Form 990
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

C Name of organization
\textbf{INTERNATIONAL BIOCHAR INITIATIVE}

D Employer identification number
56-2675594

E Telephone number
(614)1571-0000

F Name and address of principal officer
DEBBIE REED
640 BROOK RUN DRIVE
WESTERVILLE, OH 43081

H(a) Is this a group return for affiliates?
\textbf{Yes} \textbf{No}

H(b) Are all affiliates included?
\textbf{Yes} \textbf{No}

H(c) Group exemption number

I Tax-exempt status
\textbf{501(c)(3)} \textbf{501(c)(4)} (insert no) \textbf{4947(a)(1)} or \textbf{527}

J Website: \textbf{WWW.BIOCHAR-INTERNATIONAL.ORG}

K Form of organization
\textbf{Corporation} \textbf{Trust} \textbf{Association} \textbf{Other}

L Year of formation
2007

M State of legal domicile
VA

\section*{Part I Summary}

1 Briefly describe the organization's mission or most significant activities
\textbf{PROMOTE DEVELOPMENT OF BIOCHAR SYSTEMS THAT FOLLOW CRADLE-TO-CRADLE SUSTAINABILITY GUIDELINES}

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)
\textbf{3} \textbf{10}

4 Number of independent voting members of the governing body (Part VI, line 1b)
\textbf{4} \textbf{10}

5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)
\textbf{5} \textbf{0}

6 Total number of volunteers (estimate if necessary)
\textbf{6} \textbf{0}

7a Total unrelated business revenue from Part VIII, column (C), line 12
\textbf{7a} \textbf{0}

7b Net unrelated business taxable income from Form 990-T, line 34
\textbf{7b} \textbf{0}

8 Contributions and grants (Part VIII, line 1b)
\textbf{588,931} \textbf{605,496}

9 Program service revenue (Part VIII, line 2a)
39,740 0

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)
44

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
0 0

12 Total revenue--add lines 8 through 11 (must equal Part VIII, column (A), line 12)
628,715 605,496

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)
0 0

14 Benefits paid to or for members (Part IX, column (A), line 4)
0 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)
0 0

16 Professional fundraising fees (Part IX, column (A), line 11e)
0 0

17 Other fundraising expenses (Part IX, column (B), line 25)
559,854 450,940

18 Total expenses--Add lines 13-17 (must equal Part IX, column (A), line 25)
559,854 450,940

19 Revenue less expenses Subtract line 18 from line 12
68,861 154,556

\section*{Part II Signature Block}

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

\begin{itemize}
  \item \textbf{*****} Signature of officer
  \item Date: 2012-11-16
\end{itemize}

Preparer's signature \textbf{MARY D EISHELMAN CPA}

Date

Check if self-employed \textbf{Yes} \textbf{No}

Preparer's taxpayer identification number
\textbf{POL220617}

\textbf{EIN} \textbf{45-2515152}

Phone no: \textbf{(207) 370-3490}

\begin{itemize}
  \item May the IRS discuss this return with the preparer shown above? \textbf{Yes} \textbf{No}
\end{itemize}

For Paperwork Reduction Act Notice, see the separate instructions.

\begin{center}
\textbf{Cat No 11282Y}
\textbf{Form 990 (2011)}
\end{center}
Part III  Statement of Program Service Accomplishments
Check if Schedule O contains a response to any question in this Part III.

1 Briefly describe the organization's mission.

TO PROMOTE THE DEVELOPMENT OF BIOCHAR SYSTEMS THAT FOLLOW CRADLE-TO-CRADLE SUSTAINABILITY GUIDELINES BY SUPPORTING THE GENERATION, REVIEW AND DISSEMINATION OF INFORMATION ON ALL ASPECTS OF BIOCHAR, DEVELOPING SUSTAINABILITY GUIDELINES, AND MONITORING AND EVALUATING BIOCHAR PROJECTS AND SYSTEMS AGAINST THESE GUIDELINES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code   ) (Expenses $ 165,594 including grants of $   ) (Revenue $   )

Policy to promote the adoption of supporting policy mechanisms within the global community regarding the inclusion of biochar in all appropriate policy contexts. Participated in the 2012 USBI Conference, which included over 300 participants, supported a growing number of regional and national groups totaling 45 worldwide, developed the first ever universal standards for biochar.

