Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury

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.lrs.gov/form990. A For the 2014 calendar year, or tax year beginning and ending Check if C Name of organization D Employer identification number X Address CHILDREN'S SHELTER OF CEBU Name Ichange 41-1330241 Doing business as]initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 3600 LEXINGTON AVE N 1209 651-493-1551 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 2,059,787. Amended SHOREVIEW, MN H(a) Is this a group return F Name and address of principal officer: MATTHEW BULEY Applicafor subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes I Tax-exempt status: X 501(c)(3) 501(c) (If "No," attach a list. (see Instructions) (insert no.) 4947(a)(1) or 527 J Website: WWW.CSCSHELTER.ORG H(c) Group exemption number K Form of organization; X Corporation Trust Association Other -L Year of formation: 1978 M State of legal domicile: MN Part I Summary Briefly describe the organization's mission or most significant activities: MEETING THE NEEDS OF HOMELESS. Governance NEGLECTED AND ABANDONED CHILDREN IN CEBU, PHILIPPINES. Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets, Number of voting members of the governing body (Part VI, line 1a) 10 Number of independent voting members of the governing body (Part VI, line 1b) 16 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 1006 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 Current Year Contributions and grants (Part VIII, line 1h) 1,866,141 1,931,068. Program service revenue (Part VIII, line 2g) Ō. Investment income (Part VIII, column (A), lines 3, 4, and 7d) ΉN 17,112 41,185. 1,875 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,510. 11 1,885,128 973,763. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 933,806. 912,906. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 739,300. 779,528. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 129,493. 148,376. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,802,599. 1,840,810. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 82,529. 132,953. Revenue less expenses. Subtract line 18 from line 12 ______ Beginning of Current Year End of Year 1,067,857. 945,091. 20 Total assets (Part X, line 16) 190,728. 191,022. 21 Total liabilities (Part X, line 26) 754,363. 22 Net assets or fund balances, Subtract line 21 from line 20 876,835. 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. Signature of officer Sign MATTHEW BULEY, PRESIDENT Here Type or print name and title Print/Type preparer's name 04.02·15 Pald CHRISTINE OLSEN P01591802 Firm's name LLIFTONLARSONALLEN LLP Preparer 41-0746749 Firm's EIN Firm's address 220 SOUTH SIXTH STREET, Use Only MINNEAPOLIS, MN 55402 Phone no.612-376-4500

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

Form	990 (2014) CHILDREN'S SHELTER OF CEBU 41-1330241 Page 2
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Brighty describe the organization's mission'
	WE EXIST TO GLORIFY GOD BY DEMONSTRATING HIS LOVE TO THE PHILIPPINES
	AS WE PROVIDE A LOVING, CHRIST-CENTERED HOME WITH COMPREHENSIVE
	MEDICAL, EDUCATIONAL AND PLACEMENT SERVICES FOR HOMELESS FILIPINO
	CHILDREN.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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?
	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 \$ 1,227,937 • including grants of \$ 912,906 •) (Revenue \$ 0 •)
	GENERAL RESIDENTIAL EXPENSES: MONEY FOR CHILDCARE, COUNSELING, AND
	SECURITY. CHILDREN'S SHELTER OF CEBU PROVIDED A LOVING, CHRISTIAN HOME
	TO 115 CHILDREN DURING THE YEAR ENDED DECEMBER 31, 2014.
	HAVE LONG TO THE L
4b	(Code:) (Expenses \$ 147,100 - including grants of \$ 0 -) (Revenue \$ 0 -
TJJ	CHILDREN OF HOPE SCHOOL: TEACHER'S SALARIES, SUPPLIES, AND SUPPORT. THE
	CHILDREN OF HOPE SCHOOL SERVED AN AVERAGE OF 65 CHILDREN WITH 13
	FILT, TIME TEACHERS, THREE PART TIME TEACHERS, THREE TEACHING
	ASSISTANTS, TWO INTERNS, AND TWO THERAPISTS OVER THE YEAR, A 4:1
	STUDENT-TEACHER RATIO.
	DIODZE WARACINA HARACO
	(Code:) (Expenses \$ 1.22, 288 · including grants of \$ 0 ·) (Revenue \$
4c	(Code;) (Exposes 4
	MEDICAL: MEDICINES, HOSPITALIZATIONS, LAB TESTS.
	It.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grents of \$) (Revenue \$)
4e	Total program service expenses ► 1,497,325.
	Form 990 (201
4320 11-0	02 1-14

