foundations)

DLN: 93493216011465

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ 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 Inspection

		2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014 C Name of organization		D Familia	uor ! -	lontification number
_	eck if a dress ch	pplicadie Santa Barbara Institute for			-	lentification number
_	me cha			71-09	184	42
_	me cna :ial retu	5 Joing Daoiness as				
		Number and street (or P O box if mail is not delivered to street address) Room/suite	e	E Telepho	ne nu	ımber
– Fin ret		minated 928 ROBLE LANE		(805)	455	-6100
_	ended	SANTA BARBARA, CA 93105		G Gross re	eceipt	s \$ 654,630
Apı	olication	n pending				<u> </u>
		F Name and address of principal officer		Is this a group subordinates?	retu	rn for ┌ Yes ┌ No
				Are all subordi included?	nates	s
та Та	x-exem	npt status]	If "No," attach	a lıs	t (see instructions)
J W	ebsite	www.sbinstitute.com	H(c)	Group exempt	ion n	umber ►
		ganızatıon	L Year	r of formation 20	03	M State of legal domicile CA
Pa	rt I	Summary				
		Briefly describe the organization's mission or most significant activities CONTEMPLATIVE RESEARCH AND EDUCATION				
<u>မ</u> ိ	-					
Ē	:					
Governance	2 (Check this box 🔭 if the organization discontinued its operations or disposed of	more th	nan 25% of its	net a	assets
	3 1	Number of voting members of the governing body (Part VI, line 1a)			3	5
Š	4 1	Number of independent voting members of the governing body (Part VI, line 1b)			4	4
Ē	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a) .			5	4
ACTIVITIES &	6	Total number of volunteers (estimate if necessary)			6	5
•		Total unrelated business revenue from Part VIII, column (C), line 12			7a	0
	Ь	Net unrelated business taxable income from Form 990-T, line 34		<u> </u>	7t	
		Contributions and amounts (Boutstand L. 11)		Prior Year		Current Year
ā	8	Contributions and grants (Part VIII, line 1h)		141,5	_	89,492
Revenue	9 10	Program service revenue (Part VIII, line 2g)		523,2	107	564,806 332
ž	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			/	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		665,1	83	654,630
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		003,1		0 0 0
	14	Benefits paid to or for members (Part IX, column (A), line 4)			\dashv	0
\$?	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		165,7	743	179,321
ense	16a	Professional fundraising fees (Part IX, column (A), line 11e)				0
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶0				
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		350,2	248	412,656
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		515,9	91	591,977
	19	Revenue less expenses Subtract line 18 from line 12	149,1	-	62,653	
Net Assets or Fund Balances			Begi	nning of Currei Year		End of Year
A.S.	20	Total assets (Part X, line 16)		782,2	-	847,265
9 B	21	Total liabilities (Part X, line 26)			172	2,520
	22	Net assets or fund balances Subtract line 21 from line 20		782,0	91	844,745
Pa	rt II	Signature Block				

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepai preparer has any knowledge

Sign Here Signature of officer B ALAN WALLACE President Type or print name and title

Paid Preparer **Use Only** Print/Type preparer's name CAROLA NICHOLSON Preparer's signature CAROLA NICHOLSON

Santa Barbara, CA 93101

Firm's address 🟲 111 E De La Guerra St

May the IRS discuss this return with the preparer shown above? (see instruction

Form	1990 (2014)				Page 2
Par	Statement of F Check if Schedule			nis Part III	
1	Briefly describe the organ	nızatıon's mıssıon			
CON	ITEMPLATIVE RESEARCH	AND EDUCATIO	N		
2		D-EZ?		the year which were not listed on	
3	Did the organization ceas services?	e conducting, or m	ake sıgnıfıcant changes ın h	now it conducts, any program	
4	expenses Section 501(c	's program service)(3) and 501(c)(4)	accomplishments for each	of its three largest program servi to report the amount of grants and ed	
4a	•)(Expenses \$ Y, CROSS CULTURAL R	563,514 including grants		\$ 564,806)
4b	(Code) (Expenses \$	ıncludıng grants	of \$) (Revenue \$)
4 c	(Code) (Expenses \$	ıncludıng grants	of \$) (Revenue \$)
4d	Other program services				
_	(Expenses \$		ding grants of \$) (Revenue \$)
4e	Total program service ex	rpenses P -	563,514		Form 990 (2014

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule $A^{\bullet \bullet}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{\circ}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II"	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than $$15,000$ of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^7$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
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?	20b		

