Return of Organization Exempt From Income Tax

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

3,723,912

29.570.832

876,234

Beginning of Current Year

168.611

4,212,602

4,195,373

30,527,169

End of Year

DLN: 93493030016458 OMB No 1545-0047

2016

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

▶ Information about Form 990 and its instructions is at www IRS gov/form990 Internal Revenue Service A For the 2016 calendar year, or tax year beginning 04-01-2016 , and ending 03-31-2017 C Name of organization
INSTRUCTIONAL TELECOMMUNICATIONS **B** Check if applicable D Employer identification number ☐ Address change FOUNDATION INC ☐ Name change Doing business as ☐ Initial return VOOÁL USA Final Deturn/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return (303) 532-2852 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code BOULDER, CO 80306 **G** Gross receipts \$ 28,203,698 Name and address of principal officer H(a) Is this a group return for JOHN SCHWARTZ ☐Yes **✓**No subordinates? PO BOX 6060 H(b) Are all subordinates BOULDER, CO 803066060 ☐ Yes ☐No included? Tax-exempt status 501(c)(3) **✓** 501(c) (4) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) Website: ► WWW ITFITV ORG **H(c)** Group exemption number ▶ L Year of formation 1983 M State of legal domicile CO K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Part I Summary 1 Briefly describe the organization's mission or most significant activities THE CORPORATION IS ORGANIZED AND WILL BE OPERATED EXCLUSIVELY FOR "CHARITABLE, SCIENTIFIC AND EDUCATIONAL- AND "SOCIAL WELFARE" PURPOSES WITHIN THE MEANING OF SECTIONS 501(C)(3) AND 501(C)(4), RESPECTIVELY, OF THE INTERNAL REVENUE CODE TO THIS END, THE NONPROFIT SHALL UNDERTAKE ACTIVITIES TO SUPPORT THE PROVISION OF QUALITY AND DIVERSE INSTRUCTIONAL MEDIA CONTÉNT AND CAPABILITIES TO EDUCATORS AND STUDENTS, INCLUDING, BUT NOT LIMITED TO, DATA SERVICES AND INSTRUCTIONAL VIDEO PROVIDED TO ACCREDITED EDUCATIONAL INSTITUTIONS AND GOVERNMENTAL ORGANIZATIONS ENGAGED IN THE FORMAL EDUCATION OF ENROLLED STUDENTS FOSTER OPEN, HONEST AND OUTSPOKEN MEDIA THAT HELP USERS TO Activities & Governance BE A POPULAR DEMOCRATIC CHECK ON BOTH GOVERNMENT POWER AND CONCENTRATED PRIVATE PRIVILEGE EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS, ENGAGE IN ADDI Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) $\,$. 3 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 -1.050 Total unrelated business revenue from Part VIII, column (C), line 12 . 7a 7b Net unrelated business taxable income from Form 990-T, line 34 -1,050 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 9,311 0 Program service revenue (Part VIII, line 2g) . 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 729,275 5,154,921 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3.153.937 3.253.054 3,892,523 8,407,975 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 2,391,001 2,588,500 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 2,228 975 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 ${f b}$ Total fundraising expenses (Part IX, column (D), line 25) ${lack}$ 0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 1,330,683 1,623,127

Signature Block

20 Total assets (Part X, line 16) .

21 Total liabilities (Part X, line 26) .

Under penalties of perjury, I declare that I have examined this return, inclu knowledge and belief, it is true, correct, and complete Declaration of prepa any knowledge

Net assets or fund balances Subtract line 21 from line 20

19 Revenue less expenses Subtract line 18 from line 12 .

Sign Here

Assets or d Balances

Net A Fund

Signature of officer ADAM MILLER COO/SECRETARY Type or print name and title Print/Type preparer's name ROBERT E FABRY CPA Preparer's signature ROBERT E FABRY CPA

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

Paid **Preparer** Use Only Firm's name

BAUERLE AND COMPANY PC Firm's address ► 7887 E BELLEVIEW AVE STE 700 DENVER, CO 801116021

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

Form	990 (2016)					Page 2
Par	t IIII Statement	of Program Service	e Accomplis	hments		
	Check If Sche	dule O contains a resp	onse or note to a	any line in this Part III		🗹
1	Briefly describe the o	organization's mission				
WELF END, AND TO A STUE POW DISS	FARE" PURPOSES WITH THE NONPROFIT SHA CAPABILITIES TO EDU CCREDITED EDUCATION DENTS FOSTER OPEN, ER AND CONCENTRATION	HIN THE MEANING OF: LL UNDERTAKE ACTIVI CATORS AND STUDEN DNAL INSTITUTIONS AI HONEST AND OUTSPO ED PRIVATE PRIVILEGE E, OR CRITICALLY CON	SECTIONS 501(0 TIES TO SUPPO TS, INCLUDING ND GOVERNMEN KEN MEDIA THA E EXPAND THE I	C)(3) AND 501(C)(4), R PRT THE PROVISION OF, BUT NOT LIMITED TO, ITAL ORGANIZATIONS F AT HELP USERS TO BE A DISSEMINATION OF ME	ABLE, SCIENTIFIC AND EDUCATION ESPECTIVELY, OF THE INTERNAL R QUALITY AND DIVERSE INSTRUCT DATA SERVICES AND INSTRUCTION ENGAGED IN THE FORMAL EDUCATION OPPULAR DEMOCRATIC CHECK OF DIA, AND POINTS OF VIEW CARRIE EPTS TO THE MARKETPLACE OF IDE	EVENUE CODE TO THIS IONAL MEDIA CONTENT INAL VIDEO PROVIDED ION OF ENROLLED IN BOTH GOVERNMENT ID BY THEM, THAT OFFER
2	<u>-</u>	, -	ant program ser	vices during the year w	nich were not listed on	
	the prior Form 990 o					🗌 Yes 🗹 No
_		ese new services on Scl				
3	services?	cease conducting, or n		changes in how it condi	icts, any program	☐ Yes 🗹 No
4	Section 501(c)(3) an		ons are required	to report the amount of	largest program services, as meast f grants and allocations to others, t	
4a	(Code) (Expenses \$	47.095	including grants of \$) (Revenue \$)
	See Additional Data				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
4b	(Code) (Expenses \$	3,023,935	including grants of \$	2,588,500) (Revenue \$)
	See Additional Data					
4c	(Code See Additional Data) (Expenses \$		including grants of \$) (Revenue \$)
4d		ces (Describe in Sched	•	.	\/Devenue d	
	(Expenses \$		uding grants of	<u> </u>) (Revenue \$	
4e	Total program serv	/ice expenses ▶	3,071,0	30		

Section 501(c)(3) organizations.

Part IV Checklist of Required Schedules Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2

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

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

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

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

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

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

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

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

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

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

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

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

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

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

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

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

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

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

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🥦

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

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

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

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

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

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

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

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

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

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

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

Nο

No

Nο

Νo

Nο

Νo

Nο

Nο

Nο

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Form **990** (2016)

Page 3

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11a

11b

11c

11d

11e

11f

12a

13

14a

14b

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Yes

Yes

Yes

Yes

3

4

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? 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?

or X as applicable

23

29

Par	Checklist of Required Schedules (continued)			
			Yes	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		
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	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for demostic individuals on Part IV			

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 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes,

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

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

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

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

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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

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

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

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

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

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

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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

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

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 💆

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

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

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

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

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

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

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

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

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

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

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?

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

instructions for applicable filing thresholds, conditions, and exceptions)

22 Yes Yes 23

24a

24b

24c

24d

25a

25b

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28a

28b

28c

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35a

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Yes

Yes

Yes

Yes

Form 990 (2016)

Nο

Nο

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No

Nο

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Nο

Nο

Nο

No

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orm	990 (2016)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 29			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			140
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	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 10b			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

orm 9	990 (2016)			Page 6
Part	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to l	
-	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Sec	tion A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la	4	163	10
	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 1b	3		
	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
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	on 3	Yes	
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
	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
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Code	⊋.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	<u> </u>
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	List the States with which a copy of this Form 990 is required to be filed			
-,	CA			
	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	l		
19	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			
20	policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. BECKY SCHOTT 825 DELAWARE AVENUE SUITE 500 LONGMONT, CO 80501 (303) 532-2852.			
	PULCKT SCHOTT 025 DELAWARE AVENUE SUITE SUU EUNGMUNT, CO 00301 (305) 332-2032		orm 00	n (2016)

Part VII

 \checkmark

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

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

X	Check this box if neither the organization no		ganızat	ion c			ated a	ny c			
1) JOHN SCHWARTZ		Average hours per week (list any hours	than o	ne bo oth a	no ox, u n of or/t	t che unle: ficer rust	ss pers and a ee)	son	Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations	Estimated amount of other compensation from the
3) FINAL SCHWART 27 00 167,062 48,869		below dotted	ndividual trustee or director	Institutional Trustee	Officer	(e) employee	tighest compensated imployee	Former			
27 00	(1) JOHN SCHWARTZ		,		,					157.050	40.000
X	DIRECTOR & P		Х		X				U	167,062	48,869
X	(2) JAMES TRAYNOR DIRECTOR & V		Х		x				338	0	0
STACKET OR	(3) FRANCES VALDEZ DIRECTOR & T		Х		х				337	0	0
3 ADMINISTER	(4) GARLIN GILCHRIST II DIRECTOR		Х						300	0	0
6) PATRICIA DWYER 9 50	(5) ADAM MILLER				х				0	132,467	37,103
X 0 128,095 29,251	·	9 50									
	CFO				X				0	128,095	29,251

Form 990 (2016) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(C)

(D)

(E)

(F)

No

(B)

(A)

Name and Title	Average hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)							Reportable compensation from related organizations (W-	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
1b Sub-Total						•				
c Total from continuation sheets to P	art VII, Sectio	nΑ.				▶				

427,624 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization >

d Total (add lines 1b and 1c) . . Yes No 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 .