Form 990 (2014) CHILDREN'S S
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If *Yes,* complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	Ì		Х
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		22
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		Х
n	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	*
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X		` <u>;</u> ;	
	as applicable.	: :: ::	:.' # 1	AFF E
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	Х	
6	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	116		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	115		Х
С	Did the organization report an amount for investments - program related In Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	444		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	l
. b	Was the organization included in consolldated, independent audited financial statements for the tax year?			<u> </u>
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	<u> </u>
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, Investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	x	
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	1.5		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
.19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	ļ	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b Form	ggn	(2014)

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21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		ĺ	**
	Schedule K. If "No", go to line 25a	24a		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	F 11 F		
	Instructions for applicable filling thresholds, conditions, and exceptions):			::_::::
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		l	
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			_v
	If "Yes," complete Schedule R, Part V, line 2	36	_	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			х
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	 ^
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	x	
	Note. All Form 990 filers are required to complete Schedule O	1 30		

Form 990 (2014) CHILDREN'S SHELTER OF CEBU

Part V Statements Regarding Other IRS Filings and Tax Compliance

Enter the number reported in Box 3 of Form 1096, Enter O: If not applicable 10 0 1 1 1 0 0 1 1 1 1 1 1 1 1 1 1 1 1		Check if Schedule O contains a response or note to any line in this Part V		, <u>,.</u>			
Enter the number of Forms W26 included in line 1a. Enter-0-li not applicable						Yes	No
Dil the organization comply with backup withholding niles for reportable payments to vendors and reportable gaming gaminling winnings to prize winners. 2a Total Province of employees reported on Form W-3, Transmittal of Wago and Tax Statements, fled for the calendar year ending with or within the year covered by this nature. 3 If all contents on the reported on the 2s, did the organization fled all required federal employment tax returner? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to 6.06 (see instructions) 3 bif the organization have uncleaded business gross income of \$1,000 or more during the year? 3 bif the "Yes," I has it filled a form 990-1 for this year? If "No," to fine Sts, provide an explanation in Schedule O 3 bif were a state of uncling the calendar year, did the organization have an explanation in Schedule O 3 bif were a state of the foreign country (such as a bank account, securities account, or other financial account)? 4 bif "Yes," the life is a foreign country for the provided or a country or other the name of the foreign country. 5 bif any toxable party notify the organization file Form 899-17. 5 bif any toxable party notify the organization file Form 899-17. 5 bif were not tax deductible or such as a bank account, securities and the such parts and provided the organization has exhant an explanation file form 899-17. 5 cit "Yes," to life organization have a manual gross receipted that are normally greater than \$100,000, and clid the organization solicit any contributions that the were not tax deductible contributions under section 170(c). 5 bif "Yes," the life organization moved with every section of the goods or services provided? 5 cit "Yes," the life organization moved with every section of the goods or services provided? 7 corganizations that may receive deductible contributions under section 170(c). 8 foreign forganization self-exchange, or otherwise dispose of tampide patrian planetic contract? 7 corganization for sections. Enter organiz	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
describing winnings to pirize winners? Enter the number of employees reported or Form W-3, Transmittal of Wage and Tax Statements, fled for the calendar year ending with or within the year cowered by this return. If it is lesst one is reported on line 2a, did the organization file all required federal employment tex returns? Note. If the sum of files is a and 2a to greater than 250, you may be required for effe (see Instructions) 3 Did the organization have unrelated business gross income of \$\$,000 or more during the year? 3 Let wan of files a far and 2a to greater than 250, you may be required for effe (see Instructions) 3 Let wan of files a far and 2a to greater than 250, you may be required to effe (see Instructions) 4 Let wany files during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (set who as a bank account, securities account, or other financial account)? 4 Let wan y files during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (set who as bank account, securities account, or other financial accounts (FBAR). 5 Let was the organization a party to a prohibited tax shelter transaction? 5 Let was the organization a party to a prohibited tax shelter transaction? 5 Let was the organization and party to a prohibited tax shelter transaction? 5 Let was the organization have armail greate receipts that are normally greater than \$100,000, and clid the organization solicit any contributions that were not tax eductables and charlable contributions? 5 Let were not tax calcustables and charlable contributions? 6 Let the organization have armail greater contribution and party for peods and services provided to the payor? 7 Let were not tax calcustables and charlable contributions? 7 Let were not tax calcustables and charlable contributions? 8 Let were not tax deductables and charlable contributions? 8 Let were not	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		11.1 1-11	
describing winnings to pirize winners? Enter the number of employees reported or Form W-3, Transmittal of Wage and Tax Statements, fled for the calendar year ending with or within the year cowered by this return. If it is lesst one is reported on line 2a, did the organization file all required federal employment tex returns? Note. If the sum of files is a and 2a to greater than 250, you may be required for effe (see Instructions) 3 Did the organization have unrelated business gross income of \$\$,000 or more during the year? 3 Let wan of files a far and 2a to greater than 250, you may be required for effe (see Instructions) 3 Let wan of files a far and 2a to greater than 250, you may be required to effe (see Instructions) 4 Let wany files during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (set who as a bank account, securities account, or other financial account)? 4 Let wan y files during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (set who as bank account, securities account, or other financial accounts (FBAR). 5 Let was the organization a party to a prohibited tax shelter transaction? 5 Let was the organization a party to a prohibited tax shelter transaction? 5 Let was the organization and party to a prohibited tax shelter transaction? 5 Let was the organization have armail greate receipts that are normally greater than \$100,000, and clid the organization solicit any contributions that were not tax eductables and charlable contributions? 5 Let were not tax calcustables and charlable contributions? 6 Let the organization have armail greater contribution and party for peods and services provided to the payor? 7 Let were not tax calcustables and charlable contributions? 7 Let were not tax calcustables and charlable contributions? 8 Let were not tax deductables and charlable contributions? 8 Let were not	c	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming	;		