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

a chert the number reported in Box 3 of Form 1.09 & Enter 1.0 in float applicable 1a 3 5 5 5 5 5 5 5 5 5		Check if Schedule O contains a response or note to any line in this Part V			
be Biller the number of Forms W-2G included in line 1 a. Enter-0- if line applicable 1 b 0 0 Dot the organization condity with backs ow without 10 includes in properties to vendors and reportable gaming (cambing) without 10 includes a properties of Form W-2, Transmittation Wage and Tax-Statements, filed for the calendar year ending with or within the year overall 2a 4 2 2 2 2 2 2 2 2 2				Yes	No
Did the arganization comply with backing methoding rules for recordable payments to vendors and reportable gaining dismining warnings to prea without a gaining dismining warnings to prea without a gaining dismining warnings to prea without a first Statements, files for the caledary year ending with or within the very covered by the return. In a Statements, files for the caledary year ending with or within the very covered by the return. In a Statements, files for the caledary year ending with or within the very covered by the return of lines it and 2 as greater than 250, you may be required to e-file (see instructions). If it is called a file of the called year and year of the called the called year of the called year. 3a In the organization have unrelated business gross income of \$1,000 or more during the year? 3b If it'res, has it filed a form 995-T for this year? if 'Not' 20 lines 3b, provide an epilention in Schedule 0. 3b A tany time during the calledar year, did the organization have an interest in, or a signature or other authority over, a financial account in a former occurred, year, and a benefit account, security? 4a If 'Yes, and the organization and the system occurred year of the property of the prohibited tax shelter transaction at any time during the tax year? 5b If 'Yes, that the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than		· · · · · · · · · · · · · · · · · · ·	4		
agaming (gambling) winnings to prize winners? a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, file of the calendar year ending with or within the year covered by this return. b If a least one is reported on Imp 2, a, did the organization file all required federal employment tax returns? Note: If the sum of files I s and 2 a is, greater than 250, you may be required to e-file (see instructions) b If the organization have unrelated husiness gross income of \$1,000 or more during the year? 3 b Out the organization in a foreign country 1 ft "Yes", that it file is Form 990-T for this year? If "We to fine 28, provide an explanation in Schedule D. 3 b A stary time during the calendar year, and the organization have an interest in, or a signature or other authority as account; as country in the calendar year, and the organization have an interest in, or a signature or other authority as accounts (in the provision of the foreign country 1 ft "Yes", and the name of the foreign country 1 ft "Yes", and the name of the foreign country 1 ft "Yes", and the name of the foreign country 1 ft "Yes", the state organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 b D D did any taxable party notify the organization file Form 8866-T? 6 c If "Yes", to line 5 or 5 b, did the organization file Form 8866-T? 6 c If "Yes", to line 5 or 5 b, did the organization file Form 8866-T? 6 d D D oses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions under section 170(c). 6 d D If If the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have called the very solicitation an express statement that such contributions or grifts were not tax deductible? 6 d D If the organization section that the very solicitation an			4		
Tax Statements, filed for the calendar year ending with or within the year covered 2a 4 by the return of the provided on time 2a, did the organization file all required federal employment tax returns? Note, If the sum of fines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 1a Did the organization have unrelated business grass income of \$1,000 or more during the year? 1b If Yea, 'has it filed a Form 990-T for this year? If 'No' to fine 2b, provide an explanation in Schadule 0. 1a At any time during the calendar year, did the organization have an interest in, or a significant or schedule 0. 1b At any time during the calendar year, did the organization have an interest in, or a significant or schedule 0. 1c Yea,' and the the any of the freign country Section 1907. 1b If 'Yea,' and the most of the freign country Section 1907. 1c If 'Yea,' and the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 1c If 'Yea,' to line 5 a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 1c If 'Yea,' to line 5 a or 5b, did the organization file form 8885-T? 1c If 'Yea,' to line 5 a or 5b, did the organization file form 8885-T? 1c If 'Yea,' to line organization and year of tax deductible as chantable contributions or gifts were not tax deductible? 1c Yea,' did the organization endue with every solicitation an express statement that such contributions or gifts were not tax deductible? 1c Yea,' did the organization mile with the properties of the year		gaming (gambling) winnings to prize winners?	1 c		No
Note, If the sum of lines 1a and 2 are greater than 250, you may be required to e-file (see instructions) a If a Prives, he at filed a form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0. b If "Yes," he at filed a form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0. b If "Yes," he at filed a form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0. b If "Yes," he lift he calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in 6 froring in country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). b Uf any taxable party notify the organization file Form 8886-T? b Did any taxable party notify the organization file Form 8886-T? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? b Did any taxable party notify the organization file Form 8886-T? c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts organization every a power in excess of 375 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization solity the donor of the value of the goods or services provided. C Did the organization solity and the organization of the value of the goods or services provided. To Did the organization solity and the organization of the value of the goods or services provided. To Did the organization solity and the organization of the value of the goods or services provided. To Did the organization solity and the organization file a form 8282? If "Yes," did the organization of the value of the goods or services provided. To Did the organization of the value of the goods or services provided. To Did the organization of the value of the goods or services because of the good of the g	2a	Tax Statements, filed for the calendar year ending with or within the year covered			
b If "Yes," has it filed a Form 990 -T for this year? If "Wor one 3b, provide an explanation in Schedule O. At any time during the calendar year, did the organization have an interest, nor a signature or other authority over, a financial account in foreign country (such as a bank account, sectivities account, or other financial accounts of the program of the prog	b		2b	Yes	
to At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a hinancial account in a foreign country (such as a bank account, securities account, or other financial accounts over, a hinancial account in a foreign country (such as a bank account, securities account, or other financial accounts). If Y'es, 'enter the name of the foreign country ▶ See instructions for filing requirements for FiniCEIF Form 114, Report of Foreign Bank and Financial Accounts (FBAR) By a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a	Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
over, e financial account in a foreign country (such as a bank account, securities account, or other financial account). b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR). b If "Yes," to lime 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5a	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		No
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) (FBAR) ia Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a	la	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c ia 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organization sthat may receive deductible contributions under section 170(c). a 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 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? f Did the organization quring the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization quring the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization machination of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12. b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from me	b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? sia 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 chantable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? b If "Yes," indicate the number of Forms 8282 filed during the year. c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year. d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7th	ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 3b 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? 5c If "Yes," did the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8 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? 8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? 9 Lif "Yes," indicate the number of Forms 8282 filed during the year. 10 Lift organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 17 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 18 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 19 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 10 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 11 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 12 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 13 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 14 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 15 Lift organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 17 Lift organization in the payor and the payor and the payor and the payor and the payor			5h		No
as 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Organizations that may receive deductible contributions under section 170(c). If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," indicate the number of Forms \$282 field during the year. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," indicate the number of Forms \$282 field during the year. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form \$899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Did the sponsoring organizations make any taxable distributions under section 4966? Did the sponsoring organizations. Enter Gross income from members or shareholders Gross income from members or shareholders Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(7) organizations. Enter Gross income from members or shareholders Gross income from their sources (Do not net amounts due or paid to other sources against amounts due or received from t					
organization solicit any contributions that were not tax deductible as chantable contributions? b If*Yes," did the organization include with every solicitation an express statement that such contributions or gifts b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a 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? b If*Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$232? d If*Yes," indicate the number of Forms \$282 filed during the year 7d 0 e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 7d	-	,	5c		
were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Doth the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? Diff "Yes," did the organization notify the donor of the value of the goods or services provided? Diff he organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? Diff "Yes," indicate the number of Forms 8282 filed during the year		organization solicit any contributions that were not tax deductible as charitable contributions?			No
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? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To lift the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To lift the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? To Did the sponsoring organization make any taxable distributions under section 4966? Did do be sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter In Intation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter In Intation fees and capital contributions included on Part VIII, line 12 Section 501(c)(12) organizations. Enter In It is section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(2) qualified nonprofit health insurance issues. Is the organization incensed to issue qualified health plans in more than one state? Note. See the instructions for addition		were not tax deductible?			
services provided to the payor?			_ _		N.
by If "Yes," did the organization notify the donor of the value of the goods or services provided?	a		/a		No
file Form \$282? If "Yes," indicate the number of Forms \$282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? But the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 501(c)(12) organizations. Enter In Yes," enter the amount of tax-exempt interest received or accrued during the year? 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 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. Enter the amount of reserves on hand)		7b		
Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? The organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? The organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Did the sponsoring organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders Gross income from members or received from them 1. Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 11a 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 0 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 Enter the amount of reserves on hand	:				N
contract?	d	If "Yes," indicate the number of Forms 8282 filed during the year	1		
Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f	•		7e		N
If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Build the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Did the sponsoring organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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 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. 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. 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.	-				N
required?					
Form 1098-C? 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? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Did the sponsoring organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Dif "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issues. 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 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 Enter the amount of reserves on hand Enter the amount of reserves on hand		required?			N
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		Form 1098-C?	7h	l	N
Did the sponsoring organization make any taxable distributions under section 4966?	}	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time	Q		N
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	a				N
Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders					No
a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter a Gross income from members or shareholders					
Section 501(c)(12) organizations. Enter Gross income from members or shareholders	a	1 1			
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)		Section 501(c)(12) organizations. Enter			
against amounts due or received from them)	a	Gross income from members or shareholders			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N
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 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 Enter the amount of reserves on hand		If "Yes," enter the amount of tax-exempt interest received or accrued during the			
Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		Section 501(c)(29) qualified nonprofit health insurance issuers.			
In which the organization is licensed to issue qualified health plans	а		13a		N
	b	· · · · · · · · · · · · · · · · · · ·			
a Did the organization receive any payments for indoor tanning services during the tax year? 14a N	C	Enter the amount of reserves on hand			
	a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

