Return of Organization Exempt From Income Tax 2949323000402 8

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

Departm	ient	of t	he	Trea	asur
Internal	Rev	enu	e S	ervi	ce

Open to Public

inter	nal Revenue			990.	Inspection
<u>A</u>	For the 2	2016 calendar year, or tax year beginning SEPTEMBER 1 , 2016, and	d ending Al	JGUST 31	, 20 17
В	Check if a	pplicable C Name of organization U.SUKRAINE FOUNDATION		D Employ	er identification number
	Address cl	hange Doing business as			52-1778729
	Name cha	nge Number and street (or P O, box if mail is not delivered to street address)	E Telepho	ne number	
	Initial retur			202-789-4467	
	Final return/	terminated City or town, state or province, country, and ZIP or foreign postal code			
	Amended	return WASHINGTON, DC 20005-4905		G Gross re	eceipts \$ 599,886
	Application	pending F Name and address of principal officer NADIA K. McCONNELL, PRESID	ENT H(a) Is this	s a group return for	subordinates? Yes Vo No
	_	1090 VERMONT AVE NW- #600, WASHINGTON, DC 20005-4905	H(b) Are	all subordinate	s included? Tyes No
<u> </u>	Tax-exem	pt status	] <b>52</b> 7	f "No," attach a	a list (see instructions)
Ĵ	Website.	www.usukraine.org	H(c) Gro	oup exemption	number ▶
K	Form of org	ganization	of formation 19	91 M State	of legal domicile VA
Р	art I	Summary			
	1 E	Briefly describe the organization's mission or most significant activities:	BUILDING PEAC	E AND PRO	SPERITY BY
9	1	SUPPORTING DEMOCRACY, A FREE MARKET, AND HUMAN RIGHTS FOR UK			
Governance		DUCATION, TRAINING, INFORMATIONAL OUTREACH, AND PEOPLE-TO-PE			
ē	,	Check this box ▶☐ if the organization discontinued its operations or disp			its net assets.
õ	1			. 3	5
9	1	Number of independent voting members of the governing body (Part VI, II	ne 1b)	. 4	5
ies		otal number of individuals employed in calendar year 2016 (Part V, line 2		. 5	4
Activities &	1	otal number of volunteers (estimate if necessary)	·	. 6	20
Act		otal unrelated business revenue from Part VIII, column (C), line 12		. 7a	<u> </u>
	1	Net unrelated business taxable income from Form 990-T, line 34		. 7b	0
			Prio	r Year	Current Year
4	8 0	Contributions and grants (Part VIII, line 1h)	544,216	520,275	
Ž	1	Program service revenue (Part VIII, line 2g)		52,549	78,611
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		280	281
æ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	· •	86	719
	i .	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	12)	597,130	599,886
_	<del> </del>	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		290,793	133,525
		Benefits paid to or for members (Part IX, column (A), line 4)	·	230,733	0
'n	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-	10)	138,277	123,940
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	10)	130,211	0
ĕ			.512		内理等的 Table 为
X		Other expenses (Part IX, column (A), lines 17a-11a, 11f-24e)	<u>,512 (1963) 1964</u>	· <u> </u>	
			' •	167,605	175,387
	19 F	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 118 from line 112	·	<u>596,675</u>	432,852
		Teveride less expenses. Subtract interpolation interpolati	Beginning o	455 f Current Year	167,034 End of Year
ssets or	20 1	Total assets (Part X, line 16)	20330		
Asse	21 T	otal assets (Part X, line 16) OGDEN, U.T	· • <del> </del> -	255,445	392,453
Net As Fund B	22	Net assets or fund balances. Subtract line 21 from line 20	· • <del> </del>	127,223	97,197
_	art II	Signature Block	•	128,222	295,256
_					
		es of perjury, I declare that I have examined this return, including accompanying schedules a and complete. Declaration of preparer (other than officer) is based on all information of which			my knowledge and belief, it is
	<del></del>				11 / 0 4 / 0
Sig	n	Signature of officer	<del></del>	Date	11/2018
He	- 1	JOHN A. KUN VP/COO		Date	
пе	16				
		Type or print name and title  Print/Type preparer's name  Property syndature	Date	<del></del>	PTIN
Pa	id	Print/Type preparer's name Preparer's signature	Date	Check	<b>∟</b>
Pr	eparer			self-em	pioyed
Us	e Only			Firm's EIN ▶	
	. 4). 153	Firm's address		Phone no	
Ma	y the IRS	6 discuss this return with the preparer shown above? (see instructions) .	<u> </u>		Yes No
	Damamus	ark Dadu ation Act Nation, and the congrete instructions	O-4 N- 44000V		Form <b>990</b> (2016)

	0 (2016)	Page 2
art	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III	🗸
1	Briefly describe the organization's mission:	
	BUILDING PEACE AND PROSPERITY BY SUPPORTING DEMOCRACY, A FREE MARKET AND HUMAN RIGHTS FOR UKRAIN	E
		·····
		····
2	Did the organization undertake any significant program services during the year which were not listed on the	
	· —	s 🗹 No
2	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program	
3		s 🗸 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 m expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported.	easured by s to others,
4a	(Code: 01 ) (Expenses \$ 157,015 including grants of \$ 124,155 ) (Revenue \$ 53	,871)
	EDUCATION PROGRAM	
	PROVIDED EDUCATIONAL TRAINING PROGRAMS FOR 66 UKRAINIAN GOVERNMENT AND NGO LEADERS. PARTICIPAN	
	BENEFIT FROM 9-DAY TRAINING/EXCHANGE PROGRAMS IN THE US., WHICH ARE IMPLEMENTED BY THE FOUNDATION NETWORK OF U.S. COMMUNITY PARTNERS. GRANTS PROVIDED: \$70,392	
	EDUCATION GRANTS PROVIDE D TO 146 STUDENTS IN UKRAINE. GRANTS PROVIDED: \$49,513	
	EDUCATION GRANT PROVIDED TO ZHELDETS PUBLIC SCHOOL IN UKRAINE. GRANT PROVIDED: \$600	
	EDUCATION GRANT AWARDED TO CANADA UKRAINE FOUNDATION. GRANT AMOUNT: \$650	
	EDUCATION GRANT AWARDED TO UKRAINE GLOBAL SCHOLARS FOUNDATION. GRANT AMOUNT: \$3,000	
4b	(Code: 02 ) (Expenses \$ 91,693 including grants of \$ 0 ) (Revenue \$	0)
4b		
4b	(Code: 02 ) (Expenses \$ 91,693 including grants of \$ 0 ) (Revenue \$ INFORMATIONAL SERVICES PROGRAM	
4b	INFORMATIONAL SERVICES PROGRAM  CONDUCTED MEETINGS AND PRESENTATIONS FOR THE PUBLIC REGARDING UKRAINE'S DEMOCRACY AND THE CONT	0)
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9,370) (Revenue \$