115,223 2 3 3 No 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

individual . 4 Yes

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 J for such person . 5

5 Section B. Independent Contractors 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

Name and business address Description of services MGMT SERVICES

(C) Compensation 642,346 181,923

EBS SUPPORT SERVICES, PO BOX 6060 BOULDER, CO 80306 INPARTNERSHIP CONSULTING INC, CONSULTING

6114 LASALLE AVENUE OAKLAND, CA 94611

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 ▶ 2 Form 990 (2016)

Part		tatement of										
	C	heck if Schedu	le O contains a	respo	onse or n	ote to any	(this Part VIII (A) revenue	(B) Related or exempt function		(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
হ হ	1a Fede	erated campaig	L	1a	ı				revenue			512-514
ranton	b Mem	bership dues	Ŀ	1 b	<u> </u>							
₽ 6 B #	c Fund	draising events 	Ŀ	1c	 							
Sifts Iar .	d Rela	ted organization	Ŀ	1d	<u> </u> 							
is, (e dove	ther contributions	Ĺ	1e	<u> </u> 							
tion er S	and s	sımılar amounts n		1f								
Contributions, Gifts, Grants and Other Similar Amounts	""			_								
	h Total	Add lines 1a-	1f	<u></u>	· ·	Puginoss	Cada					
Service Revenue	2a				-	Business	Code					
4					-							
Ce.	b ——			<u> </u>								
χeτν	d			_	-							
E S	е			_	-							
Program	f All oth	ner program se	ervice revenue		L			l			L	
<u>~</u>			f		<u> </u>				1			
		ment income (i amounts) .	including divide	nds, ı •	ınterest,	and other	1	657,979				657,979
	4 Income	e from investm	ent of tax-exe	npt bo	ond proce	eeds 🕨						
	5 Royaltı	es	() D (•		.		4,205,974				4,205,974
	6a Gross	rents	(ı) Real		(11) P	ersonal	┨					
							_					
	b Less	rental expenses										
	c Renta (loss)	l income or					1					
	d Net r	ental income o	or (loss)			•]					
			(ı) Securiti	es	(11)	Other	_					
	7a Gross a from sassets than in	ales of	24,29	92,665								
		cost or basis and expenses	19,79	95,723								
	c Gain o		4,49	96,942]					
	_					>	<u> </u>	4,496,942				4,496,942
Other Revenue	(not 11 contri	ncluding \$ butions reporte	ed on line 1c)	of								
eve		direct expense		a b			-					
<u> </u>			from fundraisi		ents .		J					
)th	9a Gross	income from g	gaming activitie			<u> </u>						
U	See P	art IV, line 19		а								
	b Less	direct expense	es	b			1					
	c Net in	come or (loss)) from gaming a	activit	ies	•						
		sales of inventions and allowand		a								
	b Less	cost of goods	sold	b]					
	C Net in		from sales of	ınvent	1							
	1124700	Miscellaneous ELLANEOUS	Revenue		Busine	900099	<u> </u>	828		828		
	TTAMISC	ELLANEOUS				30003.		020		020		
	ь _{К-1 Е}	BS SUPPORT S	SERVICES			561000		-1,050			-1,050	
	c K-1 P	UBLIC TV FINA	ANCING LLC			519100		-245,707	-2	45,707		
	d All oth	ner revenue .						-706,991	-7	06,991		
	e Total	. Add lines 11a	a-11d		• •	>		-952,920				
	12 Total	revenue. See	Instructions					·		E4 072	. n==	0.000.00
						-		8,407,975	<u>l</u> -9	51,870	-1,050	9,360,895 Form 990 (2016)

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	anizations must comp	elete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX			<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,463,500	2,463,500		
2 Grants and other assistance to domestic individuals See Part IV, line 22	125,000	125,000		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	975		975	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management	642,346	175,086	467,260	
b Legal	230,630		230,630	
c Accounting	33,930		33,930	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	341,567	233,916	107,651	
12 Advertising and promotion				
13 Office expenses	6,994	1,984	5,010	
14 Information technology				
15 Royalties				
16 Occupancy				
4.7 Tunnel	65,114	39,844	25,270	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	00,11	33,011	20,2,0	
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	8,231		8,231	
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)	0,251		0,232	
a ROYALTY SHARING	254,400		254,400	
b DUES AND SUBSCRIPTIONS	30,513	28,300	2,213	
c PROGRAM LICENSES	3,400	3,400		
d BOARD EXPENSES	3,322		3,322	
e All other expenses	2,680		2,680	
25 Total functional expenses. Add lines 1 through 24e	4,212,602	3,071,030	1,141,572	0
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)				

1 Cash-non-interest-bearing	463,701	1	618,724
2 Savings and temporary cash investments	2,194,814	2	2,909,917
3 Pledges and grants receivable, net		3	
4 Accounts receivable, net		4	
Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
6 Loans and other receivables from other disqualified persons (as defined under			

871

871

10a

10b

6

7

8

9

10c

11

12

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16

17

18

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20

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22 23

24

26

27

28

29

30

31

32

33

34

198 25

876.234

28.694.598

28,694,598

29.570.832

22,556,965

713.666

90.038

90.029

72,000

321.345

483,374

30.043.795

30,043,795

30.527.169 Form **990** (2016)

30.527.169

3.637,859

2,337

22,235,449

849.991

3.824.540

29.570.832

119.322

435.369

321.345

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L

Notes and loans receivable, net

Prepaid expenses and deferred charges .

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

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

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

check here ▶ 🔲 and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

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

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

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

Investments-program-related See Part IV, line 11

Other assets See Part IV, line 11

basis Complete Part VI of Schedule D

Intangible assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

Inventories for sale or use

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

	Assets	
•	⋖	

11

12

13

14

15

16

17

18

19

20

21

23

24

Liabilities 22

Assets or

Net

30

31

32

33

34

2c

3а

3b

Nο

Nο

Form 990 (2016)

Consolidated basis

Audit Act and OMB Circular A-133?

c 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?

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

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

Additional Data

Software ID: Software Version:

EIN: 84-0943035

Name: INSTRUCTIONAL TELECOMMUNICATIONS

FOUNDATION INC.

Form 990 (2016)

Form 990, Part III, Line 4a: THE ORGANIZATION DELIVERED INSTRUCTIONAL TELEVISION PROGRAMS TO ELEMENTARY AND SECONDARY SCHOOLS THROUGH JULY 2015. THE ORGANIZATION ALSO PROVIDES THESE SCHOOLS WITH FREE OR LOW COST WIRELESS INTERNET (AS DESCRIBED IN SCHEDULE O) WHICH CONTINUES VOOAL EDUCATION'S NEWEST EFFORT, EDUCATION VENTURE FUND, SEEKS TO REDUCE OPPORTUNITY GAPS IN EDUCATION BY LOCATING AND FUNDING TECHNOLOGY START-UPS WITH IDEAS TO REDUCE GAPS

Form 990, Part III, Line 4b: GRANTS IN SUPPORT OF THE ORGANIZATIONS PHILANTHROPIC VALUES

Form 990, Part III, Line 4c: THE ORGANIZATION PROVIDED DATA SERVICES TO EDUCATIONAL AND NON-PROFIT ENTITIES THROUGH ITS INVESTMENT IN MOBILE CITIZEN. LLC THE PROGRAM REVENUE AND EXPENSES FLOWING THROUGH TO THE ORGANIZATION FROM MOBILE CITIZEN SCHEDULE K-1 WERE 1.102.433 AND 1.809.424 RESPECTIVELY. NETTING

TO A LOSS OF (706.991)

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

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

As Filed Data -

Supplemental Financial Statements

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

► Attach to Form 990.

