

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 07-01-2016, and ending 06-30-2017

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final
 Return/terminated
 Amended return
 Application pending

C Name of organization
ALLIANCE DEFENDING FREEDOM

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
15100 N 90TH ST

City or town, state or province, country, and ZIP or foreign postal code
SCOTTSDALE, AZ 85260

D Employer identification number
54-1660459

E Telephone number
(480) 444-0020

G Gross receipts \$ 55,669,426

F Name and address of principal officer
MICHAEL P FARRIS
15100 N 90TH ST
SCOTTSDALE, AZ 85260

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW.ALLIANCEDEFENDINGFREEDOM.ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1993 **M** State of legal domicile VA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
ADF IS COMMITTED TO TRANSFORMING LAW AND CULTURE SO TRUE FREEDOM CAN FLOURISH

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

3 Number of voting members of the governing body (Part VI, line 1a)	12
4 Number of independent voting members of the governing body (Part VI, line 1b)	12
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	293
6 Total number of volunteers (estimate if necessary)	689
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	50,007,910	50,199,237
9 Program service revenue (Part VIII, line 2g)	0	0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	52,122	91,634
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,477,659	883,081
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	51,537,691	51,173,952
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7,623,451	3,350,128
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	23,651,174	23,917,255
16a Professional fundraising fees (Part IX, column (A), line 11e)	2,461,012	2,798,578
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 8,389,104		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	23,910,768	20,238,686
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	57,646,405	50,304,647
19 Revenue less expenses Subtract line 18 from line 12	-6,108,714	869,305

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	32,795,628	34,851,845
21 Total liabilities (Part X, line 26)	4,638,805	5,255,737
22 Net assets or fund balances Subtract line 21 from line 20	28,156,823	29,596,108

Part II Signature Block

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

Sign Here

Signature of officer
Date 2018-05-15

WAYNE SWINDLER EXEC VP OF FINANCE & ADMIN
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name JACQUELINE ECKMAN	Preparer's signature JACQUELINE ECKMAN	Date	Check <input type="checkbox"/> if self-employed	PTIN P01300648
Firm's name ▶ CLIFTONLARSONALLEN LLP			Firm's EIN ▶ 41-0746749	
Firm's address ▶ 20 E THOMAS RD STE 2300 PHOENIX, AZ 85012			Phone no (602) 266-2248	

Part III 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
 TO KEEP THE DOORS OPEN FOR THE GOSPEL BY ADVOCATING FOR RELIGIOUS FREEDOM, SANCTITY OF LIFE, AND MARRIAGE AND THE FAMILY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 15,151,719 including grants of \$ 0) (Revenue \$ 0)
 See Additional Data

4b (Code) (Expenses \$ 11,407,438 including grants of \$ 0) (Revenue \$ 0)
 See Additional Data

4c (Code) (Expenses \$ 7,585,466 including grants of \$ 1,221,839) (Revenue \$ 0)
 See Additional Data

(Code) (Expenses \$ 3,231,979 including grants of \$ 2,128,289) (Revenue \$ 0)
 GRANTS AND FUNDING ADF PROVIDES GRANT FUNDING FOR LEGAL CASES AND PROGRAMS THAT KEEP THE DOOR OPEN FOR THE GOSPEL BY ADVOCATING FOR RELIGIOUS LIBERTY, THE SANCTITY OF LIFE, AND MARRIAGE AND FAMILY THIS GRANT FUNDING COVERS EXPENSES FOR LITIGATION, INCLUDING TRAINING FOR EXPERT WITNESSES AND ACQUIRING STRONG AMICUS BRIEF SUPPORT FOR OUR CASES TO ENSURE THE BEST POSSIBILITY OF SUCCESS GRANT REQUESTS ARE REVIEWED AND RECOMMENDED BY AN INDEPENDENT GRANTS AND REVIEW COMMITTEE, WHICH IS COMPRISED OF EXPERT VOLUNTEER ATTORNEYS UNDER THE GOVERNING BOARD OF DIRECTOR'S POLICY, NO GRANT IS AWARDED UNTIL IT IS FULLY FUNDED AND SET ASIDE IN SELF-DESIGNATED ACCOUNTS GRANTS ARE DISBURSED UPON PERFORMANCE AND IN ACCORDANCE WITH THE TERMS OF THE GRANT AGREEMENTS AS OF THIS WRITING, ADF HAS ISSUED MORE THAN 3,100 GRANTS TOTALING OVER \$46 MILLION

4d Other program services (Describe in Schedule O)
 (Expenses \$ 3,231,979 including grants of \$ 2,128,289) (Revenue \$ 0)

4e Total program service expenses 37,376,602

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	Yes	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	Yes	
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [X]

Table with columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, charitable contributions, and organizational details.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (12), 1b (12), 2, 3, 4, 5, 6, 7a, 7b, 8, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 (List the States...), 18 (Section 6104 requires...), 19 (Describe in Schedule O...), 20 (State the name, address, and telephone number...).

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

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

Table with columns (A) Name and Title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, and (F) Estimated amount of other compensation.

Summary rows: 1b Sub-Total, 1c Total from continuation sheets to Part VII, Section A, 1d Total (add lines 1b and 1c)

Table 2: Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization. Includes questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

Table with columns (A) Name and business address, (B) Description of services, and (C) Compensation. Lists contractors like MASTERWORKS, ALANIZ METRO GROUP, NAHAN PRINTING INC, etc.