\$ 296,346

Other program services (Describe in Schedule O.)
(Expenses \$ 12,468 including grants of \$
Total program service expenses ▶





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

Part	Checklist of Required Schedules (continued)		<del></del>	
20 -	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	No ✓
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	. ✓	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>√</b>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>√</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		<b>\</b>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501 (c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		<b>✓</b>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If</i> "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):	彩		a file
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓ ✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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,			
38	Part VI	37	1	<b>√</b>
		For	n 990	(2016)

Form **990** (2016)

art	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   4		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
b c	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
•	reportable gaming (gambling) winnings to prize winners?	1c	<b>-</b>	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	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?	3a		<b>✓</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b		
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>✓</b>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<del> </del>		<b>                                     </b>
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		<b></b>
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?	7c		}
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7</b> g		
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		
э a	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	<del> </del>	
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			l
11	Section 501(c)(12) organizations. Enter:			ľ
a b	Gross income from members or shareholders	1		ł
Б	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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
_	the organization is licensed to issue qualified health plans			
C 1/2	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
14a	If "Vos " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	<del> </del>	1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O contains a response or note to any line in this Part VI	dule O. Se	e ins	tructi	
Section	on A. Governing Body and Management				
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	5		Yes	No
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationsh any other officer, director, trustee, or key employee?	5 ip with	2		<b>1</b>
3	Did the organization delegate control over management duties customarily performed by or under the supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was file Did the organization become aware during the year of a significant diversion of the organization's asserted the organization have members or stockholders?	ts? .	5 6		√ √ √
b	one or more members of the governing body?	I .	7a 7b		<b>✓</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken the year by the following:	during			
a b 9	The governing body?	ohed at	8a 8b 9	<b>√</b>	<b>✓</b>
Secti	on B. Policies (This Section B requests information about policies not required by the Interna	ıl Reveni	ie C	ode.,	
		г	10	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	apters,	10a 10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		11a		
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to co		12a 12b		<b>✓</b>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If describe in Schedule O how this was done		12c		
13 14 15	Did the organization have a written whistleblower policy?	oval by	13 14		<b>✓</b>
a b	The organization's CEO, Executive Director, or top management official		15a 15b		<b>√</b>
16a	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 arrang with a taxable entity during the year?		16a		<b>✓</b>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluparticipation in joint venture arrangements under applicable federal tax law, and take steps to safeguorganization's exempt status with respect to such arrangements?	uate its ard the	16b		
	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-Tavailable for public inspection. Indicate how you made these available. Check all that apply.	·	501	(c)(3)s	only)
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, confinancial statements available to the public during the tax year.		erest	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's book		ords	: ▶	

Form	aan	1201	6)

Page 7

Part VII	Compensation of Officers, Directors	, Trustees,	Key Employees,	Highest	Compensated	Employees,	and
	Independent Contractors			-			

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization noi	any relate	d orga	aniz	atio	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	office or directo	unles	Pos neck ss pe	rson	than of the state	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) NADIA K. McCONNELL PRESIDENT (2) IRYNA KUROWYCKYJ	40	1		✓		ä		\$0	\$0	\$0
(3) WILLIAM GREEN MILLER DIRECTOR	2	<b>√</b>	<u> </u>				-	\$0 \$0	\$0 \$0	\$0 \$0
(4) JIM O'BEIRNE DIRECTOR	1	1						\$0	\$0	\$0
(5) RENATA ZAJAC DIRECTOR (6) JOHN A. KUN	40	1						\$0	\$0	\$0
VICE PRESIDENT/COO (7) MARKIAN BILYNSKYJ	40			✓		✓		\$38,430		\$0
VICE PRESIDENT (8)				<b>✓</b>				\$2,800	\$0	\$0
(9)										
(10)										
(11)				_						
(12)										
(13)							_			
(14)	<del> </del>									