2016

DLN: 93493030016458 OMB No 1545-0047

Schedule D (Form 990) 2016

Cat No 52283D

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

		organization L TELECOMMUNICATIONS			Employer ide	entification n	number				
	II NOITADNU				84-0943035	84-0943035					
Pa	rt I C	Organizations Maintaining Donor complete if the organization answere	Advised Funds or Other 9 d "Yes" on Form 990, Part 1	Similar Funds V, line 6.	or Accounts.						
			(a) Donor advised funds		(b)Funds an	d other accour	nts				
L	Total n	umber at end of year									
2	Aggreg year)	ate value of contributions to (during									
3	Aggreg	ate value of grants from (during year)									
1	Aggreg	ate value at end of year									
5		organization inform all donors and donor a e the organization's property, subject to t			advised	□ Y€	es 🗆 No				
5	used onl	organization inform all grantees, donors, a y for charitable purposes and not for the ig impermissible private benefit?				□ Ye	es 🗌 No				
Pa	rt II C	onservation Easements. Complet	e if the organization answer	red "Yes" on Fo	orm 990, Part IV	, line 7.					
L	Purpose(s) of conservation easements held by the	organization (check all that ap	ply)							
	☐ Pre	servation of land for public use (e g , rec	reation or education)	Preservation of	an historically imp	ortant land ar	ea				
	☐ Pro	tection of natural habitat		Preservation of	a certified historic	structure					
	☐ Pre	servation of open space									
2		e lines 2a through 2d if the organization h it on the last day of the tax year	neld a qualified conservation co	ntribution in the		ation at the End of	the Year				
а	Total nun	nber of conservation easements			2a						
b	Total acre	eage restricted by conservation easement	:s		2b						
С		of conservation easements on a certified	, .	•	2c						
d	structure	of conservation easements included in (c) listed in the National Register	•		2d						
3	Number tax year	of conservation easements modified, trar	sferred, released, extinguished	, or terminated b	by the organization	during the					
1	Number	of states where property subject to conse	ervation easement is located > _		_						
5		organization have a written policy regard rcement of the conservation easements i		spection, handlir	ng of violations,	☐ Yes	□ No				
5	Staff and	l volunteer hours devoted to monitoring,	inspecting, handling of violation	ns, and enforcing	conservation ease	ements during	the year				
7	Amount ·	of expenses incurred in monitoring, inspe	cting, handling of violations, ar	d enforcing cons	servation easemen	ts during the y	year				
3		th conservation easement reported on lin ion 170(h)(4)(B)(II)?	e 2(d) above satisfy the require	ments of section	n 170(h)(4)(B)(ı)	☐ Yes	□ No				
•	balance :	III, describe how the organization report sheet, and include, if applicable, the text nization's accounting for conservation eas	of the footnote to the organizat			and					
Par	tiii o	Organizations Maintaining Collect Complete if the organization answere	ions of Art, Historical Tre		ther Similar As	ssets.					
La	If the org art, histo	ganization elected, as permitted under SF prical treasures, or other similar assets he in Part XIII, the text of the footnote to its	AS 116 (ASC 958), not to repo Id for public exhibition, educati	rt in its revenue on, or research i	n furtherance of p		orks of				
b	historica	ganization elected, as permitted under SF l treasures, or other similar assets held fo amounts relating to these items									
((i) Revenu	e included on Form 990, Part VIII, line 1			▶ \$						
(i	ii)Assets ır	ncluded in Form 990, Part X			▶ \$						
2		ganization received or held works of art, l amounts required to be reported under :			nancıal gaın, provi	de the					
а	Revenue	ıncluded on Form 990, Part VIII, line 1			> \$						
b	Assets in	icluded in Form 990, Part X			▶ \$						

i ai	4444	Organizations Ma	aintaining Coi	rections t	JI AFL,	HISTOR	icai ir	easi	ures, or	Other	Similar A	issets (conti	nuea)
3		the organization's acq (check all that apply)	juisition, accessioi	n, and other	r records	, check	any of t	he fo	ollowing t	hat are	a significant	use of it	s coll	ection
а		Public exhibition				d		Loan	or excha	ange pro	grams			
b		Scholarly research				е		Othe	er					
С		Preservation for future	e generations											
4	Provi Part :	de a description of the	organization's col	lections and	d explain	how th	ey furth	er th	e organız	ation's e	exempt purp	ose in		
5		ig the year, did the org s to be sold to raise fur									mılar	□ Y	es	□ No
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.			" on Fo	rm 990), Part :	[V, lı	ine 9, or	report	ed an amo	unt on	Form	990, Part
1a		e organization an agent ded on Form 990, Part I		an or other	ınterme	diary foi	contrib	ution	ns or othe	er assets	not	□ Y	es	□ No
Ь	If "Yes," explain the arrangement in Part XIII and complete the following table Amount													
С		nning balance				_			İ	1c				
d	Addıt	ions during the year								1d				
е	Dıstrı	butions during the year	r							1e				
f	Endır	ng balance								1f				
2a	Dıd tl	he organization include	an amount on Fo	rm 990, Pai	rt X, lıne	21, for	escrow	or cu	ustodial a	ccount l	iability?		es	 □ No
b	τ ε "∨ε	es," explain the arrange	ment in Part VIII	Check her	e if the a	volanat	ion has	haan	provide	d in Dart	VIII			
	rt V	Endowment Fund											• •	
			abi complete ii	(a)Currer			rior year		(c)Two ye				(e)F	our years back
1a	Beginn	ing of year balance .					·							
b	Contrib	outions												
С	Net inv	estment earnings, gair	ns, and losses											
d	Grants	or scholarships												
e		expenditures for facilition	es											
f	Admın	strative expenses .												
g	End of	year balance												
2	Provi	de the estimated perce	ntage of the curre	ent year end	d balance	e (line 1	g, colun	nn (a)) held a	s				
а	Board	d designated or quasi-e	endowment 🕨											
b	Perm	anent endowment 🕨												
С	Temp	orarily restricted endov	wment >											
	The p	ercentages on lines 2a	, 2b, and 2c shou	ld equal 100	0%									
3а	orgar	here endowment funds nization by		sion of the	organıza	tion tha	t are he	ld an	nd admini	stered f	or the	_		Yes No
		nrelated organizations		• • •		•		•					a(i) a(ii)	
ь		elated organizations .es" on 3a(ii), are the re		s listed as i	required	on Sche	· · · · · · · · · · · · · · · · · · ·	•				. ⊦ੌ	3b	
4		ribe in Part XIII the inte	-					-				· L		
Pai	rt VI	Land, Buildings,	and Equipmen	nt.										
		Complete if the or	ganızatıon ansv	vered 'Yes'								rt X, lır		
	Descri	ption of property	(a) Cost or oth (investme		(b)Cost	or other	basıs (ot	her)	(c)Accı	ımulated	depreciation		(d) Bo	ok value
1a	Land													
b	Buildin	gs												
c	Leaseh	old improvements												
d	Equipn	nent						871			871			
е	Other													
Tota	ıl. Add	lines 1a through 1e (Co	olumn (d) must e	qual Form 9	90, Part	X, colu	mn (B),	line	10(c)) .		>			

Part VII	Investments—Other Securities. Complete if See Form 990, Part X, line 12.	the organiz	ation answer	ed 'Yes' on For	m 990, Part IV	, line 11b.
	(a) Description of security or category (including name of security)	(b) Book value		Method of valuat end-of-year marl		
(1)Financial (2)Closely-h (3)Other		: : :				
(3) other <u> </u>						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Colum	in (b) must equal Form 990, Part X, col (B) line 12)		•			
Part VIII		ıf the organ	ization answe	ered 'Yes' on Fo	orm 990, Part I	V, line 11c.
	See Form 990, Part X, line 13. (a) Description of investment	(b) Bool	k value		Method of valuated and of valu	
	IDENT SPECTRUM LLC		3,189,258	COSE OF	С	ker value
	PORT SERVICES LLC CITIZEN LLC		304,744 143,857		C C	
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	in (b) must equal Form 990, Part X, col (B) line 13)		3,637,859			
Part IX	Other Assets. Complete if the organization answer (a) Description		orm 990, Part I	V, line 11d See	Form 990, Part X	(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu Part X	imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization		'Ves' on Form		Þ	
	See Form 990, Part X, line 25.	i answered	(b) Book		mie 11e or 11r.	
1. (1) Federal :	(a) Description of liability		(b) 600k	value		
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	on (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the text	of the feetne		uzation's fire	J statomant- +-	t rangets the
	or uncertain tax positions In Part XIII, provide the text I's liability for uncertain tax positions under FIN 48 (ASC					

2

h

5

1 2

b

3

4

b

c 5

Part XIII

Part XII

Schedule D (Form 990) 2016

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements. 5.561.799 Amounts included on line 1 but not on Form 990, Part VIII, line 12

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Net unrealized gains (losses) on investments 2a -2.850.298 2h Donated services and use of facilities . . 2c

c Recoveries of prior year grants . . . 2d 4.122 d Other (Describe in Part XIII) . . . Add lines 2a through 2d е

3 Subtract line 2e from line 1 .

Amounts included on Form 990, Part VIII, line 12, but not on line 1 4 Investment expenses not included on Form 990, Part VIII, line 7b . Other (Describe in Part XIII)

Total expenses and losses per audited financial statements .