56	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	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		No
3		3		No
4		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		Νo
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		Νo
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		Νo
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	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	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, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10a 10b 11a 12a 12b	Yes	No No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c	Yes	No No No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No No No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No No
10a b 11a b 12a b c 13 14 15 a b	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, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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 Other officers or key employees of the organization 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?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 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. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
 - ►SANGAY WANGMO
 - 928 ROBLE LANE
 - SANTA BARBARA, CA 93105 (805) 455-6100

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot recto	not box h ar or/ti	offic rustee	ss er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) B ALAN WALLACE President	40 00	х		х				119,758	0	0
(2) PAUL EKMAN PHD Director	1 00 0 00	х						0	0	0
(3) JEROME ENGEL JR MD Director	1 00 0 00	х						0	0	0
(4) JORGE LARREA ESPINOSA Director	1 00 0 00	х						0	0	0
(5) AGUSTIN BARRIOS GOMEZ Director	1 00 0 00	х						0	0	0

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage	(C) Position (do not check more than one box, unless						(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below dotted line)	perso and a	n ıs l	both ctor	an o	officer stee)		compensation from the organization (W- 2/1099-MISC)	compensation from related organizations (W- 2/1099-MISC)	amount of other compensation from the
		Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former			organization and related organizations

1b	Sub-Total	۲		
c	Total from continuation sheets to Part VII, Section A	٠		
d	Total (add lines 1b and 1c)	٠	119,758	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1-1

			Yes	No				
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee							
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such							
	ındıvıdual	4		Νo				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for							
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		No				