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighe	st C	ompensated E	mployees (conti	nued)
					•	C) ition					
	(A)	(B)			neck	more	than o		(D)	(E)	(F)
	Name and title	Average hours per					ıs both or/trusi		Reportable compensation	Reportable compensation from	Estimated amount of
		week (list any				T		·	from	related	other
		hours for related	Individual trustee or director	stitu	Officer	Key employee	랑	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
		organizations	cto	tion		ᄬ	ye g	"	(W-2/1099-MISC)		organization
		below dotted line)	, ts	al tn		уее	ğ				and related organizations
		•	l ée	Institutional trustee			Highest compensated employee	ļ			
		_	<u> </u>	6	L		<u>8</u>				
(15)		ļ	1								
			<u> </u>		_	<u> </u>	<u> </u>	<u> </u>			ļ
(16)	······································										
(17)	<del></del>										
(17)			}					1	ł		i
(18)	<del></del>		-				_	-	<del></del>		
Y::Y:		† <del>-</del>									
(19)											
(20)											
			<u> </u>			Ĺ. <u>.</u>	ļ	<u> </u>			
(21)		ļ									
(0.0)		<del></del>	<u> </u>		_	_	ļ	-	ļ		<u></u>
(22)		ļ									
(22)					1	}—					
(23)		}	}	ļ	ļ	ļ	ļ			]	]
(24)		<del></del>	-	<del> </del>			-	┢		<del>-</del>	ļ
15-7/		<del> </del>	1								
(25)			$\vdash$				_	$\vdash$		<del></del>	
J		<del></del>	1		1		ĺ				
1b	Sub-total			•	•			<b>•</b>	\$41,230	0	9
C	Total from continuation sheets to Part				•			▶	0	<del></del>	(
	Total (add lines 1b and 1c)							<u> </u>	\$41,230		<u>`</u>
2	Total number of individuals (including but		d to th	ose	e list	ted	above	e) w		•	00 of
	reportable compensation from the organ	zation >	_						NONE		
3	Did the exampleation list any former of	ficer direc	tor c		ruct	00	kov.		aloveo or high	oct component	Yes No
3	Did the organization list any <b>former</b> of employee on line 1a? If "Yes," complete of							21111	noyee, or mgr	iest compensat	3 /
4	For any individual listed on line 1a, is the							n a	 and other comr	onsation from t	
•	organization and related organizations	areater th	an \$	150.	.000	)? [	f "Ye	s."	complete Sch	nedule J for su	ch
	ındividual										4 /
5	Did any person listed on line 1a receive of	r accrue co	ompe	nsat	tion	fro	m any	/ un	related organiz	zation or individu	
	for services rendered to the organization	? If "Yes," c	compl	ete	Sch	nedi	ule J i	for s	such person		5 ✓
Section	on B. Independent Contractors										
1	Complete this table for your five highest										
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	ne c	alend	lar y	year ending wit	h or within the c	organization's tax
	year.	<del></del>									
	(A) Name and business add	1000						ĺ	(B) Description of s		(C)
								<u> </u>	—————	ervices	Compensation
	NONE							⊬	<del></del>		
								-		-	
<del></del>								<del> </del> —	<del></del>		
2	Total number of independent contractor	ors (includir	na bi	ıt n	ot	limit	ed to	th	nose listed ab	ove) who	
-	received more than \$100,000 of compens								0		

Form **990** (2016)

Part	VIII	Statement of Reve				Dard V/III		
		Check if Schedule O	contains a re	sponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns	1a	4,472				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1b	0				
S, G	C	Fundraising events .	1c	0			i	
ar jit	d	Related organizations	3 1d	0				
iï i°	е	Government grants (con	tributions) 1e	90,838				
tion S	f	All other contributions, gi						
효		and similar amounts not inc		1-1,000				
a g	g	Noncash contributions include	ded in lines 1a-1f. \$					
	h	Total. Add lines 1a-1	<u>f</u>		520,275			
ا <u>و</u>				Business Code				
eve	2a	TRANSLATIONS PROF			50,571	50,571	0	0
e R	b	FEE INCOME TRAVEL		561000	4,740	4,740	0	0
Ş	C .	PROJECT ADMIN/OVE		561000	3,300	3,300		
Se	d	PROJECT ADMIN/OVE	RHEAD - ECO	561000	20,000	20,000	0	0
тап	e	All other program ser						
Program Service Revenue	t g	Total. Add lines 2a-2			78,611			
-	3	Investment income	(including divi	dends. interest.	70,011			
		and other similar armo		•	281			281
	4	Income from investmen	t of tax-exempt	bond proceeds ▶				
	5			_				
		,	(ı) Real	(II) Personal				
	6a	Gross rents	:					
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or	(loss)	>				
	7a	Gross amount from sales of	(i) Securities	(ii) Other			;	
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses .						ļ
	C	Gain or (loss)						
	d	Net gain or (loss) .		<u> ▶</u>				
venue	8a	Gross income from fu events (not including \$	undraising					
Other Re		of contributions reported See Part IV, line 18 .	ed on line 1c).	а			•	
₹		Less: direct expenses		b				
		Net income or (loss) f						
	9a	Gross income from gassee Part IV, line 19 .						
	_	· ·			- 1			
		Less: direct expenses Net income or (loss) f		b[				
	10a	Gross sales of ir						
	104	returns and allowanc		а	ļ			
	ь	Less: cost of goods s		<b>b</b>	1 1			
	c	Net income or (loss) f						
	<del>_ </del>	Miscellaneous F		Business Code				
	11a	UNREALIZED GAIN - S	SECURITIES	523000	719	·		
	ь			-				
	c							
	d	All other revenue .	· · · · ·					
	е	Total. Add lines 11a-	-11d	. <del> •</del>	719			
	12	Total revenue See i	netructione	<b>&gt;</b>	500 996	70 611		281

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX									
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21	70,392	70,392						
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0						
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	63,133	63,133						
4	Benefits paid to or for members	0	0						
5	Compensation of current officers, directors, trustees, and key employees	66,445	13,750	52,695	0				
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)	45,705	45,705	0	0				
7	Other salaries and wages	0	0	0	0				
8	Pension plan accruals and contributions (include				•				
_	section 401(k) and 403(b) employer contributions)	0	0	0	0				
9	Other employee benefits	1,891 9,900	0	1,891 9,900	0				
10 11	Payroll taxes	9,900		9,900					
ii a	Management	اه	o	o	0				
b	Legal	0[	0	0	0				
c	Accounting	4,285	0	4,285	0				
d	Lobbying	0	0	0	0				
е	Professional fundraising services. See Part IV, line 17	0			0				
f	Investment management fees	0	0	0-	0				
g	Other. (If line 11g amount exceeds 10% of line 25, column								
	(A) amount, list line 11g expenses on Schedule O.)	19,525	19,525	0	0				
12	Advertising and promotion	0	0	0	0				
13	Office expenses	18,185	2,650	8,593	6,942				
14	Information technology	0	0	0	0				
15	Royalties	32,347	0	32,347	0				
16 17	Occupancy	8,017	858	7,159	0				
18	Payments of travel or entertainment expenses	6,017		7,133					
	for any federal, state, or local public officials	0:	0	0	0				
19	Conferences, conventions, and meetings .	81,811	80,333	908	570				
20	Interest	11,216	0	11,216	0				
21	Payments to affiliates	0	0	0	0				
22	Depreciation, depletion, and amortization .	0	0	0	0				
23	Insurance	0	0	0	0				
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.)								
_	pry amounts not into 240 expenses on contedute of	0	0	0	0				
a b		0	0	0	0				
C		0	0	0	0				
d		0	0	0	0				
e	All other expenses	0	0	0	0				
25	Total functional expenses. Add lines 1 through 24e	432,852	296,346	128,994	7,512				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here    If following SOP 98-2 (ASC 958-720)								