4b (Code   ) (Expenses $ 135,371 including grants of $   ) (Revenue $   )

Communication: to be an objective and reliable source of credible information on biochar and policy, production and utilization on a monthly basis, sent the IBI newsletter over 3,900 contacts, sent marketing email to drive conversion, and an increase in memberships, develop and maintain website, which receives visitors from 209 countries and saw a 35% increase in visits compared to last year.

4c (Code   ) (Expenses $ 57,694 including grants of $   ) (Revenue $   )

Research: to support the development of a knowledge base on sustainable biochar systems and the use of biochar as a soil amendment and to combat climate change. A searchable bibliography is maintained on the IBI website and contains over 920 references. Updated and posted research matrix to support growing research and knowledge base for biochar. Posted presentations and relevant information from international and regional conferences online, most of which were research-based.

4d Other program services (Describe in Schedule O)

(Expenses $ 27,694 including grants of $   ) (Revenue $   )

4e Total program service expenses $ 386,353
**Part IV Checklist of Required Schedules**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<tr>
<td>2</td>
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<td>3</td>
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<td>20a</td>
<td>No</td>
<td></td>
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<tr>
<td>20b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV Checklist of Required Schedules (continued)

#### 21
The organization reported more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.

| 21 | No |

#### 22
The organization reported more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.

| 22 | No |

#### 23
Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I.

| 23 | No |

#### 24a
Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25.

| 24a | No |

#### 24b
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

| 24b | |

#### 24c
Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

| 24c | |

#### 24d
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

| 24d | |

#### 25a
**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.

| 25a | No |

#### 25b
Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.

| 25b | No |

#### 26
Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.

| 26 | No |

#### 27
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.

| 27 | No |

#### 28
Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)

| 28a | No |

#### 29
Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M.

| 29 | No |

#### 30
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.

| 30 | No |

#### 31
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M.

| 31 | No |

#### 32
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.

| 32 | No |

#### 33
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.

| 33 | No |

#### 34
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.

| 34 | No |

#### 35a
Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?

| 35a | No |

#### 35b
Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.

| 35b | No |

#### 36
**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.

| 36 | No |

#### 37
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.

| 37 | No |

#### 38
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O.

| 38 | Yes |
Part V  Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V  

1a Enter the number reported in Box 3 of Form 1096  (Enter -0- if not applicable)  

1b Enter the number of Forms W-2G included in line 1a (Enter -0- if not applicable)  

1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  

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  

2b 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)  

3a Did the organization have unrelated business gross income of $1,000 or more during the year?  

3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  

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 or securities account)?  

4b If "Yes," enter the name of the foreign country  

See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  

5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  

5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  

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?  

6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  

7 Organizations that may receive deductible contributions under section 170(c).

7a 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?  

7b If "Yes," did the organization notify the donor of the value of the goods or services provided?  

7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  

7d If "Yes," indicate the number of Forms 8282 filed during the year  

8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the sponsoring organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  

9 Sponsoring organizations maintaining donor advised funds.

9a Did the organization make any taxable distributions under section 4966?  

9b Did the organization make a distribution to a donor, donor advisor, or related person?  

10 Section 501(c)(7) organizations. Enter  

10a Initiation fees and capital contributions included on Part VIII, line 12  

10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  

11 Section 501(c)(12) organizations. Enter  

11a Gross income from members or shareholders  

11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  

12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  

13 Section 501(c)(29) qualified nonprofit health insurance issuers.  

13a Is the organization licensed to issue qualified health plans in more than one state?  

Note: All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state  

13b Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  

13c Enter the aggregate amount of reserves on hand  

14a Did the organization receive any payments for indoor tanning services during the tax year?  