Section	R In	denei	ndent	Contra	ctors
Section	D. 111	uebei	IUCIII.	CUILLIA	CLUIS

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶0

Part V	4++4	Statement of Revenue Check if Schedule O contains a response	anco or noto to any lu	no in this Bart VIII			_
			onse of note to any m	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>s</u> 2	1a	Federated campaigns 1	a				
ant	b	Membership dues 1	b				
وَ ق	c	Fundraising events 1	с				
iffs, ar A	d	Related organizations 10	d				
ons, Giffs, Grants Similar Amounts	e	Government grants (contributions)	e				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	f 89,492				
tributic Other	g	Noncash contributions included in lines 1a-1f \$					į į
Cont	h	Total. Add lines 1a-1f		89,492			
e			Business Code				
۲en	2a	RETREATS & SEMINARS	611600	532,049	532,049		
8	b	SALES- MEDIA	451211	32,757			32,757
و م	C						
ď	d						
Program Serwce Revenue	e	A II ship so a					
Ď	f	All other program service revenue					
	g	Total. Add lines 2a-2f		564,806			
	3	Investment income (including divide and other similar amounts)		332	332		
	4	Income from investment of tax-exempt bond		0			
	5	Royalties	🕨	0			
		(ı) Real	(II) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)		0			
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of					
		assets other than inventory					
	b	Less cost or other basis and					
		sales expenses					
	c d	Sain or (loss) Net gain or (loss)		0			
ů.		Gross income from fundraising events (not including		· ·			
Other Revenue		\$of contributions reported on line 1c)					
άČ		See Part IV, line 18	,				
e E	ь	Less direct expenses I	,				
5	c	Net income or (loss) from fundraising	events 🛌	0			
	9a	Gross income from gaming activities See Part IV, line 19					
	ь						
		Net income or (loss) from gaming act		0			
	10a	Gross sales of inventory, less returns and allowances .					
	 	Less cost of goods sold b					
	b c	Less cost of goods sold b Net income or (loss) from sales of inv	Lventory ⊾	0			
	<u> </u>	Miscellaneous Revenue	Business Code				
	11a						
	ь						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d	🕨	0			
	12	Total revenue. See Instructions .		654,630	E22 201		32,757
	j			054,630	532,381		32,/5/

Part IX Statement of Functional Expenses

Section 501(c)(3) and	501(c)(4) organizations	s must complete all columns	All other organizations i	must complete column (A)

	Check if Schedule O contains a response or note to any line in this			olete column (A)	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0		,	
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	119,758	107,111	12,647	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	46,090	41,481	4,609	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	13,473	12,126	1,347	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,450	1,305	145	
12	Advertising and promotion	0			
13	Office expenses	7,049	6,344	705	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	16,485	8,243	8,242	
17	Travel	12,260	12,260		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	3,977	3,579	398	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	RETREAT EXPENSES	323,560	323,560		
b	BOOKS & PUBLICATIONS	17,210	17,210		
C	CREDIT CARD DISCOUNTS	16,411	16,411		
d	CONTRACT LABOR	7,000	7,000		
e	All other expenses	7,254	6,884	370	
25	Total functional expenses. Add lines 1 through 24e	591,977	563,514	28,463	0
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)				

Form 990 (2014)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this			(4)		(D)
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			269,874	1	417,294
	2	Savings and temporary cash investments			332,131	2	332,463
	3	Pledges and grants receivable, net				3	0
	4	Accounts receivable, net				4	0
	5	Loans and other receivables from current and former officers, direct employees, and highest compensated employees. Complete Part I Schedule L	tors, t I of				
ts	6	Loans and other receivables from other disqualified persons (as de $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and containd sponsoring organizations of section $501(c)(9)$ voluntary employing organizations (see instructions) Complete Part II of Schedule L	rıbutır	ng employers		5	0
Assets	,	Notes and loans receivable, net				7	0
4	7 8	Inventories for sale or use				8	0
	9	Prepaid expenses and deferred charges			177,899	9	95,149
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	 10a	6,849	·	9	35,145
	b	Less accumulated depreciation	10b	4,490	2,359	10c	2,359
	11	Investments—publicly traded securities			_,555	11	0
	12	Investments—other securities See Part IV, line 11		•		12	0
	13	Investments—program-related See Part IV, line 11				13	0
	14	Intangible assets				14	0
	15	Other assets See Part IV, line 11				15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)			782,263	16	847,265
	17	Accounts payable and accrued expenses			102,200	17	2,118
	18	Grants payable				18	2,110
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedul				21	
lities	22	Loans and other payables to current and former officers, directors, key employees, highest compensated employees, and disqualified				21	-
Liabiliti		persons Complete Part II of Schedule L		22			
ä	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part X	third p	arties,			
		D		-	172	25	402
	26	Total liabilities. Add lines 17 through 25			172	26	2,520
√n dh		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ a	nd cor	nplete			
ž	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets			782,091	27	844,745
<u>छ</u>	28	Temporarily restricted net assets	• •	•	102,001	28	011,110
<u> </u>	29	Permanently restricted net assets	•	•		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here	• <u> </u>	and			<u> </u>
	30	complete lines 30 through 34. Capital stock or trust principal, or current funds				30	
ets	31	Paid-in or capital surplus, or land, building or equipment fund.				31	
Assets	32	Retained earnings, endowment, accumulated income, or other fund				32	
	33	Total net assets or fund balances			782,091	33	844,745
Net	34	Total liabilities and net assets/fund balances	•	•	782,263		847.265

	Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			. Г
			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
Ba	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
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	3b		