fleef or the calendary wear ending with or within the year covered by this return					1c		
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? No lich the organization have unrelated business gross income of \$1,000 or more during the year? 3a	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
Note. If the sum of lines 1a and 2a is greater than 250, your may be required to e-file (see instructions) 3a Dit the organization have unrelated business gross income of \$1,000 or once during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, sourchies account, or other financial account)? 4b 1f *Yes,* enter the name of the foreign country. ▶ 5c Ness hetructions for filing requirements of FinCEN Form 114, Report of Foreign Bank and Financial account()? 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5b Did any texablo party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c 1f *Yes,* time file as 5or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 5c Organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6c Organizations that may receive deductible contributions under section 170(c). 8 If *Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organizations that may receive deductible contributions under section 170(c). 9 If *Yes,* did the organization include with every solicitation and early for goods and services provided to the paper? 7 Organizations that may receive a deductible contributions of the value of the goods or services provided: 9 Organizations that may receive a payment in excess of \$75 made party as a contribution and partyly for goods and services provided to the paper. 7 Or			2a	16			
3a bit the organization have unrolated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bark account, securities account, or other financial accountry? 5a his firves, in earth or the name of the foreign country. 5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization and the two are one party to a prohibited tax shelter transaction? 5b If Yes, it of the 5a or 5b, did the organization file Form 8886-17 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization select any contributions that were not tax deductible as charitable contributions? 6b If Yes, it did the organization include with every solicitation an express statement that euch contributions or gifts were not tax deductible? 6c Did the organization shall exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8888? 6c Did the organization neceive a payment in access of \$75 made party is a goods or services provided? 6c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8888? 6c Did the organization receive a payment in secose of \$75 made party is organized party for goods and services provided to the payor? 7a If Yes, if the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? 7c If Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? 7c If Did the organization sell and provided to the foreit	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	*******************		X	
b if "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedulo O 4a Al amy time during the celendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly? 5 if "Yes," enter the name of the foreign country. 6 if "Yes," enter the name of the foreign country. 6 Seo instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial accountly. 5 if Wes, "In the Sa or Sb, did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5 if Wes, "to line Sa or Sb, did the organization file Form 9886-T? 5 in Ose the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that wore not tax deductibles a charitable contributions? 5 if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles a charitable contributions. 6 if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles. 7 organizations that may receive deductible contributions under section 170(c). 8 bit the organization receive a payment in excess of \$75 made party as a contribution and parity for goods and services provided to the payor? 7 organizations end that may receive deductible contributions under section 170(c). 8 bit "Yes," indicate the number of Forms 8282 filed during the year 9 lift the organization end notify the donor of the value of the goods or services provided? 7 if Yes," indicate the number of Forms 8282 filed during the year 9 lift be organization received a contribution of qualified indicetly, on a personal benefit contract? 7 if X 7 if Yes, "Indicate the number of Forms 8282 filed during the year? 9 Sponeoring organization make a distribution to a donor advised funds payors and payors and payors and p		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	3)				
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h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization fille a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Gross income from members or shareholders 11 Section 501(c)(12) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form 1041? 15 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13a Note. See the instructions for additional information the organization must report on Schedule O. 15 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 15 Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f	<u> </u>	X
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sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 15a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b If "Yes," has it filed a Form 720 to report these payments? If 'No," provide an explanation in Schedule O. 14b If "Yes," has it filed a Form 720 to report these payments? If 'No," provide an explanation in Schedule O.	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation f	ile a Form 1098-C?			<u> </u>
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a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12		sponsoring organization have excess business holdings at any time during the year?				ļ	<u> </u>
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10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	а	Did the sponsoring organization make any taxable distributions under section 4966?		•••••	9a		<u> </u>
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				<u> </u>	in. 171	il-i-il	
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c Enter the amount of reserves on hand	þ	,	I	ı			
14a Did the organization receive any payments for indoor tanning services during the tax year? b if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b							i. i.i+ni
b if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O14b				l	4	1 11-1-	1 ···
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	b	it "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	₽ ∪			, gan	/201A1

