Explanation				
	Schedule M (Form 990) (2016)				

efile GRAPH	IC print	- DO NOT PROCESS	As Filed Data -		DLN	l: 93493122000427
SCHEDUL (Form 990 or EZ)	990-	Complete to pro Form 990 o	vide information fo r 990-EZ or to prov ▶ Attach to Form : Schedule O (Form	on to Form 990 or 9 r responses to specific questi ide any additional informatio n 990 or 990-EZ. 990 or 990-EZ) and its instru v/form990.	OMB No 1545-0047 2016 Open to Public Inspection	
Name of the org FONKOZE USA INC	:	plemental Informatio	n		Employer iden 52-2022113	tification number
Return Reference				Explanation		
FORM 990, PART V, LINE 4B	HAITI					

Return Explanation

FORM 990, LAURA ROBERTS WRIGHT MARJORIE RAWLS ROBERTS BOARD MEMBER BOARD MEMBER SISTERS
PAGE 6,
PART VI,
LINE 2

Return Explanation

LINE 11B

FORM 990,	FORM 990 IS REVIEWED BY THE ORGANIZATION'S CFO. THE MEMBERS OF ITS BOARD OF DIRECTORS, AND AN
PAGE 6,	INDEPENDENT CPA
PART VI	

Return Explanation
Reference

FORM 990.	THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONF
	LICT OF INTEREST POLICY THROUGH INQUIRY OF ALL PARTIES
PART VI.	Elot of Intercent delot intercent in admit of ALLT ARTEC
LINE 12C	

Return Explanation

Reference THE COMPENSATION FOR TOP OFFICIALS IS EVALUATED BY THE BOARD OF BIRECTORS

LINE 15A

FORM 990, PAGE 6, PART VI.

Return Explanation
Reference

LINE 15B

FORM 990, PAGE 6, PART VI.

Return Explanation
Reference

FORM 990, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, MINNESOTA, MISSISSIPPI, MISSOURI, NEW HAMPSHIRE, PAGE 6, NEW JERSEY, NEW MEXICO, NORTH CAROLINA, OHIO, OKLAHOMA, OREGON, PENNSYLVANIA, RHODE ISLAN D, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINIA, WASHINGTON, WEST VIRGINIA, WISCONSIN, DIST OF COLUMBIA. NORTH DAKOTA. NEVADA

Return Explanation

FORM 990,	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS (BY-LAWS), CONFLICT OF INTEREST POLICY, DON
PAGE 6,	OR RIGHTS POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC THROUGH THEIR WEBSITE
PART VI,	
LINE 19	