14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  

Form 990 (2011)
### Section A. Governing Body and Management

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Enter the number of voting members of the governing body at the end of the tax year.</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Enter the number of voting members included in line 1a, above, who are independent.</td>
<td>1b</td>
</tr>
<tr>
<td>2</td>
<td>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?</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>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?</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Did the organization become aware during the year of a significant diversion of the organization’s assets?</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Did the organization have members or stockholders?</td>
<td>6</td>
</tr>
<tr>
<td>7a</td>
<td>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?</td>
<td>7a</td>
</tr>
<tr>
<td>b</td>
<td>Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td>7b</td>
</tr>
<tr>
<td>8</td>
<td>Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following</td>
<td>8a</td>
</tr>
<tr>
<td>a</td>
<td>The governing body?</td>
<td>8b</td>
</tr>
<tr>
<td>b</td>
<td>Each committee with authority to act on behalf of the governing body?</td>
<td>9</td>
</tr>
</tbody>
</table>

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>Did the organization have local chapters, branches, or affiliates?</td>
<td>10a</td>
</tr>
<tr>
<td>b</td>
<td>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?</td>
<td>10b</td>
</tr>
<tr>
<td>11a</td>
<td>Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>11a</td>
</tr>
<tr>
<td>b</td>
<td>Describe in Schedule O the process, if any, used by the organization to review the Form 990.</td>
<td></td>
</tr>
<tr>
<td>12a</td>
<td>Did the organization have a written conflict of interest policy? If “No,” go to line 13.</td>
<td>12a</td>
</tr>
<tr>
<td>b</td>
<td>Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>12b</td>
</tr>
<tr>
<td>c</td>
<td>Did the organization regularly and consistently monitor and enforce compliance with the policy?</td>
<td>12c</td>
</tr>
<tr>
<td>13</td>
<td>Did the organization have a written whistleblower policy?</td>
<td>13</td>
</tr>
<tr>
<td>14</td>
<td>Did the organization have a written document retention and destruction policy?</td>
<td>14</td>
</tr>
<tr>
<td>15</td>
<td>Did the process for determining compensation of the following persons include a review and approval by independent persons, comparable data, and contemporaneous substantiation of the deliberation and decision?</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>The organization’s CEO, Executive Director, or top management official</td>
<td>15a</td>
</tr>
<tr>
<td>b</td>
<td>Other officers or key employees of the organization</td>
<td>15b</td>
</tr>
<tr>
<td></td>
<td>If “Yes,” to line 15a or 15b, describe the process in Schedule O (see instructions)</td>
<td></td>
</tr>
<tr>
<td>16a</td>
<td>Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</td>
<td>16a</td>
</tr>
<tr>
<td>b</td>
<td>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?</td>
<td>16b</td>
</tr>
</tbody>
</table>

### Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed.

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)’s only) available for public inspection. Indicate how you made these available. Check all that apply
- [ ] Own website
- [ ] Another’s website
- [ ] Upon request

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

SHIVA SCOTTI
640 BROOK RUN DRIVE
WESTERVILLE, OH 43081
(614) 571-0000
### Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) JOHANNES LEHMANN CHAIRMAN</td>
<td>400</td>
<td>X</td>
<td>X</td>
<td>0</td>
<td>0</td>
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<tr>
<td>(2) STEPHEN JOSEPH VICE CHAIRMAN</td>
<td>400</td>
<td>X</td>
<td>X</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(3) ELLEN BAUM TREASURER</td>
<td>400</td>
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<td>0</td>
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<tr>
<td>(4) MARTA CAMPS MEMBER</td>
<td>400</td>
<td>X</td>
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<td>0</td>
</tr>
<tr>
<td>(5) WARWICK MANFRINATO MEMBER</td>
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<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(6) GUY REINAUD MEMBER</td>
<td>400</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(7) SUNUNAT SETBOONSARNG MEMBER</td>
<td>400</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(8) SARAN SOHI MEMBER</td>
<td>400</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(9) DAVID WAYNE MEMBER</td>
<td>400</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(10) YOSHITAKI SHINOHEI MEMBER</td>
<td>400</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(11) THOMAS HARTUNG MEMBER</td>
<td>400</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(12) DEBBIE REED EXECUTIVE DIRECTOR</td>
<td>2250</td>
<td>X</td>
<td>146,775</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
### Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>Name and Title</th>
<th>Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

**1b Sub-Total**

**c Total from continuation sheets to Part VII, Section A**

**d Total (add lines 1b and 1c)**

![Image of table data]