Form 990 (2014) CHILDREN'S SHELTER OF CEBU 41-1330241 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	12	::	::-:	3.11.11
	If there are material differences in voting rights among members of the governing body, or if the governing					4 14 1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
þ	Enter the number of voting members included in line 1a, above, who are independent	1b	10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with any other				:::::::::::::::::::::::::::::::::::::::
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint one or				
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockholders, or				
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by the following:				<u> </u>
а	The governing body?			8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<u></u>		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	Revenue Code.)				
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		X
þ	If "Yes," did the organization have written policies and procedures governing the activities of such of	hapters, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy before filing the fo	rm?	11a	Х	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					7 7 1 1
12a				12a	X	ļ
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	Х	ļ
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	Yes," describe			37	
	in Schedule O how this was done		•••••	12c	X	├
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	l
15	Did the process for determining compensation of the following persons include a review and approv			F	i	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official		••••••	15a	X	├
b	Other officers or key employees of the organization			15b	X	E 70 III
٠.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
Iba	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange			160	. 11 .41	X
	taxable entity during the year?			16a	77 711	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the organization of					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization			16b	M. N.	ii indul
800	exempt status with respect to such arrangements? tion C. Disclosure			100	Ь	L
	List the states with which a copy of this Form 990 is required to be filed ►AK, CT, IL, MA, I	MN_NC_NY_OF	I.OR	. PA	.RT	T'N
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-					,
18	for public inspection. Indicate how you made these available. Check all that apply.	1 (060001100110)(0)6	Olity	avanac	,iC	
		n in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or		lov, an	d finan	cial	
19	statements available to the public during the tax year.	or more of altoroge por	. Jy , ui i	1111411	J,WI	
20	State the name, address, and telephone number of the person who possesses the organization's be	ooks and records:				
	KIRBY STOLL - 651-493-1551					
		5126	***************************************			
43200	SEE SCHEDULE O FOR FULL LIST OF STATES			Form	990	(2014)
	_					

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Tit l e	(B) Average	(do	notc	Pos heck	C) ition	than	one	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below line)				ireata	Highest compensated S of so of smployee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) MATTHEW BULEY	40.00							04 400		- 100
PRESIDENT		X		X				81,100.	0.	6,488.
(2) PAUL HEALY	40.00							62 500	0	0.400
FIELD DIRECTOR		X		X	_			63,500.	0.	8,400.
(3) CAROLYN ANDERSON	0.50	٠,		٦,				_	^	_
BOARD CHAIR		X		X				0.	0.	0.
(4) BJORK OSTROM	0.50	x		x				0.	0.	0.
BOARD VICE CHAIR (5) KIRBY STOLL	0.50	^				-		U •	0.	U •
TREASURER	0.50	х						0.	0.	0.
(6) BECKY HALLSTROM	0.50	^		\vdash				0.	٠,	0.
SECRETARY	0.50	х						0.	0.	0.
(7) ROBERTO ATIENZA	0.50	-								
BOARD MEMBER		Х			ł			0.	0.	0.
(8) GORDON DEAN	0.50			┢	 		\vdash			
BOARD MEMBER		х				1		0.	0.	0.
(9) DAVID FLOWER	0.50									
BOARD MEMBER		Х						0.	0.	0.
(10) CHARLES HAYES	0.50				Г					
BOARD MEMBER		Х						0.	0.	0.
(11) JODY LUNDBERG	0.50									
BOARD MEMBER		X			<u> </u>			0.	0.	0.
(12) HEATHER STAYKO	0.50									
BOARD MEMBER		X				L		0.	0.	0.
(13) STUART COX	0.50					ĺ			_	_
BOARD MEMBER (ENDED 6/2014)		Х				L		0.	0.	0.
(14) TIM DOTEN	0.50									
BOARD MEMBER (ENDED 6/2014)		Х	_	<u> </u>			<u> </u>	0.	0.	0.
(15) HEIDI ERICKSON	0.50	,,						_	,	_
BOARD MEMBER (ENDED 6/2014)	40 00	X	<u> </u>	<u> </u>	 	-	<u> </u>	0.	0.	0.
(16) MITCH OHLENDORF	40.00	ŀ		x	l			62,585.	0.	5,592.
CEBU EXECUTIVE DIRECTOR			_	^	 	 	-	04,383.	0.	5,592.