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OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		ne organization					Employer identification	ation number		
		ARA INSTITUTE FOR IESS STUDIES					71-0918442			
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	tions must co	mplete this p		ons.		
		zation is not a private f					•			
1	Ē	A church, convention								
2		A school described in				•				
3	Ţ.	A hospital or a cooper				tion 170(b)(1)	(A)(iii).			
4	Ė	A medical research or	•	=				i). Enter the		
-	•	hospital's name, city,	and state							
5	\vdash	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by a	ı governmental unıt d	escribed in		
		section 170(b)(1)(A)	(iv). (Complet	e Part II)						
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in se	ection 170(b)(1)(A)(v).			
7	Γ	An organization that n	ormally receiv	es a substantial part	of its support fr	om a governme	ntal unit or from the g	jeneral public		
	_	described in section 1								
8	<u> </u>	A community trust de								
9	<u> </u>	An organization that n								
		receipts from activitie		•	=	•				
		its support from gross						n businesses		
	_	acquired by the organ				-	=			
10	<u> </u>	An organization organ	•	•	•	•				
11	ı	An organization organ								
		one or more publicly s the box in lines 11a th								
а	Г		-			-		-		
	·	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting								
_	_	organization You mus								
b	ı	Type II. A supporting	_	•		• •	•	•		
		management of the su must complete Part I'			same persons c	nat control of it	ialiage the supported	organization(s) You		
c	\sqcap	Type III functionally	•		n operated in c	onnection with,	and functionally inte	grated with, its		
	_	supported organizatio								
d	ı	Type III non-function								
		not functionally integr (see instructions) Yo					ement and an attentiv	eness requirement		
e	Г	Check this box if the					a Type I, Type II, T	ype III functionally		
		ıntegrated, or Type II								
f		Enter the number of s								
g		Provide the following i	nformation abo	out the supported orga	ınızatıon(s)					
			1	Т				Г		
		ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org		(v) A mount of	(vi) A mount of		
		organization		organization (described on lines	listed in your docume		monetary support (see instructions)	other support (see instructions)		
				1- 9 above or IRC	l accame		(see moductions)	instructions,		
				section (see						
				ınstructions))						
					Yes	No				
Total			I			l l		I		

instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) **Section A. Public Support** Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 **(d)** 2013 (e) 2014 (f) Total in) 🕨 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support Add lines 7 through Gross receipts from related activities, etc (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage for 2013 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

(Complete only if you checked the box on line 9 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.)

	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2	014	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	90,307	68,567	102,129	141,576		89,492	492,071	
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	490,467	651,644	584,304	523,200		564,806	2,814,421	
3	Gross receipts from activities that are not an unrelated trade or business under section 513							0	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0	
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0	
6	Total. Add lines 1 through 5	580,774	720,211	686,433	664,776		654,298	3,306,492	
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons							0	
b	A mounts 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							0	
С	Add lines 7a and 7b								
8	Public support (Subtract line 7c from line 6)							3,306,492	
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total	
9	A mounts from line 6	580,774	720,211	686,433	664,776		654,298	3,306,492	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,281	1,248	631	407		332	3,899	
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							0	
c	Add lines 10a and 10b	1,281	1,248	631	407		332	3,899	
11 12	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							0	
	gain or loss from the sale of capital assets (Explain in Part VI)							0	
13	Total support. (Add lines 9, 10c, 11, and 12)	582,055	721,459	687,064	665,183		654,630	3,310,391	
14	First five years. If the Form 990 is check this box and stop here			thırd, fourth, or fi	fth tax year as a	section	501(c)(3	3) organization, ► □	
	ction C. Computation of Pub			(0)			T		
15	Public support percentage for 2014			13, column (f))		15			
16	Public support percentage from 201		<u> </u>			16		99 850 %	
	ction D. Computation of Inve	estment Incor	ne Percentag						
		2014 (line 10c. co	lumn (f) divided b	v line 12 column	n (f))			0 4 3 0 01	
17	Investment income percentage for 2				n (f))	17		0 120 %	
17 18		n 2013 Schedule A	, Part III, line 1	7		18	/30% and	0 150 %	

b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Se	ection A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)^2$ If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section $501(c)(4)$, (5) , or (6) ? If "Yes," answer (b) and (c) below.	За		
t	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	: Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ 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.	4 c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
Ŀ	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	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 II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
t	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
Ŀ	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
L1	Has the organization accepted a gift or contribution from any of the following persons?			
	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?	112		
ŀ	• A family member of a person described in (a) above?	11a 11b		
	A 135% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	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 tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
5	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	inetri	ıct ions)	
	The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government e instructions.)			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	-			
	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		
	h Did the organization evergise a substantial degree of direction over the policies, programs and activities of each		1	l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 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 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year								
1 Amounts paid to supported organizations to accom	plish exempt purposes								
2 A mounts paid to perform activity that directly furthexcess of income from activity	2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in								
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons							
4 Amounts paid to acquire exempt-use assets									
5 Qualified set-aside amounts (prior IRS approval rec	nured)								
6 Other distributions (describe in Part VI) See instru	JCTIONS								
7 Total annual distributions. Add lines 1 through 6									
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide							
9 Distributable amount for 2014 from Section C, line	6								
10 Line 8 amount divided by Line 9 amount									
		(::)	(:::)						
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014						
1 Distributable amount for 2014 from Section C, line 6									
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)									
3 Excess distributions carryover, if any, to 2014									
a From 2009									
b From 2010									
c From 2011									
d From 2012									
e From 2013									
f Total of lines 3a through e									
g Applied to underdistributions of prior years									
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)									
j Remainder Subtract lines 3g, 3h, and 3i from 3f									
4 Distributions for 2014 from Section D, line 7 \$									
A pplied to underdistributions of prior years									
b Applied to 2014 distributable amount									
c Remainder Subtract lines 4a and 4b from 4									
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)									
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)									
7 Excess distributions carryover to 2015. Add lines 31 and 4c									
8 Breakdown of line 7									
a From 2010									
b From 2011									
c From 2012									
d From 2013									