۲	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Par	<u>t X</u>	<u> </u>	<u> </u>
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	106	1	106
	2	Savings and temporary cash investments	32,952	2	313,009
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	72,575	4	49,500
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.	į		
		Complete Part II of Schedule L	0'	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	0
ě	7	Notes and loans receivable, net		7	0
Assets	8	Inventories for sale or use	0	8	0
•	9	Prepaid expenses and deferred charges	4,365		3,128
	10a	Land, buildings, and equipment: cost or	4,500	3	3,120
		other basis. Complete Part VI of Schedule D 10a 0			
	h	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	145,447	11	26,710
	12	Investments—other securities. See Part IV, line 11	0		0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	255,445		392,453
	17	Accounts payable and accrued expenses	107,443	17	75,392
	18	Grants payable	0(	18	0
	19	Deferred revenue	15,451	19	16,484
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
S	22	Loans and other payables to current and former officers, directors,			
≝		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L	Ol	22	0
Ξ	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	4,329		5,321
	26	Total liabilities. Add lines 17 through 25	127,223	26	97,197
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets	(89,950)	27	86,518
Ba	28	Temporarily restricted net assets	- 0	28	81,503
פ	29	Permanently restricted net assets	218,172	29	127,235
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ŝ	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ğ	32	Retained earnings, endowment, accumulated income, or other funds.		32	
Se	33	Total net assets or fund balances	128,222	33	295,256
	34	Total liabilities and net assets/fund balances	255,445	34	392,453
				_	Form <b>990</b> (2016)

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Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u> </u>	<u>1</u>
1	Total revenue (must equal Part VIII, column (A), line 12)		599,8	<u> 36</u>
2	Total expenses (must equal Part IX, column (A), line 25)		432,8	<u>52</u>
3	Revenue less expenses. Subtract line 2 from line 1		167,0	34
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		128,2	<u>22</u>
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities		252,2	10
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain in Schedule O)		(252,24	0)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		295,2	<u> 56</u>
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	[	<u>]</u>
			Yes No	_
1	Accounting method used to prepare the Form 990. 🗌 Cash 📝 Accrual 🔲 Other			ı
	If the organization changed its method of accounting from a prior year or checked "Other," explain	n —		۲
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		✓	_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled of	r l		ı
	reviewed on a separate basis, consolidated basis, or both			ı
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	. 2b	<b>✓</b>	_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	a a		ı
	separate basis, consolidated basis, or both:	ļ		
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		<b>√</b>	_
	If the organization changed either its oversight process or selection process during the tax year, explain i	n		
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth i			
	the Single Audit Act and OMB Circular A-133?	· 3a	✓	_
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	4		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		_
		For	n <b>990</b> (20	(6)

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

Department of the Treasury

Internal Revenue Service

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 2016 Open to Public

Inspection

Name of the organization Employer identification number **U.S.-UKRAINE FOUNDATION** 52-1778729 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 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3% 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 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. h Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions), You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part							
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	ted below, p	lease comple	te Part III.)	
	on A. Public Support				- <del></del>		<del></del>
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	Í					
	include any "unusual grants.")	632,080	626,136	823,032	544,216	520,275	3,145,739
2	Tax revenues levied for the					ĺ	
	organization's benefit and either paid			,			
_	to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities	]		1		i	
	furnished by a governmental unit to the		!			ĺ	
	organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	632,080	626,136	823,032	544,216	520,275	3,145,739
5	The portion of total contributions by						
	each person (other than a	i					
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)	1					
6	Public support. Subtract line 5 from line 4	 					468,380
	on B. Total Support	<u> </u>					2,677,359
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	632,080	626,136	823,032	544,216		3,145,739
8	Gross income from interest, dividends,	302,000			<u> </u>		97.107.00
•	payments received on securities loans,		<b>!</b>				
	rents, royalties and income from similar		1		,	1	
	sources	357	263	353	280	281	1,534
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on	o	0	_ 0	o	o	o
10	Other income. Do not include gain or						
	loss from the sale of capital assets		,				,
	(Explain in Part VI.)	12,563	22,060	51,027	52,149	78,611	216,410
11	Total support. Add lines 7 through 10						3,363,683
12	Gross receipts from related activities, etc		•			12	186,609
13	First five years. If the Form 990 is for the	_		•	•		
	organization, check this box and stop he		<del></del>	<u>· · · · · · · · · · · · · · · · · · · </u>	· · · · ·	<u> </u>	· · <b>P</b> [_]
	on C. Computation of Public Suppor			4 1 (0)			
14	Public support percentage for 2016 (line					14	79.60 %
15 16a	Public support percentage from 2015 Sci 331/3% support test—2016. If the organ					15	77.55 %
104	box and <b>stop here.</b> The organization qua						
b	331/3% support test—2015. If the organi						
	this box and stop here. The organization	qualifies as a	publicly suppo	rted organizati	on		▶ 🗆
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the 'organization'	eets the "facts facts-and-circ	-and-circumst umstances" te	ances" test, ch	neck this box a zation qualifie:	and stop here.	. Explain in
b	10%-facts-and-circumstances test—2					6a 16b or 17	a and line
J	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization r						
	supported organization						▶ 🖺
18	Private foundation. If the organization di				ı, or 17b, chec	k this box and	see