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	40,000				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	50,159,237				
	g Noncash contributions included in lines 1a-1f \$ _____		1,365,498				
	h Total. Add lines 1a-1f			50,199,237			
Program Service Revenue	2a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		17,697			17,697	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
			6,921				
		b Less rental expenses	0				
		c Rental income or (loss)	6,921				
	d Net rental income or (loss)			6,921		6,921	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			4,569,411				
		b Less cost or other basis and sales expenses	4,495,474				
		c Gain or (loss)	73,937				
	d Net gain or (loss)			73,937		73,937	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities See Part IV, line 19	a						
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code						
11a COURT AWARDED FEES	900099	434,166			434,166		
b MISCELLANEOUS	900099	285,155			285,155		
c HONORARIA	900099	156,839			156,839		
d All other revenue							
e Total. Add lines 11a-11d			876,160				
12 Total revenue. See Instructions			51,173,952	0	0	974,715	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	1,221,839	1,221,839		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	958,537	958,537		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	1,169,752	1,169,752		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	3,038,572	1,769,741	701,436	567,395
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	143,608	71,455	72,153	
7 Other salaries and wages.	16,569,024	13,741,505	1,286,060	1,541,459
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	443,129	374,451	35,914	32,764
9 Other employee benefits.	2,082,511	1,627,678	230,712	224,121
10 Payroll taxes.	1,640,411	1,353,796	138,622	147,993
11 Fees for services (non-employees)				
a Management.	844,245	481,835	103,768	258,642
b Legal.	230,885	209,356	20,161	1,368
c Accounting.	49,848	-309	50,261	-104
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.	2,798,578			2,798,578
f Investment management fees.	74,654	9,351	64,893	410
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	672,779	595,442	10,132	67,205
12 Advertising and promotion.	7,826,197	5,736,873	597,257	1,492,067
13 Office expenses.	1,344,385	1,084,240	105,179	154,966
14 Information technology.	952,874	642,533	204,099	106,242
15 Royalties.				
16 Occupancy.	2,060,232	1,471,249	315,761	273,222
17 Travel.	3,128,460	2,688,535	93,179	346,746
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	2,335,117	1,744,644	272,289	318,184
23 Insurance.	177,264	132,692	19,026	25,546
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.)				
a FINANCIAL SERVICES	196,687	8,454	186,878	1,355
b RESOURCE MATERIALS	195,204	177,118	12,876	5,210
c PROFESSIONAL DUES	111,289	84,206	16,423	10,660
d				
e All other expenses	38,566	21,629	1,862	15,075
25 Total functional expenses. Add lines 1 through 24e.	50,304,647	37,376,602	4,538,941	8,389,104
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	7,082,438	5,195,612	468,940	1,417,886

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,596,947	1	3,554,860
	2 Savings and temporary cash investments	8,977,108	2	9,650,174
	3 Pledges and grants receivable, net	233,047	3	279,501
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	23,240	8	25,700
	9 Prepaid expenses and deferred charges	1,165,151	9	1,996,348
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	29,643,984		
	b Less accumulated depreciation	13,939,922		
	11 Investments—publicly traded securities	2,135,954	11	2,127
	12 Investments—other securities See Part IV, line 11	1,771,983	12	-140,209
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	304,208	15	3,779,282
16 Total assets. Add lines 1 through 15 (must equal line 34)	32,795,628	16	34,851,845	
Liabilities	17 Accounts payable and accrued expenses	3,865,412	17	4,111,558
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	773,393	25	1,144,179
	26 Total liabilities. Add lines 17 through 25	4,638,805	26	5,255,737
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	25,909,128	27	27,418,939
	28 Temporarily restricted net assets	2,247,695	28	2,177,169
	29 Permanently restricted net assets		29	
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	28,156,823	33	29,596,108
	34 Total liabilities and net assets/fund balances	32,795,628	34	34,851,845

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	51,173,952
2	Total expenses (must equal Part IX, column (A), line 25)	2	50,304,647
3	Revenue less expenses Subtract line 2 from line 1	3	869,305
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28,156,823
5	Net unrealized gains (losses) on investments	5	-51,478
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	697,603
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-76,145
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	29,596,108

Part XII Financial Statements and Reporting

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

	Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>		
<p>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 or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>		No
<p>b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	Yes	
<p>c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O</p>	Yes	
<p>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</p>		No
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</p>		

Additional Data

Software ID:

Software Version:

EIN: 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

Form 990 (2016)

Form 990, Part III, Line 4a:

LEGAL ADVOCACY ALLIANCE DEFENDING FREEDOM (ADF) IS AN ALLIANCE-BUILDING LEGAL ORGANIZATION THAT ADVOCATES FOR THE RIGHT OF PEOPLE TO FREELY LIVE OUT THEIR FAITH ADF CHAMPIONS GOD-GIVEN FREEDOMS THAT ALLOW FOR HUMAN FLOURISHING WHILE AFFIRMING THE DIGNITY OF EVERY PERSON ADF EXISTS TO FACILITATE AN ALLIANCE OF LIKE-MINDED INFLUENCERS FROM EVERY SPHERE OF THE PUBLIC SQUARE AFFECTING LAW AND CULTURE, AND TO MOBILIZE THIS ALLIANCE TO PROTECT THE CORE VALUES OF RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND MARRIAGE AND FAMILY ADF OFFERS EXCEPTIONAL LEGAL ADVOCACY AND EXPERTISE THROUGH OUR 62 ATTORNEYS BASED OUT OF ADF HEADQUARTERS IN ARIZONA, AS WELL AS OFFICES IN GEORGIA, WASHINGTON D C , AND AROUND THE WORLD TOGETHER WITH A NETWORK OF 3,200-STRONG ALLIED ATTORNEYS, ADF HAS A NEARLY 80% SUCCESS RATE IN OUR CASES, AND HAS ACHIEVED SEVEN DIRECT LEGAL ADVOCACY VICTORIES AT THE U S SUPREME COURT ADF WORKS WITH OVER 1000 ALLIED ORGANIZATIONS TO CREATE EFFECTIVE STRATEGIES FOR ESTABLISHING CRITICAL LEGAL PRECEDENTS TO PRESERVE RELIGIOUS LIBERTY IN STATE COURTS, FEDERAL COURTS, AND THE SUPREME COURT, AS WELL AS INTERNATIONAL COURTS AND GOVERNING BODIES INCLUDING THE EUROPEAN COURT OF HUMAN RIGHTS AND THE UNITED NATIONS ADF SERVES OUR NETWORK OF ALLIES BY PROVIDING TRAINING, COORDINATION, FUNDING, LEGAL EXPERTISE, AND LITIGATION SERVICES IN SUPPORT OF OUR ALLIED ATTORNEYS, CHURCH AND PARACHURCH ORGANIZATION LEADERS, LEGISLATORS AND LEGISLATIVE STAFF MEMBERS, BUSINESS LEADERS, CLIENTS, STUDENT LEADERS, AND OTHER KEY ALLIES

Form 990, Part III, Line 4b:

PUBLIC EDUCATION ADF PROVIDES INFORMATION TO THE PUBLIC REGARDING THE IMPORTANCE OF GOVERNMENT RECOGNITION OF FREEDOM OF RELIGION, THE SANCTITY OF EVERY HUMAN LIFE, AND THE VALUES OF MARRIAGE AND FAMILY IN THE UNITED STATES AND THROUGHOUT THE WORLD THIS IS DONE THROUGH THE USE OF PRINTED MATERIALS, MAILINGS, EMAIL ALERTS, WEBSITES, BLOGS, OP-EDS, SOCIAL MEDIA, WEBINARS, MEDIA AND PERSONAL APPEARANCES, AND EVENTS THE INTENT OF ADF PUBLIC EDUCATION IS TO INFORM AND RAISE AWARENESS OF THE FOLLOWING THE INTENT OF THE FOUNDERS OF THE CONSTITUTION OF THE UNITED STATES AND THE BILL OF RIGHTS TO REFLECT NATURAL LAW, ENTITIES THAT SEEK TO DISTORT OR REPURPOSE THE CONSTITUTION'S ORIGINAL MEANING, U S AND INTERNATIONAL CHALLENGES TO RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND FAMILY VALUES, AND HOW AND WHERE CIVIL LIBERTIES HAVE BEEN JEOPARDIZED OR THWARTED AND THE EFFORTS OF ADF AND ITS ALLIES TO RECLAIM THOSE FREEDOMS ADF PUBLIC EDUCATION EFFORTS ALSO SERVE TO RECRUIT POTENTIAL ALLIES AND TO HIGHLIGHT THE ADVOCACY WORK OF THE ALLIANCE IN ORDER TO POSITION OURSELVES TO SERVE AS THE FIRST LINE OF DEFENSE FOR INDIVIDUALS AND ORGANIZATIONS WHOSE RELIGIOUS FREEDOM IS AT RISK ADF ALSO REQUESTS THAT THE RECIPIENTS OF THESE EDUCATIONAL COMMUNICATIONS REMEMBER ITS ACTIVITIES IN PRAYER AND PROVIDES INFORMATION AND DETAILS TO ASSIST THEM IN INTENTIONAL AND PURPOSEFUL PRAYER

Form 990, Part III, Line 4c:

ALLIED SUPPORT AND TRAINING AS AN ALLIANCE-BUILDING LEGAL ORGANIZATION THAT ADVOCATES FOR THE RIGHT OF PEOPLE TO FREELY LIVE OUT THEIR FAITH, ALLIANCE DEFENDING FREEDOM (ADF) IS COMMITTED TO EQUIPPING ALLIES TO DEFEND AND PROMOTE RELIGIOUS LIBERTY TO THE BEST OF THEIR ABILITY, AND TO TRANSFORM LAW AND CULTURE SO TRUE FREEDOM CAN FLOURISH TO THIS END, ADF OFFERS WORLD-CLASS TRAINING FOR CHRISTIAN ATTORNEYS AND PROFESSIONALS, FOR LAW STUDENTS, AND FOR COLLEGE STUDENTS INTERESTED IN PURSUING A CAREER IN LAW, PUBLIC POLICY, GOVERNMENT, BUSINESS, AND OTHER CULTURE-SHAPING FIELDS THROUGH THE ADF SUMMIT ON RELIGIOUS LIBERTY, PRACTICING ATTORNEYS, LEGAL ADVOCATES, BUSINESS LEADERS, ENTREPRENEURS, CLERGY, POLICY LEADERS, AND MEDIA LEADERS ARE INVITED TO PARTICIPATE IN WORLD-CLASS TRAINING, STRATEGY, AND NETWORKING SESSIONS AROUND THE WORLD MORE THAN 2,042 U S AND INTERNATIONAL ATTORNEYS HAVE COMPLETED THE ADF RELIGIOUS LIBERTY SUMMIT TRAINING, AND 3,214 ADF ALLIED ATTORNEYS HAVE VOLUNTEERED PRO BONO LEGAL ADVOCACY SERVICES TO LOCAL AND INTERNATIONAL COMMUNITIES VALUED AT OVER \$206 MILLION THIS AMOUNT IS FAR IN EXCESS OF THE COST OF THE PROGRAM MOST U S STATE BARS ACCEPT ACCREDITATION FOR PORTIONS OF THE LEGAL ADVOCACY TRAINING WITH CONTINUING LEGAL EDUCATION CREDIT THROUGH THE BLACKSTONE LEGAL FELLOWSHIP, ADF PROVIDES TRAINING TO TOP CHRISTIAN LAW STUDENTS FROM AROUND THE WORLD ON NATURAL LAW, CONSTITUTIONAL JURISPRUDENCE, AND THE HISTORY OF RELIGIOUS LIBERTY SUBJECTS THAT CURRENTLY SUFFER MUCH NEGLECT IN PROMINENT LAW PROGRAMS ACROSS THE UNITED STATES AND INTERNATIONALLY THE BLACKSTONE LEGAL FELLOWSHIP EQUIPS THESE STUDENTS TO ADHERE TO THE PRACTICE OF THEIR FAITH IN THE LEGAL PROFESSION, AN ARENA OFTEN HOSTILE TO CHRISTIANITY THE PROGRAM CONSISTS OF COURSES TAUGHT BY PROMINENT LECTURERS, INTERNSHIPS AROUND THE WORLD WITH SOME OF ADF'S MOST INFLUENTIAL ALLIED PARTNERS, AND PROFESSIONAL CAREER PLACEMENT SERVICES TO DATE, 1962 STUDENTS HAVE GRADUATED FROM THE BLACKSTONE LEGAL FELLOWSHIP, REPRESENTING 227 LAW SCHOOLS ADF OFFERS A SIMILAR TRAINING THROUGH THE ARETE ACADEMY TO COLLEGE AND UNIVERSITY STUDENTS WHO SEEK TO LIVE OUT THEIR FAITH IN THE FIELDS OF LAW, GOVERNMENT, PUBLIC POLICY, AND BUSINESS TO DATE, 743 STUDENTS FROM TOP COLLEGES AND UNIVERSITIES WORLDWIDE HAVE PARTICIPATED IN ARETE ACADEMY, MANY OF WHOM GO ON TO ATTEND THE BLACKSTONE LEGAL FELLOWSHIP DURING LAW SCHOOL THE ACADEMY EQUIPS STUDENTS WITH THE CHARACTER, COMPETENCE, AND CREDENTIALS TO EXCEL IN THEIR CHOSEN FIELD