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493216011465

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

temal	l Revenue Service	Information about Schedule D (Form	1990) and its instructions is at <u>www.irs</u>	.gov/forn	<u>1990</u> . Ins	pect	ion
	me of the organ			Employe	r identification n	umbe	r
	ITA BARBARA INSTIT NSCIOUSNESS STUD			71-091	8442		
Pa		izations Maintaining Donor Adv		inds or A	Accounts. Con	nplet	e ıf the
	organiz	zation answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds	(6)	Funda and athers		nto
L	Total number a	t end of year	(a) Donor advised funds	(0)	Funds and other a	accou	IILS
2		ue of contributions to (during year)					
- 3		ue of grants from (during year)					
1		ue at end of year					
5	Did the organiz	zation inform all donors and donor advisc prganization's property, subject to the or		or advised		Yes	┌ No
5	used only for c conferring imp	zation inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?	it of the donor or donor advisor, or for an	y other pu	<u> </u>		┌ No
Pa		rvation Easements. Complete if	-	Form 99	90, Part IV, line	7.	
L 2	Preservation Preservation Complete lines	conservation easements held by the organ of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a he last day of the tax year	or education) Preservation of an Preservation of a c	ertified his	storic structure	area	
	easement on c	ne last day of the tax year	Γ		Held at the End o	f the	Year
а	Total number o	of conservation easements		2a			
b	Total acreage	restricted by conservation easements		2b			
c	Number of con	servation easements on a certified histo	ric structure included in (a)	2c			
d		servation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d			
3	Number of con	servation easements modified, transferr	ed, released, extinguished, or terminated	d by the or	ganızatıon durıng	I	
	the tax year 🛌						
ŀ	Number of stat	tes where property subject to conservati	on easement is located ►	_			
5		nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, hand	ling of viol	ations, and	Yes	┌ No
5	Staff and volur ►	nteer hours devoted to monitoring, inspec	cting, and enforcing conservation easem	ents durın	g the year		
7	A mount of exp ► \$	enses incurred in monitoring, inspecting	, and enforcing conservation easements	during the	e year		
3	Does each cor	nservation easement reported on line 2(c 70(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	tion 170(h)(4)(B)(ı)	Yes	┌ No
•	balance sheet,	escribe how the organization reports cor , and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financial				
ar		izations Maintaining Collection ete if the organization answered "Y		or Other	Similar Asse	ts.	
La	If the organiza works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar assede, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reven ts held for public exhibition, education, o	r research	n in furtherance o		
b	works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to theso	ts held for public exhibition, education, c				С
	(i) Revenue in	cluded in Form 990, Part VIII, line 1			► \$		
	(ii) Assets inc	luded in Form 990, Part X			► \$		
2	If the organiza	tion received or held works of art, histori ints required to be reported under SFAS		r financial	'		
а	Revenue inclu	ded in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

201	Organizations Maintaining Co	liections of Art	, HIS	TOF	cai	reasur	es, or O	tnei	r Similar Asse	t s (co	<u>ntinuea)</u>
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other recor	ds, cł	heck —			_		significant use of	its	
а	Public exhibition		d	ļ	Loa	n or exch	ange progra	ams			
b	Scholarly research		e	Γ	Oth	er					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	llections and expla	ın hov	w the	y furt	her the or	ganızatıon'	's ex	empt purpose ın		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than t	o be maintained as	part	of the	orga	nızatıon's	collection	?		Yes	┌ No
Par	t IV Escrow and Custodial Arrange Part IV, line 9, or reported an am						answered	1 "Y	es" to Form 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other asse	ets r		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing	able		_				
									Amou	ınt	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, lin	e 21,	for e	scrow	orcusto	dıal accoun	nt IIa	bility?	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expl	anatı	on ha	s been pr	ovided in P	art)	KIII		Г
Pa	rt V Endowment Funds. Complete										
	Barrago a starago la la casa	(a)Current year	(b) Prior	year	b (c) Tw	o years back	(d) ¹	Three years back (e)Four ye	ears back
1a	Beginning of year balance					+					
b	Contributions					+					
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balan	ce (lır	ne 1g	, colu	mn (a)) h	eld as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ►										
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	ıld equal 100%									
3a	Are there endowment funds not in the posses	ssion of the organiz	atıon	that	are he	eld and ad	dministered	for	the		
	organization by									Yes	No
	(i) unrelated organizations				•			•	3a(i)		
b	(ii) related organizations								3a(ii)	<u> </u>	
4	Describe in Part XIII the intended uses of th	•						•	30		
	rt VI Land, Buildings, and Equipme					on answ	ered 'Yes'	to	Form 990, Part	IV. lır	ne
	11a. See Form 990, Part X, line 1										
	Description of property					t or other vestment)	(b)Cost or obasis (oth		(c) Accumulated depreciation	(d) B	ook value
1a	Land										
b	Buildings										
c	Leasehold improvements										
	Equipment						6	,849	4,490		2,359
	Other			Jmn (B). Iin	e 10(c))	<u> </u>		<u>l</u>	+	2,359
		-, 2	., 55,6	(-,, '''	(-)./	<u> </u>	-	Schedule D (I	orm 9	