Part						<del></del>	<del></del>
	(Complete only if you checked the						nder Part II.
Co od:	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part	II.) /	
	on A. Public Support dar year (or fiscal year beginning in)	(a) 2012	(h) 0012	(c) 2014	(4) 2015	1 (5) 2016	(f) Total
Calen	Gifts, grants, contributions, and membership fees	(a) 2012	<b>(b)</b> 2013	(6) 2014	(d) 2015	/(e) 2016	(i) Total
•	received. (Do not include any "unusual grants.")		1		1		
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the	\			/		
	organization's tax-exempt purpose	\			/		
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the				/		
	organization's benefit and either paid	\					1
	to or expended on its behalf				/		
5	The value of services or facilities						i
	furnished by a governmental unit to the organization without charge	\		/			
6	Total. Add lines 1 through 5			/	<del> </del>		
	Amounts included on lines 1, 2, and 3	<del></del>	<del>                                     </del>	/			<del></del>
	received from disqualified persons .					į	
b	Amounts included on lines 2 and 3			Í			
	received from other than disqualified						1
	persons that exceed the greater of \$5,000				•		
	or 1% of the amount on line 13 for the year			/		<u> </u>	
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)		, ^				
Secti	on B. Total Support		/		<u> </u>	<u> </u>	<u> </u>
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	(4) 2012	(2,2,3	(0/2011	(4) 2010	(0, 23.5	(1) 10.01
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	ļ	/				}
	royalties and income from similar sources .						
b	Unrelated business taxable income (less		/	\			
	section 511 taxes) from businesses acquired after June 30, 1975	1	ſ	·	(		[
_		<del>/</del>		<u> </u>	<del>\</del>	<del>  -</del>	<del></del>
С 11	Net income from unrelated business	<del></del>		<del></del>	<del>\</del>	<del></del>	<del></del>
•••	activities not included in line 10b, whether	/					
	or not the business is regularly carried on		ľ				ļ
12	Other income. Do not include gain or						
	loss from the sale of capital assets	/	}	}			}
	(Explain in Part VI.)	/					
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)					\	
14	First five years. If the Form 990 is for the organization, check this box and stop he	•		d, third, fourth	-	\	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2016 line						%_
16	Public support percentage from 20,15 Sci			<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>	16	%
	on D. Computation of Investment In			v line 12 notice	mp (6)	127	
17 18	Investment income percentage for 2016 ( Investment income percentage from 2019)						<del>%</del> %
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2016. If the organ						
.50	17 is not more than 331/3%, check this box						
b	331/3% support tests—2015/If the organization 18 is not more than 331/3%, check this	zation did not d	heck a box on	line 14 or line 1	19a, and line 1	6 is more than	331/3% and
20	Private foundation. If the organization d	•	_			· · · · · · · ·	, –
	- III ato Iouitadon ii diy olganizadon a	- not onoun a		,		hedule A (Form 99	

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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Part	Supporting Organizations (continued)	
		Yes No
11	Has the organization accepted a gift or contribution from any of the following persons?	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	
	below, the governing body of a supported organization?	11a
	A family member of a person described in (a) above?	11b
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  on B. Type I Supporting Organizations	11c
Secu	on b. Type I Supporting Organizations	Yes No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2
Secti	on C. Type II Supporting Organizations	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	Yes No
Secti	on D. All Type III Supporting Organizations	
		Yes No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3
Secti	on E. Type III Functionally Integrated Supporting Organizations	<del>'</del>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instructions).
a b c	<ul> <li>☐ The organization satisfied the Activities Test. Complete line 2 below.</li> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity.</li> </ul>	(see instructions).
2	Activities Test. Answer (a) and (b) below.	Yes No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard	3b

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7	<u> </u>	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	<u>1d</u>		
e Discount claimed for blockage or other		The state of the state of	11.00
factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		<b>3</b>
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		3
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
<ul> <li>7 Check here if the current year is the organization's first as a non-functionall instructions).</li> </ul>	y in	tegrated Type III supporting	ig organization (see

Part		) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4_	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7_	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
_10	Line 8 amount divided by Line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
_1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI). See instructions.			
_3_	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f_	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u> _	Applied to 2016 distributable amount			
<u>i</u> _	Carryover from 2011 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			,
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
C	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7			
a			•	
b	Excess from 2013			
C	Excess from 2014			
d	Excess from 2015		· · · · · · · · · · · · · · · · · · ·	
<u>e</u>	Excess from 2016			

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

### SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

OMB No. 1545-0047

U.SU	KRAINE FOUNDATION		52-1778729
Par	•		
	Complete if the organization answered	<del></del>	
	Total code classification	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		+
2	Aggregate value of contributions to (during year)		<del></del>
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	adverse in temples that the agents h	
5	Did the organization inform all donors and donor funds are the organization's property, subject to the		
_		_	
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the bene conferring impermissible private benefit?		
Dar	t II Conservation Easements.		· · · · · · · · · · Yes . No
rai	Complete if the organization answered	"Voe" on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the		•
	Preservation of land for public use (e.g., recrea		of a historically important land area
	Protection of natural habitat	·	- •
		Preservation C	of a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization his	old a qualified consequation contribute	on in the form of a consequation
2	easement on the last day of the tax year.	eld a qualified conservation contributi	Held at the End of the Tax Year
_			
a			
b	Total acreage restricted by conservation easement		
C	Number of conservation easements on a certified I Number of conservation easements included in		
d	historic structure listed in the National Register .	• •	l l
3	Number of conservation easements modified, tran		
J	tax year ►	sierred, released, extinguished, or ter	minated by the organization during the
4	Number of states where property subject to conse	nustion easement is located	
5	Does the organization have a written policy re		spection handling of
•	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec		<u> </u>
J		ting, handsing or violations, and officing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspectir	age handling of violations, and enforcing	conservation easements during the year
•	S	ig, harding or violations, and emoreing	oonservation easements during the year
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	of section 170(h)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports		
·	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easeme	<del>_</del>	
Pari	Organizations Maintaining Collection		r Other Similar Assets.
	Complete if the organization answered	•	
1a	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the t		
b	If the organization elected, as permitted under S	SFAS 116 (ASC 958), to report in its	revenue statement and balance shee
-	works of art, historical treasures, or other similar		
	public service, provide the following amounts relat		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art	, historical treasures, or other simila	ir assets for financial gain, provide the
-	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1 .	· · · · · · · · · · · · · · · · · · ·	
b	Assets included in Form 990, Part X		