Donated services and use of facilities .

Prior year adjustments

Other (Describe in Part XIII) . Add lines 2a through 2d .

Subtract line 2e from line 1 .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Other losses .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Supplemental Information

Add lines 4a and 4b . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

4a 4b

2a

2h

2c 2d

4a 4b

Explanation

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

4c Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

> 2e 3

> 4c

5

2e

3

Schedule D (Form 990) 2015

Page 4

-2.846.176

8,407,975

8,407,975

4,212,602

4,212,602

4,212,602

chedule D (Form 990) 2015	Page 5
Part XIII Supplemental Inform	nation (continued)
Return Reference	Explanation
	Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version:

> **EIN:** 84-0943035 Name: INSTRUCTIONAL TELECOMMUNICATIONS

FOUNDATION INC

Supplemental Information

Return Reference Explanation

IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, ALL ORGANIZATIONS ARE REQUIRE SCHEDULE D, PAGE 3, PART X D TO DISCLOSE ANY MATERIAL UNCERTAIN TAX POSITIONS THAT MANAGEMENT BELIEVES DOES NOT MEET A "MORE-LIKELY-THAN-NOT" STANDARD OF BEING SUSTAINED UNDER AN INCOME TAX AUDIT, AND TO REC ORD A LIABILITY FOR ANY SUCH TAXES INCLUDING PENALTY AND INTEREST MANAGEMENT OF THE FOUND ATION HAS NOT IDENTIFIED ANY UNCERTAIN TAX POSITIONS THAT REQUIRE THE RECORDING OF A LIABI LITY MENTIONED ABOVE OR FURTHER DISCLOSURE

upplemental Information		
Return Reference	Explanation	
SCHEDULE D, PAGE 4, PART XI, INE 2D	BOOK/TAX DIFFERENCES-EBS SUPPORT SERVICES LLC 4,122	

Su

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493030016458 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ► Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** INSTRUCTIONAL TELECOMMUNICATIONS 84-0943035 FOUNDATION INC Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ☐ Yes ✓ No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) See Additional Data Table (1)(2)(3)(4)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 12 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) 2016 Cat No 50055P

(5)

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PAGE 1, PART I, LINE IN THE CASE OF APPLICANTS WITH WHOM THE ORGANIZATION HAS A FORMAL GRANT AGREEMENT, THE AGREEMENT OUTLINES WHEN THE PAYMENTS ARE TO BE

MADE AND USUALLY REQUIRE THE GRANTEE TO SUBMIT, IN DETAIL, HOW THEY USED THE FUNDS IN A NARRATIVE OF THE WORK THE REPORTS ARE THEN REVIEWED BY ONE OR MORE STAFF MEMBERS OR CONTRACT CONSULTANTS, AND IF THERE IS ANY DISCREPANCY, THE FINAL PAYMENT WOULD NOT BE MADE UNTIL

Schedule I (Form 990) 2016

(6) (7)

Part IV

Return Reference

Explanation

THE PROBLEM HAS BEEN CORRECTED

Additional Data

FUND

10510 CULVER BLVD CULVER CITY, CA 90232 CEL EDUCATION FUND

1330 BROADWAY THIRD FLOOR OAKLAND, CA 94612

Software ID: Software Version: **EIN:** 84-0943035

45-3154473

Name: INSTRUCTIONAL TELECOMMUNICATIONS

FOUNDATION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

KAIROS FELLOWSHIP

IMMIGR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or aovernment assistance BRAVE NEW FILMS ACTION 26-0603427 501C4 14,344 PROTECT YOUNG

50,000

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-2311577 501C3 10.000 FCC PRIVACY CENTER FOR DIGITAL DEMOCRACY

NEW SUITE WASHINGTON, DC 20009					
COLOR OF CHANGE ORG 1714 FRANKLIN ST	20-4496889	501C4	14,344		EFFECTIVE OPPOSITION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 100 - 136 OAKLAND, CA 94612

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) COMMON CAUSE 52-6078441 501C4 75,000 IBALLOT INITATIVE 805 FIFTEENTH ST NW SUITE 800 WASHINGTON, DC 20005 52-6078441 501C4 15.000 VOTE MATTERS COMMON CAUSE 805 FIFTEENTH ST NW

SUITE 800

WASHINGTON, DC 20005

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) COMMON CAUSE 52-6078441 501C4 130,000 FINANCE SYSTEM 805 FIFTEENTH ST NW SUITE 800 WASHINGTON, DC 20005 FREE PRESS ACTION FUND 04-3771598 501C4 20.790 INET NEUTRALITY 40 MAIN STREET SUITE 301

FLORENCE, MA 01062

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) FREE PRESS ACTION FUND 04-3771598 501C4 20,000 INFT NEUTRALITY 40 MAIN ST SUITE 301 FLORENCE, MA 01062 NEW VENTURE FUND 20-5806345 501C3 50.000 CORE SUPPORT 1201 CONNETICUT AVE NW

SUITE 300

WASHINGTON, DC 20036

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) PRESENTE ACTION FUND 27-0587622 501C4 30,000 ISANCTUARY 1330 BROADWAY **IRESTAURANT** 22-3888268 501C4 25.000 CORE SUPPORT

SUITE 300 OAKLAND, CA 94612 PROTFUS ACTION LEAGUE 15 RESEARCH DRIVE

SUITE B

AMHERST, MA 01002

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) PROTFUS ACTION LEAGUE 22-3888268 501C4 36,000 SECURITY AND RIGHTS PUBLIC COMMUNICATORS 51-0173482 501C3 900,000 CORE FUNDING

15 RESEARCH DRIVE SUITE B AMHERST, MA 01002

2900 WELTON ST SUITE 300 DENVER, CO 80205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization arant cash non-cash assistance or assistance or government other) assistance PUBLIC COMMUNICATORS 51-0173482 501C3 100,000 AUDIENCE ANALYSIS 2900 WELTON ST

BROADBAND CAMPAIGN

SUITE 300 DENVER, CO 80205				
STATEWIDE ORGANIZING FOR COMMUNITY EMPOWERMENT 2507 MINERAL SPRINGS AVE	23-7264556	501C4	30,000	

SUITE D

KNOXVILLE, TN 37917

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 94-3153687 501C4 66.522 CORE FUNDING THE ADVOCACY FUND 1014 TOMEY AVE SAN FRANCISCO, CA 94130

IANTI-CRIMILIZATION

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

94-2759879

RACE FORWARD

32 BROADWAY SUITE 1801 NEW YORK, NY 10001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance FIGHT FOR THE FUTURE INC. 45-3951426 501C4 25.000 MOBILE TECH

PO BOX 55071 BOSTON, MA 02205

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10025

NEW WORLD FOUNDATION 13-1919791 501C3 30,000 MOBILE PLATFORM 666 WEST FND AVE SUITE 1B

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) WASHINGTON COMMUNITY 91-1206728 501C4 20,000 EXPANDING ACTION NETWORK IDEMOCRACY 1806 E YESTER WAY SEATTLE, WA 98122 COMMUNITY ORGANIZATIONS 26-2613701 501C4 100.000 PEOPLE/PLANET FIRST IN ACTION

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

810 N MILWAUKEE AVE CHICAGO, IL 60642

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 27-0167620 501C4 75.000 THE NEW FLORIDA MAJORITY IFINANCE REFORM 8330 BISCAYNE BLVD SUITE 1

MIAMI, FL 33138 SIXTEEN THIRTY FUND 27-4486735 501C4 50,000 VOTER REGISTRATION 1201 CONNECTICUT AVE NW

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 300

WASHINGTON, DC 20037

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance PUFNTF 45-3697690 501C3 30.000 RESISTING & BUILDING

CORE SUPPORT

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

45-3697690

1937 W ADAMS ST PHOENIX, AZ 85009

1937 W ADAMS ST PHOENIX, AZ 85009

PUENTE

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) LIVING UNITED FOR CHANGE 27-1398645 501C4 50,000 IBALLOT CAMPAIGN IN ARIZONA 81-1642810 501C4 30.000 FAIR WAGE FAIR WAGE