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(5)2 5 5 1 1 1 1 1 1	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
	(2,200.14.40	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. Complete if the organization		
(a) Desc	cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the org	janization answered res t	o Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
SALES TAX PAYABLE	402	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 402	
		he organization's financial statements that reports the

Pari	the organ	iation of Re						ts Wit	th Re	venue	per R	eturn Complete	e if
1	Total revenue, ga										1		
2	A mounts include	d on line 1 but	not on Forr	n 990, Pai	rt VIII, line	12							
а	Net unrealized g	aıns (losses) o	n ınvestmeı	nts			2a						
b	Donated service	s and use of fa	cilities .				2b						
c	Recoveries of pri	or year grants					2c						
d	Other (Describe	ın Part XIII)					2d						
e	Add lines 2a thro	ough 2d .									2e		
3	Subtract line 2e	from line 1 .									3		
4	A mounts include	d on Form 990	, Part VIII,	, lıne 12, b	out not on li	ne 1							
а	Investment expe	enses not inclu	ded on Forn	n 990, Par	rt VIII, line	7b .	4a						
b	Other (Describe	ın Part XIII)					4b						
C	Add lines 4a and	4b									4c		
5	Total revenue A										5		
Part								nts Wi	ith Ex	cpense	s per	Return. Comp	lete
1	Total expenses a	anization ans									1		
2	Amounts include	•					•	• •	•	•	<u> </u>		
a	Donated services						2a	l					
b	Prior year adjust						2b						
c	Other losses .						2c						
d	Other (Describe						2d						
e	Add lines 2a thro	•						<u> </u>					
3	Subtract line 2e 1	-									3		
4	A mounts include												
а	Investment expe			•			4a						
b	Other (Describe						4b						
c	Add lines 4a and	-						'			4c		
5	Total expenses	Add lines 3 an	d 4c. (This r	nust equal	l Form 990	, Part I, line	18)				5		
Part	XIII Supple				·	· · · · · · · · · · · · · · · · · · ·						1	
Prov Part	ide the description V, line 4, Part X, li	s required for F	Part II, lines									de any additional	
	Return Refere	nce			Expl	anation							

Jenedale 2 (1 31111 33 3) 23 13		1 age 5			
Part XIII Supplemental Information	on (continued)				
Return Reference	Explanation				
l					
-					

Schedule D (Form 990) 2014

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DLN: 93493216011465

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization SANTA BARBARA INSTITUTE FOR CONSCIOUSNESS STUDIES Employer identification number

71-0918442

990 Schedule O, Supplemental Information

Return Reference	Explanation				
Form 990, Part VI, Line 11b Form 990 Review Process	REVIEWED BY BOOKKEEPER				
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	DISCUSSION BY THE BOARD OF DIRECTORS				
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	DISCUSSION BY THE BOARD OF DIRECTORS				
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	UPON REQUEST				
Other Changes In Net Assets Or Fund Balances - Other Increases	ROUNDING = \$1				

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DLN: 93493216011465

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

		Information al	oout Form 4562 and its sep	arate instruction	ıs is :	at <u>wwı</u>	v.irs.g	ov /form45	<u>62.</u>	Sequence No 179
	ne(s) shown on retu			or activity to which	thıs f	orm rel	ates		Id	entifying number
	ITA BARBARA INS NSCIOUSNESS ST		Form 990	1/990-PF					7:	L-0918442
			Certain Property Un	der Section	179	9				
			isted property, comple		ore y	you c	omple	te Part I.		Г
					•		• •		1	
2			laced in service (see inst						2	
3			rty before reduction in lin	•	truc	tions)	•		3	
4			3 from line 2 If zero or l						4	
5		· ·	ct line 4 from line 1 If zei	-				=	_	
	separately, see i	nstructions · ·			•	• •	• •	· · · ·	5	
				(b) Cost (bu	usine	ess us	e T			
6	((a) Description of p	roperty	on				(c) Elected	cost	
										_
										_
		Enter the amount fr			•					I
8			operty Add amounts in c						8	
9			er of line 5 or line 8 • •						9	
10			om line 13 of your 2013 F						10	
11		limitation Enter th	e smaller of business inc	ome (not less th	nan z	ero) o	rline 5	s (see		
	instructions)				•				11	
	•		d lines 9 and 10, but do n		_				12	
			015 Add lines 9 and 10,			13				
			below for listed proper Allowance and Othe							t) /C t t)
			ualified property (other th						ргорег 	ty) (See instructions)
	the tax year (see	·		an nated proper				· · · ·	14	
15	, ,	to section 168(f)(1							15	
)						16	
			Do not include listed i						1 20	
				ction A						
17	MACRS deductio	ns for assets place	d in service in tax years l	eginning before	201	L4 ·			17	
18	If you are electin	g to group any asse	ets placed in service durir	ng the tax year i	into d	one or	more (general		
	asset accounts,	check here						▶厂		
	Section B—A	ssets Placed in	Service During 20:	14 Tax Year	Usi	ng tl	ne Ge	neral De	preci	ation System
		(b) Month and	(c) Basis for depreciation							
(a) Classification o	f year placed in	(business/investment	(d) Recovery	(e)	Conv	ention	(f) Meth	nod	(g)Depreciation
	property	service	use	period	'					deduction
10-	2		only—see instructions)		-					
	3-year property 5-year property									
	7-year property									
	10-year property									
	15-year property									
f	20-year property			-						
g	25-year property			25 yrs				S/L		
	Residential rental			27 5 yrs	-	MM		S/L		
	property			27 5 yrs	-	MM		S/L		
	Nonresidential real property			39 yrs		M M 		S/L S/L		
	· · · · · · · · · · · · · · · · · · ·	ction C—Assets Pla	Led in Service During 201	l 4 Tay Year Ilsin	n the		rnative		on Svs	tem
20a	Class life		Solvice During 201	Oally	<u>,ç</u>			S/L	- 43	
	12-year			12 yrs				S/L		
С	40-year			40 yrs		ММ		S/L		
		nary (see instruc								
21	Listed property En	iter amount from line	e 28 · · · · · ·		•				21	
22		•	14 through 17, lines 19							
			your return Partnerships	•		-see ı	nstruc	tions • •	22	
		above and placed in attributable to sec	service during the curren	t year, enter the	е	23				
	Jordion of the Dasis	accinacionie to sec	1011 203A CUSES		•					<u> </u>