P	a	7	۵	-

Part	III Organizations Maintaining	Colle	ctions of	Art, His	torical T	reasures,	or Ot	her Similar	Asse	ts (con	tinued)
3	Using the organization's acquisition, a collection items (check all that apply):	access	sion, and of	ther reco	ds, chec	k any of the	e follov	ving that are a	sign	ificant u	se of its
а	☐ Public exhibition			d	🗌 Loan	or exchang	e prog	rams			
b	☐ Scholarly research			е	Other	r <u></u>	<b></b> -				
С	☐ Preservation for future generations										
4	Provide a description of the organizat XIII.	ion's d	collections	and expla	iin how ti	hey further	the org	janization's ex	empt	purpos	e in Part
5	During the year, did the organization								nılar		
	assets to be sold to raise funds rather			ained as p	art of the	e organization	on's co	ellection? .	•	☐ Yes	☐ No
Part		_					_			_	_
	Complete if the organization	answ	ered "Yes	" on For	m 990, F	Part IV, line	9, or	reported an a	amou	unt on F	orm
	990, Part X, line 21.  Is the organization an agent, trustee,		diam ar ath		odiani fe	ar aantribut		other esects	t		
1a	included on Form 990, Part X?									□ <b>v</b> oo	□ No
ь	If "Yes," explain the arrangement in Pa						• •		•	∟ res	∐ No
b	ii 1es, explain the arrangement in Fa	ait Aiii	and compi	ete the lo	nowing to	abie.		<del></del>	Amo	unt	<del></del>
С	Beginning balance						10	<del></del>			
d	Additions during the year						10	<del></del>			
e	Distributions during the year						1e				
f	Ending balance						11				
2a	Did the organization include an amour						ıstodia	l account liabil	ity?	☐ Yes	☐ No
	If "Yes," explain the arrangement in Pa	art XIII.	. Check her	e if the ex	cplanatio	n has been	provid	ed on Part XIII		<u> </u>	
Par	Endowment Funds.										
	Complete if the organization									<del></del>	
		(a) C	urrent year	(b) Pri	or year	(c) Two years	s back	(d) Three years b	ack	(e) Four ye	ars back
1a	Beginning of year balance			<del>  -</del>					-		
b	Contributions										
С	Net investment earnings, gains, and losses			ł					1		
d	Grants or scholarships			<del> </del>		<del> </del>		<del></del>	-		<del></del>
e	Other expenditures for facilities and					ļ <u>.                                    </u>			-+		
J	programs										
f	Administrative expenses					<del> </del>				_	
g	End of year balance					-			_	<del>-</del>	
2	Provide the estimated percentage of t	he cur	rent year er	nd balanc	e (line 1g	, column (a)	) held	as.			
а	Board designated or quasi-endowmer	nt 🕨		%							
þ	Permanent endowment ▶	%									
C	Temporarily restricted endowment ▶		%								
_	The percentages on lines 2a, 2b, and										
за	Are there endowment funds not in the organization by:	e poss	ession of ti	ne organı	zation the	at are neld	and ad	iministered for	the	[T	
	•									$\overline{}$	es No
	(i) unrelated organizations (ii) related organizations								•	3a(i) 3a(ii)	
ь	If "Yes" on line 3a(ii), are the related or								•	3b	
4	Describe in Part XIII the intended uses						• •		•	OD	
Part											
	Complete if the organization			on For	m 990, F	Part IV, line	11a.	See Form 99	0, Pa	art X, lir	ie 10.
	Description of property		(a) Cost or o (investm			or other basis other)		Accumulated epreciation		(d) Book	/alue
1a	Land	.									
b	Buildings	.							<u> </u>		<del></del>
С	Leasehold improvements	. [									
d	Equipment	. [									
e	Other										
Total.	Add lines 1a through 1e. (Column (d) n	nust ed	qual Form 9	90, <u>Part 2</u>	(, columr	n (B), line_10	c.) .	▶	l		

Part VII	Investments—Other Securities.	vorad "Vaa"	on For	m 000 Bort IV lin	a 11h Saa Farm	000 Bort V line 12
	Complete if the organization answ	vered res	ON FOR			
	(a) Description of security or category (including name of security)			(b) Book value		hod of valuation -of-year market value
(1) Financia	derivatives	<del></del>				
(2) Closely-I	neld equity interests		[			
(3) Other						
(A)	·			<u></u>		
(B)	·					
(C)		·	. <b></b>	. <u></u>	<u> </u>	
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Column (	b) must equal Form 990, Part X, col. (B) line 12.) ▶					
Part VIII	Investments-Program Related					
	Complete if the organization answ	vered "Yes"	on For	m 990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
-	(a) Description of investment	<del></del> -		(b) Book value		thod of valuation -of-year market value
(1)						
(2)						
(3)						
(4)		<del></del>				
(5)	<del></del>					· · · · · · · · · · · · · · · · · · ·
(6)						
(7)			-			
(8)						
(9)		<del></del>				
	b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX	Other Assets.					
	Complete if the organization ansv	vered "Yes"	on For	m 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(a)	Description				(b) Book value
(1)						
(2)		·· <del>···</del>				
(3)						
(4)						
(5)				·		
(6)						
(7)						
(8)						
(9)		<u>-</u>				
Total. (Colu	mn (b) must equal Form 990, Part X, co	ol. (B) line 15.)	·		>	
Part X	Other Liabilities.					
	Complete if the organization ansv	vered "Yes"	on For	m 990, Part IV, lin	e 11e or 11f. See	e Form 990, Part X,
	line 25					
1.	(a) Description of liability	<b>(b)</b> Boo	k value			
(1) Federal II	ncome taxes			1,284		
(2) FICA				2,565		
(3) STATE	WITHHOLDINGS			960		
<sup>(4)</sup> 401(K) J				512		
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Column	b) must equal Form 990, Part X, col. (B) line 25.)			5,321		
	r uncertain tax positions. In Part XIII, provid					
organization'	s liability for uncertain tax positions under	FIN 48 (ASC 7	40). Che	ck here if the text of t	the footnote has bee	en provided in Part XIII 🔲