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TERRY SCHLOSSBERG BOARD CHAIRMAN	8 00 0 00	X		X				0	0	0
TOM MINNERY BOARD VICE CHAIRMAN	2 00 0 00	X		X				0	0	0
RICHARD KORPAN BOARD TREASURER	5 00 1 00	X		X				0	0	0
MARK MADDOUX BOARD SECRETARY	5 00 0 00	X		X				0	0	0
ALFONSO AGUILAR BOARD MEMBER	2 00 0 00	X						0	0	0
MARJORIE DANNENFELSER BOARD MEMBER	2 00 0 00	X						0	0	0
DONNA ECTON BOARD MEMBER	2 00 0 00	X						0	0	0
ALLEN M GINSBORG BOARD MEMBER	2 00 0 00	X						0	0	0
SETH MORGAN BOARD MEMBER	2 00 0 00	X						0	0	0
CHARLES W PICKERING SR BOARD MEMBER	2 00 0 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN ROGERS BOARD MEMBER	2 00 0 00	X						0	0	0
RUTH ROSS BOARD MEMBER	2 00 0 00	X						0	0	0
MICHAEL FARRIS PRESIDENT, CEO, GENERAL COUNSEL	60 00 1 00			X				11,538	0	0
ALAN SEARS PRESIDENT, CEO, GEN COUNSEL/FOUNDER	60 00 1 00			X				405,080	0	33,499
WAYNE SWINDLER EVP FINANCE & ADMINISTRATION	55 00 0 00			X				227,177	0	31,176
TONY JOHNSON CHIEF OPERATING OFFICER	50 00 0 00			X				132,050	0	24,825
BENJAMIN BULL CHIEF COUNSEL, EXEC DIR OF ADF INT	50 00 0 00				X			285,492	0	33,499
MARK CROZET SVP DEVELOPMENT	55 00 0 00				X			227,712	0	26,016
JEFFERY VENTRELLA SR COUNSEL, SVP OF TRAINING	50 00 0 00				X			200,886	0	29,491
KRISTEN WAGGONER SR COUNSEL, SVP U S LEGAL DIVISION	50 00 0 00				X			199,720	0	28,892

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
AMY SHEPERD SVP OF MARKETING & COMMUNICATION	50 00 0 00				X			187,475	0	25,494
TIM CHANDLER SR CNSL SVP OF ALLIANCE ADVANCEMENT	50 00 0 00				X			184,291	0	27,946
DOUG NAPIER SVP OF ALLIANCE RELATIONS	55 00 0 00				X			205,717	0	30,406
GLEN LAVY CORPORATE COUNSEL	50 00 0 00				X			173,947	0	30,175
DAVID CORTMAN SR COUNSEL, VP U S LITIGATION	50 00 0 00					X		193,496	0	29,857
DONALD FOSTER CHIEF INFORMATION OFFICER	50 00 0 00					X		186,306	0	24,620
KEVIN THERIOT SR COUNSEL, VP CENTER FOR LIFE	50 00 0 00					X		181,697	0	25,467
JORDAN LORENCE SR COUNSEL	50 00 0 00					X		177,496	0	30,230
GARY MCCALED SR COUNSEL, VP CENTER FOR FAMILY VALUES	50 00 0 00					X		189,686	0	24,842

SCHEDULE A
(Form 990 or 990EZ)

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.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **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 _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 11 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
 - a **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.**
 - b **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.**
 - 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.**
 - d **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.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g 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		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	38,913,749	41,527,309	46,258,198	50,007,910	50,199,237	226,906,403
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	38,913,749	41,527,309	46,258,198	50,007,910	50,199,237	226,906,403
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						226,906,403

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total	
7	Amounts from line 4	38,913,749	41,527,309	46,258,198	50,007,910	50,199,237	226,906,403	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	385,237	312,971	343,061	238,782	24,618	1,304,669	
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	890,634	1,059,666	1,708,631	1,290,999	876,160	5,826,090	
11	Total support. Add lines 7 through 10						234,037,162	
12	Gross receipts from related activities, etc. (see instructions)						12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	96.950%
15	Public support percentage for 2015 Schedule A, Part II, line 14	15	96.260%

- 16a 33 1/3% support test—2016.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2015.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2015.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15	Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2015 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2015 Schedule A, Part III, line 17	18	
19a	33 1/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b	33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	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.		
	3a		
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.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
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.		
	4a		
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.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
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?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (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 .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	9a		
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 .		
	9b		
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 .		
	9c		
10a	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 line 10b below.		
	10a		
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.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	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?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>		
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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

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

Section C - Distributable Amount

		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	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	
<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 which the organization is responsive (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	

Section 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--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			
h Applied to 2016 distributable amount			
i 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 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, 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.			
e 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).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	MISCELLANEOUS INCOME - 2012 AMOUNT \$ 439,610 2013 AMOUNT \$ 3,860 2014 AMOUNT \$ 212,132 2015 AMOUNT \$ 65,806 2016 AMOUNT \$ 285,155 COURT AWARDED FEES - 2012 AMOUNT \$ 451,024 2013 AMOUNT \$ 574,537 2014 AMOUNT \$ 1,194,381 2015 AMOUNT \$ 979,457 2016 AMOUNT \$ 434,166 HONORIA - 2013 AMOUNT \$ 481,269 2014 AMOUNT \$ 302,118 2015 AMOUNT \$ 245,736 2016 AMOUNT \$ 156,839

Schedule A Form 990 of 990-E 2016

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047
2016
Open to Public Inspection

▶ 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
ALLIANCE DEFENDING FREEDOM

Employer identification number
54-1660459

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,327,294	4,869,735	4,285,545	2,789,582	1,441,460
b Contributions	731,623	1,636,049	770,652	1,530,503	1,404,708
c Net investment earnings, gains, and losses	510,977	175,336	57,995	88,296	5,414
d Grants or scholarships	40,000		180,484	90,000	62,000
e Other expenditures for facilities and programs				2,015	
f Administrative expenses	1,228,055	353,826	63,973	30,821	
g End of year balance	6,301,839	6,327,294	4,869,735	4,285,545	2,789,582

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 87 260 %
 - b** Permanent endowment ▶ 2 000 %
 - c** Temporarily restricted endowment ▶ 10 740 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|--|-----|----|
| (i) unrelated organizations | | No |
| (ii) related organizations | Yes | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | Yes | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,000,000		2,000,000
b Buildings		15,313,911	5,754,887	9,559,024
c Leasehold improvements		1,224,055	287,833	936,222
d Equipment		11,106,018	7,897,202	3,208,816
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				15,704,062

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(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 answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) SECURITY DEPOSITS	300,989
(2) DUE TO/DUE FROM	3,478,293
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	3,779,282

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
DEFERRED RENT PAYABLE	1,144,179
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,144,179

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements		1	56,439,303
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		-51,478
b	Donated services and use of facilities	2b		4,948,641
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		767,631
e	Add lines 2a through 2d		2e	5,664,794
3	Subtract line 2e from line 1		3	50,774,509
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		399,443
c	Add lines 4a and 4b		4c	399,443
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	51,173,952

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

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

1	Total expenses and losses per audited financial statements		1	56,266,817
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		4,948,641
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		1,412,972
e	Add lines 2a through 2d		2e	6,361,613
3	Subtract line 2e from line 1		3	49,905,204
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		399,443
c	Add lines 4a and 4b		4c	399,443
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	50,304,647

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	ADF FOUNDATION, A RELATED ORGANIZATION MAINTAINS THE ENDOWMENT TO SUPPORT ALLIANCE DEFENDING FREEDOM