3120 N 19TH AVE SUITE190 PHOENIX, AZ 85015 COLORADO FAMILIES FOR A

450 F 17TH AVE SUITE 310 DENVER, CO 80203

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) MAINE PEOPLE'S ALLIANCE 01-0383493 501C4 50,000 FAIF WAGE 565 CONGRESS ST SUITE 200 PORTLAND, ME 04101 COLORADO LEAGUE OF 27-3127388 501C4 25,000 I AMENDMENT 71 OPPOSIT RESPONSIBLE VOTORS 1574 PERRY STREET

DENVER, CO 80237

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-3127388 501C4 30.000 AMENDMENT 71 COLORADO LEAGUE OF RESPONSIBLE IOPPOSIT VOTORS

1574 PERRY STREET DENVER, CO 80237					
CENTER FOR MEDIA JUSTICE 436 FOURTEENTH ST SUITE	30-0520981	501C3	20,000		NET NEUTRALITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

500

OAKLAND, CA 94612

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 52-2096845 501C3 20.000 NEW AMERICAN FOUNDATION INET NEUTRALITY 740 FIFTH STREET NW SUITE 900

THONEST ELECTIONS

WASHINGTON, DC 20005

25.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C4

WINWIN ACTION 1402 THIRD AVE SUITE 201

SEATTLE, WA 98101

26-3921408

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) MCCE ACTION 45-4335938 501C4 25,000 CLEAN ELECTIONS 565 CONGRESS STREET SUITE 206-A PORTLAND, ME 04101 NEO PHILANTHROPY ACTION 80-0444461 501C4 50.000 IMPOWER CHANGE

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FUND

45 W36TH ATREET NEW YORK, NY 10018

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance ROJECT

RESPONDING TO HATE

PROGRESSIVE MARYLAND	52-2326106	501C4	25,000		GRASSROOTS PRO
36 UNIVERSITY BLVD E					İ
SILVER SPRINGS, MD 20901					i .

30,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C4

ARAB AMERICAN INSTITUTE

1600 K ST NW SUITE 601 WASHINGTON, DC 20006 52-1395040

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 52-2216665 501C3 35.000 SOUTH ASIANS AMERICANS IORGANIZING SUPPORT LEADING TOGETHER

6930 CARROLL AVE SUITE 506 TAKOMA PARK, MD 20912					
DONNELL-KAY FOUNDATION INC	59-6169704	501C4	26,500		LEARNER ADVOCATE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

730 17TH ST SUITE 950 DENVER, CO 80202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) ARIZONA WINS 36-4781665 501C4 25.000 DISCRETIONATY GRANT 530 E MCDOWELL ROAD SUITE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

107

PHOENIX, AZ 85004

DLN: 93493030016458

OMB No 1545-0047

2015

Schedule J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.qov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

FOUNDATION INC

Name of the organization INSTRUCTIONAL TELECOMMUNICATIONS

Employer identification number

84-0943035

Pa	rt I Questions Regarding Compensation	n	·			
					Yes	No
1 a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	┌ First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	□ Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b		
2	Did the organization require substantiation prior to r directors, trustees, officers, including the CEO/Exec			2		
3	Indicate which, if any, of the following the filing orgal organization's CEO/Executive Director Check all thused by a related organization to establish compens	at apply	y Do not check any boxes for methods			
	Compensation committee	Г	Written employment contract			
	Independent compensation consultant	Ľ	Compensation survey or study			
	Form 990 of other organizations	Г	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, or a related organization	Part VI	I, Section A, line $1 ext{a}$ with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplement	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	tions mu	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	a, did the organization pay or accrue any			
а	The organization?			6 a		No
b	Any related organization?			6b		No
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		No
8	Were any amounts reported on Form 990, Part VII, subject to the initial contract exception described in Part III			8		N o
9		e rebutt	able presumption procedure described in Regulations	•		No

Page 2

3 PATRICIA DWYERCFO

128,095

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note: The cum of columns (P)(1) (w) for each letted individual must equal the total amount of Form 0.00. Bart VII. Costion A. Line 15. applicable column (D) and (E) amounts for that individual

Note. The sum of columns (B)((111)	for each listed individu	iai must equal the total	i amount of Form 990,	Part VII, Section A, IIn	e Ta, applicable colui	mn (D) and (E) amount	s for that individual	
(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
		Base (1) compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990	
1 JOHN SCHWARTZ DIRECTOR & PRESIDENT	(i)								
DIRECTOR ATTREBUTE	(ii)	167,062				48,869	215,931		
2 ADAM MILLER COO/SECRETARY	(i)								
	(ii)	132,467				37,103	169,570		

Schedule J (Form 990) 2015

157,346

29,251

30 2013	Page 3					
Part III Supplemental Information						
Provide the information, explanation, o	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation					
,	FILER'S CORE FORM PART VII-SECTION A DISCLOSURE INCLUDES COMPENSATION PAID TO DIRECTORS/OFFICERS IN COLUMNS E & F FROM EBS SUPPORT SERVICES, WHICH IS TECHNICALLY AN UNRELATED ORGANIZATION, AND PROVIDES MANAGEMENT COMPANY SERVICES THAT DISCLOSURE ON PART VII-SECTION A IS UNDERTAKEN IN FAVOR OF ADDITIONAL TRANSPARANCY GIVEN THE					

COMPLEXITY OF FILER'S RELATIONSHIPS AND YIELDS A "TRIGGER" FOR THIS SCHEDULE WHICH WOULD OTHERWISE NOT BE APPLICABLE

Schedule J (Form 990) 2015

Schodule 1 (Form 990) 2015

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Schedule L (Form 990 or 990)-EZ)		► Compl rm 990, Pa	ns with li lete if the orga art IV, lines 2!	anization ans 5a, 25b, 26, 3	swered 27, 28a, 28b,		Bc,			MB No		
				990-EZ, Part							20	IJ	O
Department of the Tre Internal Revenue Serv	asurv	ormation abo		ule L (Form 99 www.irs.gov	90 or 990-EZ		ructio	ns is	at	C)pen Inst	to Pu ecti	
Name of the org INSTRUCTIONAL TO FOUNDATION INC	anization ELECOMMUNICATIONS	6						•	yer ide 3035	entifica			
	ss Benefit Trar lete if the organiza						rganız	ation:	s only)	na 40h			
) Name of disquali			Relationship be					Descrip		(d) Corr	rected?
	,				organization			. ,	ansact		_ <u>-</u>	es	No
											+		
4958 3 Enter the ar	mount of tax incurion in the mount of tax, if an ans to and/or I in the organ orted an amount orted an amount orted with organization	y, on line 2, a From Interestation answer n Form 990, F (c) Purpose	bove, reim ested Pered "Yes" of Part X, line (d) Loan	bursed by the corsons. n Form 990-EZ 5, 6, or 22	rganization .		90, Pa	rt IV,	line 26	\$ \$ 6, or if ' h) oved by rd or nittee?	(ganıza i)Writ greem	ten
			То	From			Yes	No	Yes	No	Yes		No
							1						
Total					<u> </u> ▶ \$		-						
	nts or Assistar	nce Benefit	ing Inter										
	nplete if the orga			1					-			_	
(a) Name of inter	rested person (b	Relationship) erested persoi organizati	n and the	(c) Amount	of assistance	(d) Type	of assi	stand	ce	(e) Pu	rpose o	of assi	stance
									+				
Eor Danerwork Dec	luction Act Notice s	ee the Instruc	tions for Ec	rm 990 or 990-l	7 C:	t No 50056A		C-1		I (Farm	000 0	- 000	E7) 201

batusan interested

	person and the organization	transaction		organı	zation's nues?
				Yes	No
(1) EBS SUPPORT SERVICES LLC	KEY EMPLOYEES	642,346	SHARED SERVICES		No
Part V Supplemental Information				·	

Provide additional infor	mation for responses to questions on Schedule L (see instructions)
Return Reference	Explanation
SCHEDULE L, PART V	EBS SUPPORT SERVICES LLC IS OWNED BY FIVE MEMBERS WHICH ARE ALL NONPROFIT ORGANIZATIONS ITF ISA MEMBER OF EBS SUPPORT SERVICES LLC AND HAS A 39 47% INTEREST EBS SUPPORT SERVICES WAS CREATED FOR THE PURPOSE OF LEASING PERSONNEL AND PROVIDING SHARED ADMINISTRATIVE SERVICES TO ITS MEMBERS THE APPOINTED MANAGER OF EBS SUPPORT SERVICES IS THE PRESIDENT AND DIRECTOR OF ITF THREE KEY EMPLOYEES OF EBS SUPPORT SERVICES DEVOTE PART OF THEIR TIME TO ITF BUSINESS JOHN SCHWARTZ, ADAM MILLER, AND PATRICIA DWYER ITF REIMBURSES EBS SUPPORT SERVICES FOR THE COST OF THE LEASED PERSONNEL, INCLUDING KEY EMPLOYEES THE AMOUNT LISTED ABOVE ALL COMPENSATION AND BENEFITS PAID TO THESE KEY EMPLOYEES THE AMOUNT LISTED ABOVE ALSO INCLUDES SALARY AND RENEFITS FOR OTHER SHARED EMPLOYEES AS WELL AS