Part	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990,			Return.	
1	Total revenue, gains, and other support per audited financial statements			1 1	52 126
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			<u></u>	352,126
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	0 252,240		
	Recoveries of prior year grants				
c d	Other (Describe in Part XIII.)		0	l l	
	Add lines 2a through 2d				
3	Subtract line 2e from line 1			<del></del>	252,240
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	$\mathbf{i}$			99,886
4		100			
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part VIII.)		0		
b	Other (Describe in Part XIII.)		<u> </u>	<del></del>	_
с 5	Add lines <b>4a</b> and <b>4b</b>	12)		4c	0
	XII Reconciliation of Expenses per Audited Financial Stater				99,886
rait	Complete if the organization answered "Yes" on Form 990,			i neturii.	
1	Total expenses and losses per audited financial statements			1 .	85,092
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				065,092
a	Donated services and use of facilities	2a	252,240		
b	Prior year adjustments	2b	0	1	
	Other losses	<del></del>	0		
d	Other (Describe in Part XIII.)		0		
	Add lines 2a through 2d				252,240
3	Subtract line 2e from line 1				132,852
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i i			32,032
-	Investment expenses not included on Form 990, Part VIII, line 7b	42	0		
b	Other (Describe in Part XIII.)		0		
	Add lines <b>4a</b> and <b>4b</b>		<u>~</u>	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, III	ne 18.) .			132,852
Part	XIII Supplemental Information.				.02,002
2; Part	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a ar XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI-OTHER LIABILITIES  ITIES HAVE BEEN INCLUDED IN AUDITED FINANCIAL STATEMENTS. AMOUNCE JURISDICTIONS AS REQUIRED.	t to prov	vide any additional in	formation.	

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

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

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

	or the organization				Cinbi	oyer identification number
	JKRAINE FOUNDATION					52-1778729
Par	General Information Form 990, Part IV, line		es Outside	the United States. Comp	olete if the organizatio	n answered "Yes" on
1	For grantmakers. Does the		maintain reco	ords to substantiate the am	ount of its grants and	other
•	assistance, the grantees' elig	gibility for the	e grants or as	ssistance, and the selection	criteria used to awa	rd the
	grants or assistance?					
2	For grantmakers. Describe assistance outside the Unite		the organizati	ion's procedures for monit	toring the use of its	grants and other
_3	Activities per Region. (The fo	llowing Part	l, line 3 table	can be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d a program service, describe specific type service(s) in the regio	expenditures for of and investments
(1)	UKRAINE	1	4	PROGRAM SERVICES	GRANTS - STUDENTS	\$ 49,513
(2)	UKRAINE			PROGRAM SERVICES	GRANTS - ORGANIZA	TIONS \$ 9,970
(3)	UKRAINE			PROGRAM SERVICES	DEMOCRACY PROJE	CTS \$ 6,373
(4)	CANADA			PROGRAM SERVICES	GRANT - ORGANIZAT	ION \$ 650
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)		ļ				
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Sub-total	1	4			\$ 66,506
b	Total from continuation sheets to Part I	0	0			0

c Totals (add lines 3a and 3b)

\$ 66,506

Schedule F (Form 990) 2016

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (i) Method of valuation (book, FMV, appraisal, other) FΜ< (h) Description of noncash assistance \$ 307 RENTAL SPACE Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance (f) Manner of cash disbursement \$ 7,870 BANK WIRES (e) Amount of cash grant **GENERAL SUPPORT** (d) Purpose of grant (c) Region UKRAINE (b) IRS code section and EIN (if applicable) (a) Name of organization Part II (OE) 3 2 33 ₹ 4 15 (16) <u>N</u> ල <u>4</u> Û 9 8 6 ®

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 Enter total number of other organizations or entities

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Schedule F (Form 990) 2016

Schedule F (Form 990) 2016

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

Part III can be duplicated if additional space is needed.

SO WA NVA	er of (d) Amou
	146 \$ 49,513 WIRES/CASH PAYM
	a de la companya de l
	:

Page	4

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	☐ 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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	Ø No

	•	•
Part V		Supp

Supp	lemen	tal	Info	rmation

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART 1 - MONITORING OF GRANT FUNDS - THE FOUNDATION USES ITS STAFF TO MONITOR FUNDS IN UKRAINE (FUNDS WIRED FROM
THE U.S.) CONTACT WITH RECIPIENT ORGANIZATIONS IS MAINTAINED TO ASSURE PROPER PROGRAM USE OF FUNDS.
IN UKRAINE, ALL CASH DISBURSEMENTS FROM THE FOUNDATION REQUIRE SIGNATURES FROM PERSONS RECEIVING CASH AS WELL
AS FROM INDIVIDUALS PROVIDING CASH. ALL SUPPORTING DOCUEMNTS ARE SUBMITTED TO THE FOUNDATION IN THE U.S. ON A
MONTHLY BASIS, AS PART OF AN OVERAL FINANCIAL REPORT. WHEN CONTRACTORS OR AGENTS FOR THE FOUNDATION ARE USED
THE REQUIREMENTS , AS INDICATED ABOVE, ARE ALSO FOLLOWED.
PART I, II, III - ACCOUNTING METHOD - THE FOUNDATION USES THE ACCRUAL METHOD OF ACCOUNTING.