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>Name and business address</th>
<th>Description of services</th>
<th>Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEBREY REEDOR ASSOCIATES</td>
<td>MANAGEMENT (LISTED ABOVE)</td>
<td>146,775</td>
</tr>
<tr>
<td>3426 GREENTREE DRIVE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FALLS CHURCH, VA 220411400</td>
<td></td>
<td></td>
</tr>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

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

![Image of table data]
### Part VIII Statement of Revenue

<table>
<thead>
<tr>
<th>Contributions, gifts, grants, and other similar amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f §</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
<td>605,496</td>
</tr>
</tbody>
</table>

#### Program Service Revenue

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

#### Other Revenue

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

#### Investment Income (including dividends, interest and other similar amounts)

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

#### Income from Investment of Tax-Exempt Bond Proceeds

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

#### Royalties

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
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<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

#### Gross Rents

<table>
<thead>
<tr>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<tr>
<td></td>
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<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Net Rental Income or (Loss)

<table>
<thead>
<tr>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

#### Gross Amount from Sale of Assets Other Than Inventory

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

#### Net Gain or (Loss)

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

#### Gross Income from Fundraising Events

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
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<td></td>
</tr>
</tbody>
</table>

#### Gross Income from Gaming Activities

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
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<tr>
<td></td>
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<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

#### Sales of Inventory, Less Returns and Allowances

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
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<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

#### Miscellaneous Revenue

<table>
<thead>
<tr>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

### Total Revenue

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Total revenue. See Instructions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</td>
<td>(A) Total expenses</td>
<td>(B) Program service expenses</td>
</tr>
<tr>
<td>---</td>
<td>---------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>1</td>
<td>Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to individuals in the United States. See Part IV, line 22.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Pension plan contributions (include section 401(k) and section 403(b) employer contributions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management.</td>
<td>329,744</td>
<td>287,887</td>
</tr>
<tr>
<td>b</td>
<td>Legal.</td>
<td>7,005</td>
<td>7,005</td>
</tr>
<tr>
<td>c</td>
<td>Accounting.</td>
<td>5,500</td>
<td>5,500</td>
</tr>
<tr>
<td>d</td>
<td>Lobbying.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising. See Part IV, line 17.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other.</td>
<td>60,165</td>
<td>60,165</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses.</td>
<td>887</td>
<td>887</td>
</tr>
<tr>
<td>14</td>
<td>Information technology.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Travel.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance.</td>
<td>1,911</td>
<td>1,911</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f; if line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O).</td>
<td>TRAVEL AND MEETINGS TRAVEL AND MEETINGS PRINT, ONLINE AND DIGIT PRINT, ONLINE AND DIGIT</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>TRAVEL AND MEETINGS</td>
<td>32,832</td>
<td>18,400</td>
</tr>
<tr>
<td>b</td>
<td>PRINT, ONLINE AND DIGIT</td>
<td>12,896</td>
<td>12,896</td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>All other expenses.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24f.</td>
<td>450,940</td>
<td>386,353</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Check here if following.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>SOP 98-2 (ASC 958-720), Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Balance Sheet

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Beginning of year</strong></td>
<td><strong>End of year</strong></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Cash—non-interest-bearing</td>
<td>168,220</td>
<td>291,378</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>7,255</td>
<td>38,930</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment cost or other basis Complete VI of Schedule D</td>
<td>10a</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Less accumulated depreciation</td>
<td>10b</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Investments—publicly traded securities</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments—other securities See Part IV, line 11</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments—program-related See Part IV, line 11</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets See Part IV, line 11</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td><strong>Total assets.</strong> Add lines 1 through 15 (must equal line 34)</td>
<td>175,475</td>
<td>330,308</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>27,027</td>
<td>27,304</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability Complete Part IV of Schedule D</td>
<td>21</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L</td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>24</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td><strong>Total liabilities.</strong> Add lines 17 through 25</td>
<td>27,027</td>
<td>27,304</td>
</tr>
</tbody>
</table>

---

Organizations that follow SFAS 117, check here ✔ and complete lines 27 through 29, and lines 33 and 34.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
<td>4,217</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td>144,231</td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td>29</td>
</tr>
</tbody>
</table>