REIMBURSEMENT FOR SUCH ITEMS AS SHARED OFFICE SPACE, EQUIPMENT, AND OTHER OPERATING EXPENSES TOTAL AMOUNT PAID TO EBS SUPPORT SERVICES 642,346 EMPLOYEE SALARIES 403,832 EMPLOYEE TAXES & BENEFITS 91,567 OTHER OPERATING EXPENSE 112,468 RENT 34,479

efile GRAPHIC p	rint - DO NOT PROCESS As Filed Data -		DLN:	93493030016458			
SCHEDULE O (Form 990 or 990- EZ)	Complete to provide information fo Form 990 or 990-EZ or to prov Attach to Form Information about Schedule O (Form	mation to Form 990 or 990-EZ nation for responses to specific questions on to provide any additional information. In to Form 990 or 990-EZ. D (Form 990 or 990-EZ) and its instructions is at twi.irs.gov/form990.					
Internal Revenue Service Name of the organizat INSTRUCTIONAL TELECOI FOUNDATION INC	cion MMUNICATIONS		Employer identif 84-0943035	ication number			
990 Schedule O, S	Supplemental Information						
Return Reference		Explanation					
FORM 990 - ORGANIZATION'S MISSION	THE CORPORATION IS ORGANIZED AND WILL B EDUCATIONAL- AND "SOCIAL WELFARE" PURPORESPECTIVELY, OF THE INTERNAL REVENUE C ACTIVITIES TO SUPPORT THE PROVISION OF C CAPABILITIES TO EDUCATORS AND STUDENTS INSTRUCTIONAL VIDEO PROVIDED TO ACCRED ORGANIZATIONS ENGAGED IN THE FORMAL ED AND OUTSPOKEN MEDIA THAT HELP USERS TO POWER AND CONCENTRATED PRIVATE PRIVILE VIEW CARRIED BY THEM, THAT OFFER DISSEN' INFORMATION AND CONCEPTS TO THE MARKE' ENGAGE IN ADDITONAL SOCIAL WELFARE, CHACONSISTENT WITH OPERATIONS THAT MAY BE EXEMPT FROM TAXATION UNDER, SECTION 50° HEREAFTER AMENDED	DSES WITHIN THE MEANING O ODE TO THIS END, THE NONF QUALITY AND DIVERSE INSTRU , INCLUDING, BUT NOT LIMITE ITED EDUCATIONAL INSTITUT DUCATION OF ENROLLED STUI D BE A POPULAR DEMOCRATIO EGE EXPAND THE DISSEMINA TING, ALTERNATIVE, OR CRITI TPLACE OF IDEAS IN BOTH LO ARITABLE, SCIENTIFIC, AND/OF UNDERTAKEN BY ORGANIZA	F SECTIONS 501(IPROFIT SHALL UN JCTIONAL MEDIA D TO, DATA SERV TIONS AND GOVEF DENTS FOSTER (ICC CHECK ON BOTIL ATTION OF MEDIA, A ICALLY CONSTRU DCAL AND GLOBA R EDUCATIONAL A TIONS DESCRIBEI	C)(3) AND 501(C)(4), IDERTAKE CONTENT AND IJCES AND RNMENTAL DPEN, HONEST H GOVERNMENT AND POINTS OF CTIVE L CONTEXTS, ACTIVITIES AS ARE D IN, AND THUS			

990	Schedule	Ο,	Supplemental	Information

Return Reference	Explanation
FORM 990	BACKGROUND THESE ADDITIONAL, VOLUNTARY DISCLOSURES ARE INTENDED TO GIVE THE INTERESTED REA DER GREATER INSIGHT INTO HOW AND WHY USA INSTRUCTIONAL TECHNOLOGY FOUNDATION DIB/A VOQAL USA OPERATES ITS NUMEROUS PROGRAMS AND INITIATIVES, BOTH THROUGH ITS OWN EFFORTS AND THROUGH THE LIMITED LIABILITY COMPANIES OF WHICH VOQAL USA IS PART OWNER ON BEHALF OF A NUMBER OF NONPROFIT ORGANIZATIONS, VOQAL USA'S PRESIDENT, JOHN SCHWARTZ, LED AN EFFORT TO APPLY F OR WHAT WERE THEN REFERRED TO AS INSTRUCTIONAL TELEVISION FIXED SERVICE (ITFS) LICENSES F ROM THE FEDERAL COMMUNICATIONS COMMISSION THOSE APPLICATIONS WERE ORIGINALLY SUBMITTED IN THE EARLY 1980S MR SCHWARTZ BELIEVED THAT SEPARATE NONPROFIT ORGANIZATIONS WITH LOCAL B OARDS OF DIRECTORS WOULD BETTER SERVE THE SCHOOLS AND COMMUNITIES COVERED BY THESE LICENSES IN THE END, FIVE NONPROFITS LED BY MR SCHWARTZ APPLIED FOR AND RECEIVED A TOTAL OF 11 ITFS LICENSES TODAY, JOHN SCHWARTZ REMAINS THE PRESIDENT OF THOSE FIVE NONPROFITS, WHICH WILL HEREAFTER BE REFERRED TO AS THE VOQAL NONPROFITS VOQAL USA IS ONE OF THOSE FIVE NONPROFITS, WHICH WILL HEREAFTER BE REFERRED TO AS THE VOQAL NONPROFITS VOQAL USA IS ONE OF THOSE FIVE FOR NEARLY TWO DECADES, VOQAL USA PROVIDED FREE EDUCATIONAL VIDEO PROGRAMMING TO SCHOOLS VIA ITS FCC-LICENSED ITFS STATION WHILE DOING SO, IT SHARED SOME OF ITS OVERHEAD AND ADMINIST RATIVE COSTS WITH THE OTHER FOUR VOQAL NONPROFITS, WHICH WERE PROVIDING VERY SIMILAR SERVI CE TO THEIR LOCAL COMMUNITIES THIS APPROACH RESULTED IN SIGNIFICANT COST SAVINGS, ALLOWING VOQAL USA TO DELIVER BETTER EDUCATIONAL SERVICE THE SHARING OF PERSONNEL AND OTHER RESO URCES AMONG THE VOQAL NONPROFITS WAS THE BEGINNING OF WHAT WOULD LATER BECOME BES SUPPORT SERVICES, LLC (EBSSS) - THE UMBRELLA SERVICE ORGANIZATION THAT TODAY PROVIDES PERSONNEL AND OTHERWISE BENEFIT THE UMBLIC, THE VOQAL NONPROFITS TO EXPAND THEIR BAILITY TO SERVE EDUCATION AND OTHERWISE BENEFIT THE UBBLIC, THE VOQAL NONPROFITS ENTERED INTO VARIOUS SPECTRUM CAPAC ITY IN THEIR ABILITY HORDAY PROVIDED SERVICE ORGANIZ