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Open to Public Inspection

Employer identification number

% □ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance 2 0 ✓ Yes EDUCATIONAL 52-1778729 **EDUCATIONAL** EDUCATIONAL **EDUCATIONAL EDUCATIONAL** EDUCATIONAL **EDUCATIONAL EDUCATIONAL EDUCATIONAL** EDUCATIONAL Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. . (g) Description of noncash assistance . ă Z Z ¥ Ν Š Ν (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. \$0 N/A \$0 N/A \$0 N/A \$0 NA \$0 N/A \$0 N/A \$0 N/A \$0 N/A \$0 N/A \$0 N/A (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table \$7,910 \$6,693 \$7,584 \$7,424 \$7,382 \$7,002 \$6,541 \$3,000 (d) Amount of cash \$7,876 \$11,980 grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance For Paperwork Reduction Act Notice, see the Instructions for Form 990. 75-6001909 47-0390618 47-0390618 16-0877269 81-0847939 77-0380517 85-0196904 85-0196904 43-1727811 31-1204552 (b) EIN (7) HEARTLAND FAMILY SERVICES (8) ROCHESTER GLOBAL CONNEC (9) CINN-KHARKIV SISTER CITY PAI 23 LILAC CT, CAMBRIDGE, MA 02141 (5) SANTA FE COUNCIL INT'L RELA 200 W BROADWAY, LOUISVILLE, KY 575 MT HOPE AVE, ROCHESTER, NY 441 VINE ST, SUITE #3620, CINN, OH 10) UKRAINE GLOBAL SCHOLARS 1 (a) Name and address of organization (4) WORLD AFFAIRS COUN KY/IN 413 GRANT AVE #D, SANTA FE,NM 2101 S. 42nd STREET, OMAHA, NE (1) BIRMINGHAM SISTER CITIES 30 WEST PERSHING RD, KC, MO 911 NW LOOP 281, KILGORE, TX 701 N 20th ST, BIRMINGHAM, AL PO BOX 580253, MODESTO, CA (3) KILGORE COLLEGE SBDC (2) MODESTO SISTER CITIES J.S.-UKRAINE FOUNDATION (6) GLOBAL TIES KC Partl Part II N 2

Schedule I (Form 990) (2016)

Cat. No. 50055P

Part III	Grants and Other Assistance to Domestic Part III can be duplicated if additional space		als. Complete if the I.	organization answ	Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. is needed.	Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-						
2						
က						
4						
5						
9						
7						
Part IV	Supplemental Information. Provide the Information required in Part I, line 2; Part III, column (b); and any other additional information	the information re	equired in Part I, Iin	e 2; Part III, columr	(b); and any other additi	onal information.
PART I - LINE 2	NE 2					
GRANT FU	GRANT FUNDS ARE DISBURSED FOLLOWING THE SIGNING OF A GRANT AGREEMENT THAT OUTLINES TIME, ACTIVITY AND BUDGET PARAMETERS. THE GRANTEE MUST SUBMIT	IING OF A GRANT A	GREEMENT THAT OU	TLINES TIME, ACTIVIT	Y AND BUDGET PARAMETER	S. THE GRANTEE MUST SUBMIT
NARRATIV	NARRATIVE AND FINANCIAL REPORTS FOLLOWING THE CONCLUSION OF THE GRANT PERIOD. COPIES OF RECEIPTS AND OTHER FINANCIAL DOCUMENTATION MUST BE	E CONCLUSION OF	THE GRANT PERIOD.	COPIES OF RECEIPT	S AND OTHER FINANCIAL DO	CUMENTATION MUST BE
SUBMITTE	SUBMITTED TO SUBSTANTIATE GRANT EXPENSES. ANY CASH DISBURSEMENTS BY THE GRANTEE MUST BE DOCUMENTED WTIH SIGNATURES.	NY CASH DISBURSI	EMENTS BY THE GRA	NTEE MUST BE DOCU	MENTED WTIH SIGNATURES	
1						
		1				
						Schedule I (Form 990) (2016)

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

## Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

U.SUKRAINE FOUNDATION	52-1778729
FORM 990 - PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	
4d - CODE 04 - EXPENSES: \$10,868 - GRANTS: \$7,870 - REVENUES: \$0	
PUBLIC POLICY PROGRAM	
SUPPORT FOR FRIENDS OF UKRAINE NETWORK INITIATIVE, AN ACTIVITY BRINGING TOGETHER SO	HOLARS AND EXPERTS ON UKRAINE
TO REVIEW U.S. POLICIES RELATING TO UKRAINE AND TO RECOMMEND POSSIBLE CHANGES. FIR	NANCIAL SUPPORT ALSO FOR THE
PYLYP ORLYK INSITTUTE FOR DEMOCRACY, A PUBLIC POLICY ORGANIZATON IN KYIV, UKRAINE, V	WHICH ASSISTS UKRAINIAN POLICY
MAKERS IN DEMOCRACY-BUILDING EFFORTS.	
4d - CODE 05 - EXPENSES: \$1,600 - GRANTS: \$1,500 - REVENUES: \$0	
HEALTH CARE & HUMANITARIAN AID PROGRAM	·
SUPPORT FOR HUMANITARIAN AID THROUGH AN ORGANIZATION IN KHARKIV, UKRAINE.	
FORM 990 - PART VI - SECTION B. POLICIES	***************************************
LINE 11b - THE FOUNDATION PROVIDES THE 990 FORM AND SCHEDULES TO THE FOUNDATION'S I	BOARD OF DIRECTORS. TIME IS
ALLOWED TO REVIEW THESE DOCUMENTS AT THE ANNUAL BOARD MEETING.	
FORM 990 - PART VI - SECTION C. DISCLOSURE	***************************************
LINE 19 - THE FOUNDATION MAKES ITS PUBLIC DOCUMENTS AVAILABLE ONLINE AT: https://www.t	sukraine.org/reports/.
THE FOUNDATION MAKES ITS PUBLIC DOCUMENTS AVAILABLE UPON DEMAND. THROUGH ITS NE	WSLETTER, THE FOUNDATION
NOTIFIES ITS SUPPORTERS THAT THESE PUBLIC DOCUMENTS ARE AVAILABLE.	
FORM 990 - PART XI - RECONCILIATION OF NET ASSETS	
LINES 6,9 - DONATED SERVICES OF \$252,240 AS REVENUE ARE EXPENSED BY THE SAME AMOUNT	IN ORDER TO HAVE NO
IMPACT ON NET ASSETS. THIS IS CONFIRMED BY SCHEDULE D, PART XI AND PART XII (RECONCIL	IATION OF REVENUE AND
EXPENSES).	