---

Organizations that do not follow SFAS 117, check here ▼ and complete lines 30 through 34.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building or equipment fund</td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>32</td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td>148,448</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td>175,475</td>
</tr>
</tbody>
</table>
**Part XI**  Reconciliation of Net Assets  
Check if Schedule O contains a response to any question in this Part XI

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses  Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
</tr>
<tr>
<td>5</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
</tr>
<tr>
<td>6</td>
<td>Net assets or fund balances at end of year  Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))</td>
</tr>
</tbody>
</table>

**Part XII**  Financial Statements and Reporting  
Check if Schedule O contains a response to any question in this Part XII

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>Yes</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>No</td>
</tr>
</tbody>
</table>
| 2c | If “Yes,” to 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?  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | No |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | No |
| 3b | If “Yes,” did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits |   |

---

Form 990 (2011)
Part I  Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box)

|^|  1 □ A church, convention of churches, or association of churches section 170(b)(1)(A)(i).
|^|  2 □ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
|^|  3 □ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
|^|  4 □ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state

|^|  5 □ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
|^|  6 □ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
|^|  7 □ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)
|^|  8 □ A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
|^|  9 □ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
|^|  10 □ An organization organized and operated exclusively to test for public safety See section 509(a)(4).
|^|  11 □ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
|  a □ Type I   b □ Type II   c □ Type III - Functionally integrated   d □ Type III - Other
|^|  11e □ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
|^|  11f □ If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
|^|  11g □ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
|   | (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
|   | (ii) a family member of a person described in (i) above?
|   | (iii) a 35% controlled entity of a person described in (i) or (ii) above?
|^|  11g(i) □ Yes   No
|^|  11g(ii) □ Yes   No
|^|  11g(iii) □ Yes   No

Provide the following information about the supported organization(s)

<table>
<thead>
<tr>
<th>(i)</th>
<th>Name of supported organization</th>
<th>(ii)</th>
<th>EIN</th>
<th>(iii)</th>
<th>Type of organization (described on lines 1 - 9 above or IRC section (see instructions))</th>
<th>(iv)</th>
<th>Is the organization in (i) listed in your governing document?</th>
<th>(v)</th>
<th>Did you notify the organization in col (i) of your support?</th>
<th>(vi)</th>
<th>Is the organization in col (i) organized in the U S?</th>
<th>(vii)</th>
<th>Amount of support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
</tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes           No</td>
<td></td>
<td>Yes         No</td>
<td></td>
<td>Yes     No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Total |     |     |      |                                 |     | Yes           No   |     | Yes         No       |     | Yes     No          |     |                  |

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2011
**Part II  Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants&quot;)</td>
<td>548,917</td>
<td>586,089</td>
<td>588,931</td>
<td>605,496</td>
<td></td>
<td>2,329,433</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. Add lines 1 through 3</strong></td>
<td>548,917</td>
<td>586,089</td>
<td>588,931</td>
<td>605,496</td>
<td></td>
<td>2,329,433</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,839,383</td>
<td></td>
</tr>
<tr>
<td>6 Public Support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>490,050</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>548,917</td>
<td>586,089</td>
<td>588,931</td>
<td>605,496</td>
<td></td>
<td>2,329,433</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>2,781</td>
<td>971</td>
<td>44</td>
<td></td>
<td></td>
<td>3,796</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total support (Add lines 7 through 10)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2,333,229</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc (See instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13 <strong>First Five Years</strong> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

| 14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) | 14 |
| 15 Public Support Percentage for 2010 Schedule A, Part II, line 14 | 15 |
| 16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization |          |
| 16b **33 1/3% support test—2010.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization |          |
| 17a **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. The organization qualifies as a publicly supported organization |          |
| 17b **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. The organization qualifies as a publicly supported organization |          |
| 18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions |          |
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar Year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public Support (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar Year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support (Add lines 9, 10c, 11 and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))

16 Public support percentage from 2010 Schedule A, Part III, line 15

### Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

18 Investment income percentage from 2010 Schedule A, Part III, line 17

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

19b 33 1/3% support tests—2010. If the organization did not check the box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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Schedule A (Form 990 or 990-EZ) 2011
**Part IV Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