990	Schedule	Ο,	Supplemer	ntal I	informat	ion

C

Return Reference	Explanation
FORM 990	FFICE SPACE AND EQUIPMENT EBSSS, LLC, AS WELL AS THE OTHER LIMITED LIABILITY COMPANIES LI STED BELOW, ARE ALL OWNED EXCLUSIVELY BY THE VOQAL NONPROFITS, THERE ARE NO OTHER OWNERS IN 2013, TO EXTEND THE RELATIONSHIPS AMONG THE VOQAL NONPROFITS AND GAIN BETTER PUBLIC REC CONTION FOR SHARED WORK, EBSSS SECURED THE "VOQAL" TRADEMARK AND THE FIVE NONPROFITS, INC LUDING VOQAL USA, ADOPTED THE VOQAL BRAND VOQAL HAS STRIVED TO FULFILL THE MISSION OF EBS, FROM ITS BEGINNINGS PROVIDING FRE, ITFS VIDEO TO SCHOOLS TO RECENT EFFORTS TO SUPPORT CHANGE. MAKERS IN EDUCATION WHILE SOME VOQAL USA PROGRAMS SERVE WHAT MANY WOULD CONSIDER T RADITIONAL EDUCATIONAL ENTITIES LIKE K-12 SCHOOLS, VOQAL EMBRACES A BROADER VIEW OF EDUCATION AND AIMS TO ENSURE EQUAL ACCESS TO KNOWLEDGE TO FOSTER A STRONGER, HEALTHIER DEMOCRACY. OUR PROGRAMS ARE OFTEN AIMED AT THE ROOT CAUSES THAT BAR ACCESS TO KNOWLEDGE BOTH IN AND OUT OF TRADITIONAL BRICK AND MORTAR INSTITUTIONS EXAMPLES OF MORE TRADITIONAL EDUCATION A PROGRAMS INCLUDE OUR CORE BROADBAND INTERNET ACCOUNTS AND MOBILE CITIZEN'S EFFORTS TO EN SURE THAT STUDENTS HAVE ACCESS TO THE INTERNET BOTH AT SCHOOL AND AT HOME VOQAL EDUCATION'S SUPPORT OF THE CRASH COURSE GOVERNMENT AND POLITICS SERIES ON YOUTUBE AND INDEPENDENTS PECTRUM'S EFFORTS TO PASS THROUGH ADDITIONAL EDUCATION BENEFITS TO MORE EBS LICENSEES ARE ADDITIONAL EXAMPLES OF THE EDUCATIONAL NATURE OF OUR WORK EXAMPLES OF SOME OF OUR LESS TR ADITIONAL EDUCATION IN THE BROADER SENSE OF SUPPORTING THE DISSEMINATION OF ALTER NATIVE IDEAS AND BUILDING A MORE ENDAGANDS INTERNET ACCOUNTS OF SUPPORTING THE DISSEMINATION OF ALTER NATIVE IDEAS AND BUILDING A MORE ENDAGED AND EDUCATED PUBLIC A DESCRIPTION OF SPECIFIC VO QAL USA AND ADMINISTERED BY EBSSS, LLC VOQAL USA PROVIDES 38 SCHOOLS INTHE METRO AFEAS COVERED BY ITS LICENSES WITH 544 FREE AND 71 SUBSIDIZED HIGH-SPEED WIRELESS BROADBAND INTERNET ACCOUNTS THE SCHOOLY SERVICE OF SUPPORTING THE PLACES THAT MIGHT NOT BE CONVENTS ARE DISTRIBUTED TO BOTH TEACHERS AND STUDENTS ACCOUNTS PLACED WITH STUDE

990	Schedule	Ο,	Supplemental	Information

Return Reference	Explanation
FORM 990	RNMENT AND POLITICS SERIES, WHICH HAS BEEN VIEWED MILLIONS OF TIMES ACROSS ITS 50 EPISODES THE EDUCATION VENTURE FUND (EVF) WAS ESTABLISHED TO A DDRESS THE CENTRAL GOAL OF MEASURAB LY REDUCING OPPORTUNITY GAPS IN EDUCATION BY INVESTING IN EARLY-STAGE FOR-PROFIT AND NON-P ROFIT ENTITIES VOQAL USA HELPS COVER THE OPERATING COSTS OF THE EVF AND INVESTED IN THREE COMPANIES THROUGH THE EVF IN A TOTAL AMOUNT OF 106,000, AS WELL AS ONE NONPROFIT GRANT FO R 26,500 IN ITS FISCAL YEAR 2017 (THE 12 MONTHS ENDING MARCH 31, 2017) THE INVESTMENTS CO NSIST OF FOLLOW-ON INVESTMENTS IN TWO PORTFOLIO COMPANIES-ONE THAT IDENTIFIES, MAPS AND DE VELOPS NON-COGNITIVE SKILLS AND A SECOND THAT PROVIDES TEACHERS WITH RESEARCH-BASED METHOD S TO WORK WITH SPECIAL NEEDS STUDENTS-AS WELL AS A NEW INVESTMENT IN A COMPANY THAT ORGANI ZES AND PRESENTS TEACHERS WITH ACTIONABLE DATA TO DRIVE STUDENT LEARNING THE GRANT WAS TO SUPPORT AN INNOVATIVE APPROACH TO ASSISTING PARENTS FIND APPROPRIATE EDUCATIONAL OPPORTUN ITIES FOR THEIR CHILDREN MOBILE CITIZEN, LLC - OWNED IN PART (55 72%) BY VOQAL USA MOBILE CITIZEN, LLC IS MADE POSSIBLE BY THE VOQAL NONPROFITS' CURRENT SPECTRUM AGREEMENTS AND THE BROADBAND INTERNET ACCOUNTS RECEIVED AS PART OF THOSE AGREEMENTS AFTER SEVERAL YEARS OF PROVIDING INTERNET SERVICE INDIVIDUALLY, THE VOQAL NONPROFITS FORMED MOBILE CITIZEN, LLC TO PROVIDE ADMINISTRATIVE SUPPORT FOR THE DISTRIBUTION OF SOME OR ALL OF ITS MEMBERS' BROA DBAND ACCOUNTS MOBILE CITIZEN, LLC SERVES SCHOOLS, NONPROFIT ORGANIZATIONS AND SOCIAL WELFARE AGENCIES AND HAS FOCUSED MUCH OF ITS EFFORT ON BRIDGING THE DIGITAL DIVIDE MOBILE CITIZEN SERVES SCHOOLS, NONPROFIT ORGANIZATIONS AND SOCIAL WELFARE AGENCIES NATIONNUMBE, WITH NO DATA CAPS AND NO THROT TLING MOBILE CITIZEN LLC SERVES SCHOOLS, NONPORTIST ORGANIZATIONS AND SOCIAL WELFARE AGENCIES NATIONNUMBE, WITH NO DATA CAPS AND NO THROT TLING MOBILE CITIZEN ALLOWS THEM TO POUT THOSE DOLLARS TO USE FULFILL ING THEIR GROGANIZATION'S MISSION ON BEHALF OF VOQAL USA, MOBILE CITIZEN ILCASS DIVERSE AS WORKFOR

Return Explanation
Reference

FORM 990,	MANAGEMENT SERVICES ARE PROVIDED BY EBS SUPPORT SERVICES LLC PO BOX 6060 BOULDER, COLORADO
PAGE 6,	80306
PART VI,	
LINE 3	

Return

Reference	
FORM 990,	SECTION 5 OF THE BY-LAWS REGARDING "REMOVAL" WAS REVISED TO ELIMINATE THE REFERENCE, "EXCEPT A
PAGE 6,	DIRECTOR APPOINTED BY THE PRESIDENT" THE LAST SENTENCE OF SECTION 5, "A DIRECTOR APPOINTED BY THE
PART VI,	PRESIDENT MAY BE REMOVED BY THE PRESIDENT" WAS ALSO REMOVED SECTION 6 OF THE BY-LAWS REGARDING
LINE 4	VACANCIES" WAS REVISED TO REMOVE THE FOLLOWING WORDING, "EXCEPT FOR A VACANCY IN A SEAT THAT IS
	FILLED BY THE PRESIDENT, IN THE CASE OF A SEAT THAT IS FILLED BY THE PRESIDENT, THE PRESIDENT MAY FILL
	THE VACANCY FOR A TERM OF UP TO TWO YEARS " THE REVISED BY-LAWS INCORPORATING THE ABOVE CHANGES
	WERE APPOVED BY THE BOARD OF DIRECTORS DURING THE YEAR ENDED MARCH 31, 2017

Explanation

Return Explanation
Reference

LINE 8B

FORM 990, THE ORGANIZATION DOES NOT HAVE A COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING
PAGE 6, BODY
PART VI,

Return Explanation
Reference

FORM 990, PAGE 6, ADDITIONALLY THE FORM IS PRESENTED TO THE BOARD MEMBERS AFTER IT IS FILED

PART VI,

LINE 11B

Return

Reference	Explanation
FORM 990,	EACH RESPONSIBLE PERSON WHO IS A DIRECTOR OR OFFICER HAS A DUTY TO DISCLOSE TO THE BOARD (OR TO
PAGE 6,	ANY COMMITTEE OF THE BOARD THAT IS CONSIDERING A DECISION TO WHICH THE CONFLICT APPLIED) THE
PART VI,	MATERIAL FACTS OF ANY PROPOSED TRANSACTION OR ACTION OF THE ORGANIZATION IN WHICH SUCH
LINE 12C	RESPONSIBLE PERSON HAS ANY CONFLICTS EACH RESPONSIBLE PERSON WHO IS A STAFF MEMBER HAS A DUTY
	TO DISCLOSE TO THE BUSINESS MANAGER OF THE ORGANIZATION AND HIS/HER IMMEDIATE SUPERVISOR THE
	MATERIAL FACTS OF ANY PROPOSED TRANSACTION OF THE ORGANIZATION IN WHICH SUCH PERSON HAS ANY
	CONFLICT IMPLEMENTATION OF THE CONFLICT OF INTEREST POLICY RELIES ON SUCH DISCLOSURE A
	RESPONSIBLE PERSON WHO FAILS TO FOLLOW THE PROTOCOLS ESTABLISHED IN THE CONFLICT OF INTEREST