Part V
Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

24a Do you have evider	nce to support t	the business/inv	estment u	ise claime	d? ┌ Ye s	Гпо		24	4b If "Y	es," is f	the ev	idence	written?	Гүе	sГN	0
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	l) r other sıs		vestment Reco		(g) Method/ Convention		(h) Depreciation/ deduction				(i) Elected section 179 cost			
25Special depreciation allo	•		y placed	in service	during the	tax year	and u	used mor	e than							
50% in a qualified busi	`									25						
26 Property used more	e than 50% i I	in a qualified b	usiness	use	T			1	I		1			1		
		%									+			+		
		%														
27 Property used 50%	orless in a		ness us	e	<u> </u>				lo /ı		_					
		%			+				S/L - S/L -		+			-		
		%			1				S/L -					_		
28 Add amounts in co	olumn (h), lın	ies 25 through	27 En	ter here	and on lu	ne 21,	page	1	28							
29 Add amounts in co	olumn (ı), lını	e 26 Enterhe	re and o	n line 7,	page 1								29			
		Sec	tion B	—Infor	mation	on U	se o	of Veh	icles				•			
omplete this section																
f you provided vehicles to	your employee	es, first answer th	e questio		on C to see a)	T		n except		mpletir 			T .	-		£\
30 Total business/investment miles driven during the				Veh	(b) Vehicle 2		(c) Vehicle 3		3 ,	(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6		
year (do not inclu	de commutin	ig miles) .	•			1							1			
31 Total commuting i	miles driven	during the yea	r .													
32 Total other persor																
33 Total miles driven through 32	•															
34 Was the vehicle available for personal use				Yes	No	Yes	No	Yes	N		es/	No	Yes	No	Yes	No
during off-duty hours?				163	140	163	140	163	1	<u> </u>	CS	140	163	140	163	140
35 Was the vehicle used primarily by a more than 5%								-						 		
owner or related p		·														
36 Is another vehicle available for personal use? .																
Section Answer these question 5% owners or related	ns to determ	•	t an exc												not mo	re tha
37 Do you maintain a written policy statement that prohemployees?				nibits all	personal	use of	vehi	cles, in	cluding	comr	nutın	g, by	your	Y	es	No
38 Do you maintain a	written nolic	ry statement t	hat nrob	uhits nei	rennal iie	e of ve	hicle	s avca	nt com	mutin	a hv	vour		-		
employees? See t	he instructio	ns for vehicles	used b	y corpor	ate office							•				
39 Do you treat all us	e of vehicles	s by employee	s as per	rsonal us	se?		•					•		oxdot		
40 Do you provide mo vehicles, and reta				oyees,o	btaın ınfo	rmatio • •	n fro	m your	employ • •	ees a	bout	the us	se of			
41 Do you meet the r	equirements	concerning qu	ialified a	automob	ıle demor	nstratio	n us	e? (See	ınstru	ctions						
Note: If your answ	er to 37, 38,	39, 40, or 41 is	"Yes," (do not coi	mplete Se	ction B	for t	he cover	ed vehi	ıcles.						
Part VI Amo	rtization				-											
(a) Description of c		(b) Date amortization	(c) A mortizable amount		C		ction p		(e) mortization period or ercentage		A morti			(f) Ization for s year		
42 A montination of	.a.e.a.e.b.a.e.b.a.e.	begins	- 2014	+nv ::===	1000 :==	tena ti ci	n a \		I be	.iceiil	uye					
42 A mortization of co	sts that beg	ıns aurıng you	r 2014 T	tax year	(see ins	ructioi	ns)		<u> </u>		ı					
						-+			-							
40.0											_					
43 Amortization of co	_	•		-			•			\vdash	43					
44 Total. Add amoun	ts ın column	(f) See the in:	structio	ns for wh	iere to re	port					44					