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE COMPANY IS CLASSIFIED AS A PUBLIC CHARITY AND IS EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 43 OF THE ARIZONA REVISED STATUTES. CONTRIBUTIONS TO THE COMPANY ARE TAX DEDUCTIBLE WITHIN THE LIMITATIONS DESCRIBED BY THE CODE. THE COMPANY FOLLOWS THE INCOME TAX STANDARD FOR UNCERTAIN TAX POSITIONS. THE COMPANY RECOGNIZED NO LIABILITY FOR UNCERTAIN TAX POSITIONS. AS OF JUNE 30, 2017, THE COMPANY'S 2014 THROUGH 2016 FISCAL YEAR TAX RETURNS ARE OPEN FOR EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	FOREIGN CURRENCY TRANSLATION LOSS -44,115 REVENUE REPORTED ON SEPARATE RETURNS 811,746

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	INTERCOMPANY ELIMINATIONS 399,443

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	15100 SOLAR EXPENSES 144,917 ADF FOUNDATION EXPENSES 1,268,055

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	INTERCOMPANY ELIMINATIONS 399,443

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2016

**Open to Public
Inspection**

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number
54-1660459

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			1,761,486
b Total from continuation sheets to Part I	0	0			1,579,268
c Totals (add lines 3a and 3b)	0	0			3,340,754

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) CASH SCHOLARSHIP FOR LAW SCHOOL	EUROPE	3	18,900	WIRE TRANSFER	0	N/A	N/A
(2) CASH SCHOLARSHIP FOR LAW SCHOOL	NORTH AMERICA	3	18,900	WIRE TRANSFER	0	N/A	N/A
(3) CASH SCHOLARSHIP FOR LAW SCHOOL	SOUTH AMERICA	4	25,200	WIRE TRANSFER	0	N/A	N/A
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)* 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)* Yes No

Part V Supplemental Information

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).

Return Reference	Explanation
PART I, LINE 2	WHEN ALLIANCE DEFENDING FREEDOM APPROVES A GRANT, THE FUNDS ARE RETAINED BY ALLIANCE DEFENDING FREEDOM AND SET ASIDE TO BE USED EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED

Return Reference	Explanation
PART I, LINE 3	ACCRUAL METHOD

Additional Data

Software ID:

Software Version:

EIN: 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		63,355
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		36,180
EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		120,612

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		249,086
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		86,754
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		27,918

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	HUMAN RIGHTS LEGAL WORK	140,900
EUROPE	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	1,036,681
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	HUMAN RIGHTS LEGAL WORK	106,929

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	461,062
EUROPE	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	427,096
EUROPE	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	473,425

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	110,756

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		AFRICA	HUMAN RIGHTS LEGAL WORK	63,355	WIRE TRANSFERS	0	N/A	N/A
		AUSTRALIA	HUMAN RIGHTS LEGAL WORK	36,180	WIRE TRANSFERS	0	N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	HUMAN RIGHTS LEGAL WORK	112,612	WIRE TRANSFERS	0	N/A	N/A
		NORTH AMERICA	HUMAN RIGHTS LEGAL WORK	240,412	WIRE TRANSFERS	0	N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	HUMAN RIGHTS LEGAL WORK	86,754	WIRE TRANSFERS	0	N/A	N/A
		SOUTH ASIA	HUMAN RIGHTS LEGAL WORK	20,000	WIRE TRANSFERS	0	N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	HUMAN RIGHTS LEGAL WORK	106,929	WIRE TRANSFERS	0	N/A	N/A
		SOUTH ASIA	HUMAN RIGHTS LEGAL WORK	140,900	WIRE TRANSFERS	0	N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	HUMAN RIGHTS LEGAL WORK	170,880	WIRE TRANSFERS	0	N/A	N/A
		EUROPE	HUMAN RIGHTS LEGAL WORK	104,140	WIRE TRANSFERS	0	N/A	N/A

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a
 Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2016

Open to Public Inspection

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

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number
54-1660459

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| <p>a <input checked="" type="checkbox"/> Mail solicitations</p> <p>b <input checked="" type="checkbox"/> Internet and email solicitations</p> <p>c <input checked="" type="checkbox"/> Phone solicitations</p> <p>d <input checked="" type="checkbox"/> In-person solicitations</p> | <p>e <input checked="" type="checkbox"/> Solicitation of non-government grants</p> <p>f <input type="checkbox"/> Solicitation of government grants</p> <p>g <input type="checkbox"/> Special fundraising events</p> |
|---|--|
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 MASTERWORKS INC 19265 POWDER HILL PLACE NE POULSBORO, WA 98370	CONSULTING ON DIRECT MAIL PROGRAM		No	11,709,552	2,224,136	9,485,416
2 NEXTAFTER 6175 MAIN STREET SUITE 385 FRISCO, TX 75034	FUNDRAISING CONSULTATION		No	380,355	193,507	186,848
3 MDS 545 WEST JUANITA AVE MESA, AZ 85210	TELEMARKETING		No	148,621	101,597	47,024
4 DUNHAM COMPANY 6111 WEST PLANO PARKWAY SUITE 2700 PLANO, TX 75093	FUNDRAISING CONSULTATION		No	108,413	227,128	0
5 INFOCISION PO BOX 932441 CLEVELAND, OH 44193	TELEMARKETING		No	39,022	52,210	0
6						
7						
8						
9						
10						
Total				12,385,963	2,798,578	9,719,288

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		(event type)	(event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				
11 Net income summary Subtract line 10 from line 3, column (d) ▶					

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
Revenue	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
Revenue	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in
- | | | |
|----------|-----------------------------|---|
| a | The organization's facility | % |
| b | An outside facility | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
------------------	-------------

Schedule I (Form 990)

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

OMB No 1545-0047

2016

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Includes rows for data entry and a 'See Additional Data Table' row.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 11
3 Enter total number of other organizations listed in the line 1 table 16

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) CASH SCHOLARSHIP FOR LAW SCHOOL	150	958,537	0	N/A	N/A
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	WHEN ALLIANCE DEFENDING FREEDOM APPROVES A GRANT, THE FUNDS ARE RETAINED BY ALLIANCE DEFENDING FREEDOM AND SET ASIDE TO BE EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED

Additional Data

Software ID:
Software Version:
EIN: 54-1660459
Name: ALLIANCE DEFENDING FREEDOM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN LIBERTIES INSTITUTE PO BOX 547503 ORLANDO, FL 32854	59-3309465	501(C)(3)	324,213	0	N/A	N/A	GENERAL OPERATING
FIDELIS CENTER FOR LAW AND POLICY PO BOX 2709 CHICAGO, IL 60690	20-2787890	501(C)(3)	200,000	0	N/A	N/A	GENERAL OPERATING