INCLUDING REMOVAL FROM THE BOARD OR THEIR POSITION WITHIN THE ORGANIZATION

POLICY SHALL BE SUBJECTED TO MEANINGFUL DISCIPLINARY ACTION BY THE BOARD OF DIRECTORS UP TO AND

Explanation

Return

Reference	
FORM 990, PAGE 6, PART VI, LINE 15A	ALL SERVICES PERFORMED ARE FROM SHARED EMPLOYEES OF A SHARED SERVICES COMPANY THIS COMPANY HAS AN OVERSIGHT COMMITTEE MADE UP OF BOARD MEMBERS OF NON-PROFIT ORGANIZATIONS THAT IT SERVES THIS OVERSIGHT COMMITTEE HAS BEEN CHARGED BY THE NONPROFIT ORGANIZATION BOARDS TO OVERSEE PERSONNEL MATTERS DESCRIVED AS A DESCRIPTION OF THE PROFIT ON SALARY PENSONNEL MADE THE PENSONNEL MADE THE PENSONNEL MADE THE PENSONNEL MADE THE PENSONNEL MADE THE PENSONNEL MADE THE PENSONNEL MADE THE PENSONNEL MADE THE PENSONNEL MADE THE PENSONNEL MADE THE
	SALARY BENCHMARKING REPORT FOR ALL STAFF POSITIONS AND AN ANNUAL CEO SALARY REVIEW THAT DESCRIBED EACH POSITION AND COMPARED THE POSITION TO THREE SALARY SURVEYS MOUNTAIN STATES EMPLOYERS COUNCIL MOST RECENT NON- PROFIT/FOUNDATION COMPENSATION, MOUNTAIN STATES EMPLOYERS COUNCIL MOST RECENT COLORADO BENCHMARK COMPENSATION, AND MOST RECENT COLORADO NON-PROFIT ASSOCIATION SALARY AND BENEFITS SURVEY IN ADDITION, THE SALARY BENCHMARKING REPORT WAS REVIEW BY AN INDEPENDENT THIRD PARTY CONTRACTOR TO ENSURE THE USE OF PROPER METHODOLOGY AND ETHICAL STANDARDS THIS REPORT, THE THIRD PARTY CONTRACTOR REPORT AND SUPPORTING DOCUMENTATION WAS REVIEWED IN DEPTH BY THE OVERSIGHT COMMITTEE WHICH SUMMARIZED ITS REVIEW TO ALL OF THE BOARDS

Explanation

Return Explanation
Reference
FORM 990 SEE EXPLANATION OF COMPENSATION PROCESS FOR TOP OFFICIAL

LINE 15B

FORM 990, SEE EXPLANATION OF COMPENSATION PROCESS FOR TOP OFFICIAL PAGE 6, PART VI.

Return Explanation
Reference

LINE 19

FORM 990, THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND PAGE 6, FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC PART VI.

Return Reference	Explanation
FORM 990, PART VII	EBS SUPPORT SERVICES, LLC (D/B/A VOQAL) IS OWNED BY FIVE MEMBERS WHICH ARE ALL NONPROFIT ORGANIZATIONS ITF IS A MEMBER OF VOQAL AND HAS A 39 47% INTEREST VOQAL LEASES AND PROVIDES PERSONNEL AND SHARED ADMINISTRATIVE SERVICES TO ITS MEMBERS THE INDIVIDUALS LISTED ON PART VII, SECTION A THAT HAVE AMOUNTS IN COLUMNS E & F WORK WITH VOQAL TO PROVIDE THEIR SERVICES TO VOQALS MEMBERS AND OTHER COMPANIES THE MEMBERS JOINTLY OWN ITF REIMBURSES VOQAL FOR THE PERSONNEL COST FOR SERVICES THEY PROVIDE TO ITF AS WELL AS TO VOQAL'S OTHER FOUR MEMBERS IN THE 2015 CALENDAR YEAR THE AMOUNTS OF REPORTABLE COMPENSATION AND OTHER COMPENSATION PAID BY VOQAL TO THESE INDIVIDUALS THAT IS ATTRIBUTABLE SOLELY TO FILER IS DISCLOSED IN RESPONSE PART VI, LINE 3 PROVIDED EARLIER IN THIS SCHEDULE

Return Explanation
Reference

LINE 9

FORM 990, BOOK/TAX DIFFERENCES-EBS SUPPORT SERVICES LLC 4,122

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -										DLN: 93493	030016	458	
SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.										2016			
Department of the Treasury Internal Revenue Service			oout Schedul							<u>90</u> .	Open to		c	
Name of the organization INSTRUCTIONAL TELECOMMUNICATI FOUNDATION INC	IONS								loyer identifi 943035	cation	number			
Part I Identification	of Disregarded Entities Complete If t	he organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3	3.						
Name, address, and	(a) EIN (if applicable) of disregarded entity		(b) Primary a		Legal don	c) nicile (state n country)	(d) Total inco	ome	(e) End-of-year as	sets	(f Direct co ent			
Part II Identification of related tax-exem	of Related Tax-Exempt Organization npt organizations during the tax year.	s Comple	ete if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	/, line 34 bed	cause	it had one or	more		
Name, address, and	(a) d EIN of related organization	Prim	(b) ary activity	Legal dom	c) ncile (state n country)	(d) Exempt Cod			(e) harity status on 501(c)(3))	Dır	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled ty?	
												Yes	No	
For Donous and Doduction Ac	t Notice, see the Instructions for Form 9			<u></u>	t No 501					Sal-	edule R (Form	000) 36	116	

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	Disprop	h) ortionate itions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?			(k) entage ership
(A) NICESCALE OF CORNER OF		FRUGITION			·	1 710 000	0.400.050	Yes	No		Yes	_		
(1) INDEPENDENT SPECTRUM LLC PO BOX 6060 BOULDER, CO 80306 41-2183115		EDUCATION	СО	N/A	EXCLUDED	1,713,369	3,189,258		No			No	63 6	600 %
(2) PUBLIC TV FINANCING LLC (FINAL)	I	EDUCATION	СО	N/A	EXCLUDED	-1,925			No			No	63 6	00 %
PO BOX 6060 BOULDER, CO 80306 36-4701944														
(3) FREE SPEECH MEDIA LLC	!	SERVICES	со	N/A	UNRELATED	-1,495			No			No	66 6	60 %
PO BOX 6060 BOULDER, CO 80306 84-1300168														
(4) MOBILE CITIZEN LLC		SERVICES	со	N/A	EXCLUDED	-706,921	143,892		No			No	55 7	20 %
PO BOX 6060 BOULDER, CO 80306 46-1777398														
Part IV Identification of Related Organization because it had one or more related organization.							swered "Yes	s" on f	Form '	990, Part I\	/, line	∋ 34		
(a) Name, address, and EIN of related organization	(b) Primary activity		(c) Legal domicile ate or fore country)			(e) Type of entity (C corp, S corp, or trust)	(f) Share of tota Income	l Shar	(g) re of en year assets	d-of- Perc owr	(h) entage ership		(i) Section ! (13) con entit Yes	512(b) trolled

(1)INDEPENDENT SPECTRUM LLC

(2) FREE SPEECH MEDIA LLC

(4) PUBLIC TV FINANCING LLC

(5) PUBLIC TV FINANCING LLC

(3)MOBILE CITIZEN LLC

Purchase of assets from related organization(s) . . .

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses . . .

r Other transfer of cash or property to related organization(s) . . .

Lease of facilities, equipment, or other assets to related organization(s) . . .

Performance of services or membership or fundraising solicitations for related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

Name of related organization

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.								
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Ye	No					
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			1					
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		1a	No					
b Gift, grant, or capital contribution to related organization(s)		1b	No					
c Gift, grant, or capital contribution from related organization(s)		1c	No					
d Loans or loan guarantees to or for related organization(s)		1d	No					
e Loans or loan guarantees by related organization(s)	;	1e	No					
	Ī		T					
f Dividends from related organization(s)		1f	No					

Page 3

No No

No

No

No

No No

No

No

No

No

No

11

1m

1n

|1r | Yes

(d)

Method of determining amount involved

Schedule R (Form 990) 2016

CASH DISTRIBUTION

CAPITAL CONTRIBUTION

CAPITAL CONTRIBUTION

CAPITAL CONTRIBUTION

CASH DISTRIBUTION

a	Loans or loan guarantees to or for related organization(s)	14	i
е	Loans or loan guarantees by related organization(s)	1e	i
f	Dividends from related organization(s)	1f	
g	Sale of assets to related organization(s)	1 g	· ·

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(b)

Transaction type (a-s)

R

R

R

S

(c)

Amount involved

508,800

5,000

617,000

254,400

8,690

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See instructions regarding exclu														
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(1) General or managing partner?		(k) Percentage ownership	
				165 110				Yes	No		Yes	No		
(1)EBS SUPPORT SERVICES LLC	SERVICES	СО	UNRELATED		No	-979	304,744		No			No	39 470 %	
PO BOX 6060BOULDER, CO 80306 80-0305288														
					1	<u> </u>				Schedu	le R (Fori	m 99	0) 2016	