<table>
<thead>
<tr>
<th>Facts And Circumstances Test</th>
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</thead>
<tbody>
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<table>
<thead>
<tr>
<th>Explanation</th>
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<tr>
<td>Schedule A (Form 990 or 990-EZ) 2011</td>
</tr>
</tbody>
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Form 990, Special Condition Description:

<table>
<thead>
<tr>
<th>Special Condition Description</th>
</tr>
</thead>
</table>

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

<table>
<thead>
<tr>
<th>4d. Other program services</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Code</th>
<th>Expenses $</th>
<th>27,694 including grants of $</th>
<th>Revenue $</th>
</tr>
</thead>
</table>

INDUSTRY DEVELOPMENT IDENTIFY BARRIERS TO COMMERCIALIZATION AND THE MEANS TO OVERCOME THEM (INCLUDING POLICY DEVELOPMENT) IBI DEVELOPED THE FIRST EVER UNIVERSAL STANDARDS FOR BIOCHAR IN MAY 2012, CREATING A FOUNDATION FOR A BIOCHAR INDUSTRY
```
Part I  General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1  **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantee's eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2  **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3  **Activities per Region (Use Part V if additional space is needed)**

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees or agents in region or independent contractors</th>
<th>(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in region</th>
<th>(f) Total expenditures for region/investments in region</th>
</tr>
</thead>
<tbody>
<tr>
<td>NORTH AMERICA</td>
<td>0</td>
<td>0</td>
<td>PROGRAM SERVICES</td>
<td>CONTRACTED WITH COMPANY TO PROVIDE CONSULTING SERVICES REGARDING GLOBAL DEPLOYMENT OF BIOCHAR INDUSTRY</td>
<td>30,165</td>
</tr>
<tr>
<td>CENTRAL AMERICA AND THE CARIBBEAN</td>
<td>0</td>
<td>0</td>
<td>PROGRAM SERVICES</td>
<td>CONTRACTED WITH COMPANY IN COSTA RICA TO PROVIDE CONSULTING AND OTHER SERVICES REGARDING DEVELOPMENT AND DEPLOYMENT OF THE BIOCHAR INDUSTRY</td>
<td>30,000</td>
</tr>
</tbody>
</table>

3a Sub-total                                                  0    0         60,165

b Total from continuation sheets to Part I                  0    0

c Totals (add lines 3a and 3b)                                0    0         60,165
### Part II: Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000.

Use Part V if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of non-cash assistance</th>
<th>(h) Description of non-cash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
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<td>2</td>
<td>Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter</td>
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<td>3</td>
<td>Enter total number of other organizations or entities</td>
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</table>
### Part III  Grants and Other Assistance to Individuals Outside the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of non-cash assistance</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
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</table>
1. Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)
   - [ ] Yes  [ ] No

2. Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)
   - [ ] Yes  [ ] No

3. Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)
   - [ ] Yes  [ ] No

4. Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)
   - [ ] Yes  [ ] No

5. Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)
   - [ ] Yes  [ ] No

6. Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).
   - [ ] Yes  [ ] No
**Part V  Supplemental Information**
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

<table>
<thead>
<tr>
<th>Identifier</th>
<th>ReturnReference</th>
<th>Explanation</th>
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## Supplemental Information to Form 990 or 990-EZ

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

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
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<tbody>
<tr>
<td>FORM 990, PART VI, SECTION B, LINE 11</td>
<td>THE 990 IS REVIEWED BY THE TREASURER AND EXECUTIVE DIRECTOR PRIOR TO BEING FILED. COPIES ARE AVAILABLE TO ALL MEMBERS OF THE BOARD UPON REQUEST.</td>
<td></td>
</tr>
<tr>
<td>FORM 990, PART VI, SECTION B, LINE 12C</td>
<td>ANY CONFLICTS ARE MANAGED DURING BOARD MEETINGS OR ACROSS EMAIL/TELEPHONE.</td>
<td></td>
</tr>
<tr>
<td>FORM 990, PART VI, SECTION C, LINE 19</td>
<td>THESE DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.</td>
<td></td>
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</tbody>
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