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR RELIGIOUS EXPRESSION 699 OAKLEAF OFFICE LANE SUITE 107 MEMPHIS, TN 38117	62-1873978	501(C)(3)	107,540	0	N/A	N/A	PUBLIC SQUARE
MAUCK & BAKER LLC ONE N LASALLE STREET SUITE 600 CHICAGO, IL 60602	36-4394768	N/A	98,100	0	N/A	N/A	FAMILY VALUES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WADLEIGH STARR & PETERS PLLC 95 MARKET STREET MANCHESTER, NH 03101	02-0504984	N/A	92,110	0	N/A	N/A	CENTER FOR LIFE, PUBLIC SQUARE
FREEDOM OF CONSCIENCE DEFENSE FUND PO BOX 9520 RANCHO SANTA FE, CA 92067	30-0741605	501(C)(3)	87,342	0	N/A	N/A	RELIGIOUS LIBERTY, SANCTITY OF LIFE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE JAMES OTIS LAW GROUP 12977 NORTH FORTY DRIVE SUITE 214 ST LOUIS, MO 63141	80-0211060	N/A	80,000	0	N/A	N/A	SANCTITY OF LIFE
NATHAN W KELLUM 699 OAKLEAF OFFICE LANE SUITE 107 MEMPHIS, TN 38117	42-8219756	N/A	62,000	0	N/A	N/A	PUBLIC SQUARE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROADS OF SUCCESS 2896 HACIENDA DRIVE DUARTE, CA 91010	26-0809074	501(C)(3)	43,601	0	N/A	N/A	INTERNATIONAL ADVOCACY
THE WITHERSPOON INSTITUTE 16 STOCKTON STREET PRINCETON, NJ 08540	55-0835528	501(C)(3)	30,000	0	N/A	N/A	FAMILY VALUES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRENA BELL & CLARKSON PC 810 N STREET SUITE 100 ANCHORAGE, AK 99501	92-0127640	N/A	26,157	0	N/A	N/A	GENERAL LITIGATION
LAW OFFICE OF JASON R CRADDOCK 19 S LASALLE SUITE 604 CHICAGO, IL 60603	35-2724233	N/A	25,680	0	N/A	N/A	CENTER FOR LIFE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN'S LIBERATION FRONT 1800 M STREET NW UNIT 33943 MANCHESTER, DC 03101	81-3249020	501(C)(3)	15,000	0	N/A	N/A	GENERAL LITIGATION
MRD LAW 3301 WEST CLYDE PLACE DENVER, CO 80211	45-4324795	N/A	14,267	0	N/A	N/A	RELIGIOUS LIBERTY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIEBLER CONNOR BERRY & ST HILAIRE 1141 N EDISON SUITE C PO BOX 6125 KENNEWICK, WA 99336	91-1045987	N/A	13,850	0	N/A	N/A	RELIGIOUS LIBERTY
STORY LAW FIRM LLC 438 E MILSAP RD SUITE 103 FAYETTEVILLE, AR 72703	26-3980897	N/A	13,599	0	N/A	N/A	GENERAL OPERATING

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ETHICS AND PUBLIC POLICY CENTER 1730 M STREET NW SUITE 910 WASHINGTON DC, DC 20036	52-1162185	501(C)(3)	13,000	0	N/A	N/A	GENERAL LITIGATION
ARAGO LAW FIRM PLLC PO BOX 452275 KISSIMMEE, FL 34745	27-0188415	N/A	12,212	0	N/A	N/A	GENERAL OPERATING

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DALTON & TOMICH PLC THE CHRYSLER HOUSE 719 GRISWOLD STREET SUITE 270 DETROIT, MI 48226	27-3296840	N/A	11,860	0	N/A	N/A	RELIGIOUS LIBERTY
ELLIS LI & MCKINSTRY PLLC MARKET PLACE TOWER 2025 FIRST AVENUE PENTHOUSE A SEATTLE, WA 98121	91-1240777	N/A	10,000	0	N/A	N/A	FAMILY VALUES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNSYLVANIA FAMILY INSTITUTE 23 NORTH FRONT STREET 2ND FLOOR HARRISBURG, PA 17101	23-2509197	501(C)(3)	10,000	0	N/A	N/A	FAMILY VALUES
LAW OFFICE OF NIC COCIS 38975 SKY CANYON DR SUITE 211 MURRIETA, CA 92563	20-3843470	N/A	9,301	0	N/A	N/A	GENERAL OPERATING

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARGRAVE CELMINS 8171 E INDIAN BEND ROAD SUITE 101 SCOTTSDALE, AZ 85250	86-0641342	N/A	8,430	0	N/A	N/A	GENERAL LITIGATION
NATIONAL CENTER ON SEXUAL EXPLOITATION 1100 G STREET NW 1030 WASHINGTON DC, DC 20005	13-2608326	501(C)(3)	6,000	0	N/A	N/A	GENERAL LITIGATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAW OFFICES OF HERBERT GREY 4800 SW GRIFFITH DRIVE 320 BEAVERTON, OR 97005	76-0743764	N/A	5,722	0	N/A	N/A	ACADEMIC FREEDOM
CARLSON LAW PLLC 855 VILLAGE CENTER DRIVE 259 ST PAUL, MN 55127	47-4811100	N/A	5,000	0	N/A	N/A	FAMILY VALUES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR ARIZONA POLICY ACTION 4222 E THOMAS ROAD SUITE 220 PHOENIX, AZ 85018	86-0618922	501(C)(3)	5,000	0	N/A	N/A	FAMILY VALUES

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.

2015
Open to Public Inspection

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

Name of the organization ALLIANCE DEFENDING FREEDOM	Employer identification number 54-1660459
--	--

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b	Yes								
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes								
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:										
a Receive a severance payment or change-of-control payment?	4a	No								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No								
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.										
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
a The organization?	5a	No								
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.	5b	No								
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
a The organization?	6a	No								
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.	6b	No								
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No								
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No								
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9									

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	FIRST CLASS TRAVEL MAY BE PROVIDED TO EMPLOYEES FOR AIR TRAVEL OF EXTENDED LENGTH OR WHEN AVAILABILITY OF RESERVATIONS IS LIMITED TO FIRST CLASS. TYPICALLY THESE ARE LOW OR NO EXPENSE DUE TO AIRLINE FREQUENT FLYER PROGRAMS WHICH ALLOW UPGRADES TO AIRLINE TRAVEL. THIS IS FOR THE CONVENIENCE AND BUSINESS PURPOSE OF THE ORGANIZATION, NOT THE INDIVIDUAL AND IS NOT TREATED AS TAXABLE INCOME. TRAVEL FOR COMPANIONS IS PROVIDED WHEN THE COMPANION'S ATTENDANCE AT MEETINGS, CONFERENCES, ETC. HAS A BUSINESS PURPOSE TO THE ORGANIZATION. THIS IS NOT TREATED AS TAXABLE COMPENSATION. THESE EXPENSE ITEMS ARE NOT LIMITED TO OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED INDIVIDUALS, BUT ARE AVAILABLE TO ALL EMPLOYEES IN THE SITUATIONS DESCRIBED.

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ALLIANCE DEFENDING FREEDOM

Employer identification number 54-1660459

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 5 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization? (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) JANET BITZKO	FAMILY MEMBER OF THE CEO	52,794	EMPLOYMENT COMPENSATION		No
(2) LUCAS SWINDLER	FAMILY MEMBER OF THE COS	19,359	EMPLOYMENT COMPENSATION		No
(3) REBECCA SEARS	FAMILY MEMBER OF THE CEO	71,455	EMPLOYMENT COMPENSATION		No

Part V Supplemental Information

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

Return Reference	Explanation

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2016

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number
54-1660459

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	102	1,365,498	STOCK MARKET QUOTES
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II **Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTORS

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.

▶ 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.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 8B	THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES THAT HAVE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	UPON COMPLETION, THE ORGANIZATION'S FINANCE TEAM REVIEWS THE FORM 990 THROUGH THE FOLLOWING PROCESS 1) THE CFO AND CONTROLLER COMPARE THE FORM 990 TO THE ANNUAL CORPORATE AUDIT AND INTERNAL FINANCIAL REPORTS THE CEO THEN READS THE FORM 990 FOR CONTENT AND CLARITY 2) THE CFO ASSIGNS THE CONTROLLER AND HIS TEAM TO REVIEW CONTENT, CHECK MATH TOTALS, AND CHECK SPELLING 3) FOLLOWING THE ABOVE REVIEW THE FORM 990 IS DISTRIBUTED TO A CEO B CHAIRMAN OF THE FINANCE AND AUDIT COMMITTEE (FAC) - WHICH IS RESPONSIBLE FOR OVERSIGHT OF FINANCE, AUDIT, AND TAX MATTERS C THE CHAIR OF THE FAC ENSURES COMMITTEE MEMBERS REVIEW THE FORM 990 FOR MATERIAL EDITS AND COMPLIANCE D UPON ACCEPTANCE AND APPROVAL, THE CHAIRMAN OF THE FAC THEN INSTRUCTS THE CFO TO SIGN AND FILE THE 990, AND POST IT ON THE BOARD WEBSITE SO THE FULL BOARD OF DIRECTORS CAN VIEW THE 990 BASED ON THE FAC'S RECOMMENDATION, THE BOARD APPROVES AND ACCEPTS THE 990 AT THE NEXT REGULARLY SCHEDULED BOARD MEETING 4) CHANGES AND CORRECTIONS FROM THE ABOVE ARE ADDRESSED AT EACH STEP 5) FOLLOWING THE ABOVE, THE CFO SIGNS AND INSTRUCTS THE FORM 990 TO BE FILED WITH THE IRS 6) UPON FILING WITH THE IRS, ADF'S FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION AND DISTRIBUTION TO TO STATE GOVERNING BODIES, FOUNDATIONS, AND OTHER REQUESTING ENTITIES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>THE CONFLICT OF INTEREST POLICY COVERS ANY DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST IN ADDITION TO THOSE COVERED INDIVIDUALS, ADF IS IN THE PROCESS OF REQUIRING ALL KEY EMPLOYEES AND EXECUTIVE STAFF TO ANNUALLY SIGN A STATEMENT AFFIRMING RECEIPT, UNDERSTANDING, COMPLIANCE AND REPORTING UNDER THE POLICY THE ORGANIZATION ALSO CONDUCTS PERIODIC REVIEWS TO ENSURE OPERATIONS ARE CONSISTENT WITH ITS CHARITABLE PURPOSES DIRECTORS SHALL REPORT POSSIBLE CONFLICTS OF INTEREST TO THE CHAIRMAN OF THE BOARD OF DIRECTORS PRIOR TO ANY ACTION ON THE TRANSACTION BY THE ORGANIZATION UPON REPORT OF A POSSIBLE CONFLICT, THE BOARD OF DIRECTORS SHALL CONDUCT AN INVESTIGATION AND DETERMINE WHETHER A CONFLICT OF INTEREST DOES EXIST AND WHETHER IT IS SUBSTANTIAL IF THE BOARD DETERMINES THAT A SUBSTANTIAL CONFLICT OF INTEREST EXISTS, THE INTERESTED INDIVIDUAL SHALL NOT VOTE ON THE TRANSACTION PRESENTING THE CONFLICT THE INTERESTED INDIVIDUAL MAY VOTE ONLY IF THE BOARD DETERMINES THAT NO CONFLICT EXISTS OR THE CONFLICT IS NOT SUBSTANTIAL NO INVESTIGATION OR DETERMINATION BY THE BOARD SHALL BE REQUIRED IF THE INTERESTED INDIVIDUAL VOLUNTARILY AGREES TO REFRAIN FROM VOTING ON THE TRANSACTION PRESENTING THE POTENTIAL CONFLICT OF INTEREST THE INTERESTED INDIVIDUAL MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS THE MINUTES OF THE GOVERNING BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS SHALL CONTAIN A THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE A FINANCIAL INTEREST IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT OF INTEREST WAS PRESENT, AND THE GOVERNING BOARD'S OR COMMITTEE'S DECISION AS TO WHETHER A CONFLICT OF INTEREST IN FACT EXISTED B THE NAMES OF THE PERSONS WHO WERE PRESENT FOR DISCUSSIONS AND VOTES RELATING TO THE TRANSACTION OR ARRANGEMENT, THE CONTENT OF THE DISCUSSION, INCLUDING ANY ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT, AND A RECORD OF ANY VOTES TAKEN IN CONNECTION WITH THE PROCEEDINGS</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>ALLIANCE DEFENDING FREEDOM MAINTAINS A COMPENSATION SYSTEM. CEO COMPENSATION IS SET BY THE ORGANIZATION'S INDEPENDENT BOARD, AND THE CEO'S COMPENSATION IS IN ACCORDANCE WITH THE ADF COMPENSATION SYSTEM. JOB DESCRIPTIONS ARE EVALUATED AGAINST INDEPENDENT MARKET SOURCES AND COMPENSATION DATA AS PROVIDED BY INDEPENDENT THIRD PARTY RESOURCE PROVIDERS. THE MANAGEMENT COMPENSATION COMMITTEE APPROVES POSITION GRADES AND PAY RANGES OF ALL OTHER POSITIONS ANNUALLY. ADF ALSO PREPARES COMPENSATION DATA FOR THE BOARD'S FINANCE AND AUDIT COMMITTEE IN ACCORDANCE WITH THE IRS RECOMMENDED "REBUTTABLE PRESUMPTION OF REASONABLENESS" PROCESS TO SUBSTANTIATE THE COMPENSATION OF ADF KEY EMPLOYEES. THE FAC REVIEWS AND APPROVES KEY EMPLOYEE COMPENSATION ONCE A YEAR. THE ADF COMP TEAM (COMPRISED OF THE CFO, COO, VP HR, AND COMP & BENEFITS ANALYST) REVIEW BENCHMARK DATA PROVIDED BY PAYSACLE, MERCER, AND OTHER COMPENSATION RESOURCES TO DETERMINE THE APPROPRIATE COMPENSATION FOR ALL POSITIONS IN ACCORDANCE WITH THE ADF COMPENSATION PHILOSOPHY. COMPENSATION ABOVE THE 60TH PERCENTILE BUT LESS THAN THE 75TH PERCENTILE OF A PAY GRADE REQUIRES THAT THE CEO BE INFORMED, AT OR ABOVE THE 75TH PERCENTILE REQUIRES CEO APPROVAL, AND ABOVE THE MAXIMUM OF THE GRADE REQUIRES BOARD APPROVAL. DISCUSSIONS, DECISIONS, AND APPROVALS ARE RECORDED IN WRITING, TYPICALLY VIA E-MAIL. THIS COMPENSATION REVIEW PROCESS LAST OCCURRED IN 2017.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE ON ITS WEB SITE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	FOREIGN CURRENCY EXCHANGE LOSS -44,115 NET EQUITY ADJUSTMENT TO 15100 SOLAR INVESTMENT -32,030

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2016

**Open to Public
Inspection**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) 15100 LLC 15100 N 90TH STREET SCOTTSDALE, AZ 85260 54-1660459	OWN REAL PROPERTY	AZ	69,119	11,635,851	N/A
(2) ADF INTERNATIONAL AUSTRIA GEMENINNUTZIGE GMBH 1010 WIEN LANDESGERICHTSSTRABE 18/ VIENNA AU	HUMAN RIGHTS LEGAL WORK	AU	112,427	374,922	ALLIANCE DEFENDING FREEDOM
(3) ALLIANCE DEFENDING FREEDOM BELGIUM ASBL RUE GUIMARD 15 1040 ETTERBEEK BRUSSELS BE	HUMAN RIGHTS LEGAL WORK	BE	0	294,136	ALLIANCE DEFENDING FREEDOM
(4) ADF INTERNATIONAL (UK) 16 OLD QUEEN STREET LONDON SW1H 9HP UK	HUMAN RIGHTS LEGAL WORK	UK	17,137	50,902	ALLIANCE DEFENDING FREEDOM
(5) ADF INTERNATIONAL FRANCE 4 PL DU MARCHE AUX POISSONS STRASBOURG 67000 FR	HUMAN RIGHTS LEGAL WORK	FR	9,017	251,052	ALLIANCE DEFENDING FREEDOM
(6) ALLIANCE DEFENDING FREEDOM SWITZERLAND 28 CHEMIN DU PETIT-SACONNEX GENEVE 1209 SZ	HUMAN RIGHTS LEGAL WORK	SZ	0	220,883	ALLIANCE DEFENDING FREEDOM

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ADF FOUNDATION 15100 N 90TH STREET SCOTTSDALE, AZ 85260 86-1158500	PUBLIC BENEFIT CORPORATION	AZ	501(C)(3)	LINE 7	ALLIANCE DEFENDING FREEDOM	Yes	

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) 15100 SOLAR LLC 15100 N 90TH STREET SCOTTSDALE, AZ 85260 30-0710109	OWN AND OPERATE SOLAR ENERGY PROJECT	AZ	15100 LLC	C	112,887	1,328,241	100 000 %	Yes	
(2) ADF RABBI TRUST 15100 N 90TH STREET SCOTTSDALE, AZ 85260	RETIREMENT FUNDING	AZ	ALLIANCE DEFENDING FREEDOM	T				Yes	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)	Yes	
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)	Yes	
s Other transfer of cash or property from related organization(s)		No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ADF FOUNDATION	C	40,000	CASH TRANSFERRED
(2) 15100 SOLAR LLC	Q	60,000	ADMIN FEE PAID
(3) ADF FOUNDATION	O	389,554	COMPENSATION PAID
(4) ADF FOUNDATION	Q	219,315	ADMIN FEE PAID

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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

Additional Data

Software ID:
Software Version:
EIN: 54-1660459
Name: ALLIANCE DEFENDING FREEDOM

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
(1) 15100 LLC 15100 N 90TH STREET SCOTTSDALE, AZ 85260 54-1660459	OWN REAL PROPERTY	AZ	69,119	11,635,851	N/A
(1) ADF INTERNATIONAL AUSTRIA GEMENINNUTZIGE GMBH 1010 WIEN LANDESGERICHTSSTRABE 18/ VIENNA AU	HUMAN RIGHTS LEGAL WORK	AU	112,427	374,922	ALLIANCE DEFENDING FREEDOM
(2) ALLIANCE DEFENDING FREEDOM BELGIUM ASBL RUE GUIMARD 15 1040 ETTERBEEK BRUSSELS BE	HUMAN RIGHTS LEGAL WORK	BE	0	294,136	ALLIANCE DEFENDING FREEDOM
(3) ADF INTERNATIONAL (UK) 16 OLD QUEEN STREET LONDON SW1H 9HP UK	HUMAN RIGHTS LEGAL WORK	UK	17,137	50,902	ALLIANCE DEFENDING FREEDOM
(4) ADF INTERNATIONAL FRANCE 4 PL DU MARCHE AUX POISSONS STRASBOURG 67000 FR	HUMAN RIGHTS LEGAL WORK	FR	9,017	251,052	ALLIANCE DEFENDING FREEDOM
(5) ALLIANCE DEFENDING FREEDOM SWITZERLAND 28 CHEMIN DU PETIT-SACONNEX GENEVE 1209 SZ	HUMAN RIGHTS LEGAL WORK	SZ	0	220,883	ALLIANCE DEFENDING FREEDOM