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	, and	d Hi	ghe	st C	Compensated Employe	es (continued)		
(A)	(B)			((C)			(D)	(E)		(F)
Name and title	Average	(do	not el	Pos	ition	than	one	Reportable	Reportable		Estimated
	hours per	box	, unle:	ss pe	rson	is bot or/trus	h an	compensation	compensation	- t	amount of
	week (list any	H .	Con an	1	1 5010))/ u u u	(61)	from	from related		other
	hours for	ndividual trustae or director						the organization	organizations (W-2/1099-MIS		compensation from the
	related	8 01	eats			sated		(W-2/1099-MISC)	(11727 1039 10110	°, [organization
	organizations	frust	nstitutional trustea		幺	Highest compensated employee		(,		- 1	and related
	below	viđual	tuttion	눥	Key employee	nest er loyee	Former			1	organizations
	line)	Ē	Itsti	Officer	Ķe	皇皇	E				
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		i	l							ļ	
			H	一	┢	\vdash	一				
		1									
1b Sub-total							▶	207,185.		0.	20,480.
c Total from continuation sheets to Part V								0.		0.	0.
d Total (add lines 1b and 1c)								207,185.		0.	20,480.
2 Total number of Individuals (including but r	ot limited to th	iose	liste	ed a	bov	e) wl	ho r	eceived more than \$100	0,000 of reportabl	е	_
compensation from the organization											0
											Yes No
3 Dld the organization list any former officer											
line 1a? If "Yes," complete Schedule J for s											3 X
4 For any individual listed on line 1a, is the se										- [
and related organizations greater than \$15											4 X
5 Did any person listed on line 1a receive or											
rendered to the organization? If "Yes," con	plete Schedui	e J	for s	uch	per	SON					5 X
Section B. Independent Contractors			1	•				<u> </u>	φ400 000 -£ + ·		Han Sun-
1 Complete this table for your five highest co										ipensa	auon trom
the organization. Report compensation for	tne calendar y	ear	ena	ng v	Nith	or w	ntnii	i	year.		(C)
(A) Name and business	address	M	ON	F!				(B) Description of s	services	C	ompensation
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									-		
				-							H - H - J - H - H - H - H - H - H - H -
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					_						
2 Total number of independent contractors (including but r	ot l	imite	d to	the	se li	ste	d above) who received r	nore than		
\$100,000 of compensation from the organ						0				<u> </u>	
											Form 990 (2014)

		Check if Schedule O conta	ains a response	or note to any li	ne 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
इस	1 a	Federated campaigns		128,625.				
la i		Membership dues						
اق ر		Fundraising events		115,240.				
選ば		Related organizations						
O,E		Government grants (contributi						
Ë		All other contributions, gifts, grant			1::::::::::::::::::::::::::::::::::::::			
토	•	similar amounts not included abov		687,203.				
語句		Noncash contributions included in lines		69,272.				
Contributions, Giffs, Grants and Other Similar Amounts		Total. Add lines 1a-1f			1,931,068.			
Ť	,,	Total / Total	***************************************	Business Code				
d)	2 a			Dusiness Code		Final County in County		
ķ	2 a b							
Program Service Revenue								
έş								
Ra	a		***************************************			<u> </u>		
S.	e		······································					
-	f	All other program service reve				<u> </u>		
	,	Total. Add lines 2a-2f			<u> </u>		1 11 11 11 11	[
	3	Investment income (including			27 660			27 660
		other similar amounts)			37,660.			37,660.
	4	Income from investment of tax		-				ļ
	5	Royalties						,
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less; rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	62,690.					
	b	Less: cost or other basis					131 1-,1 1-,1 1-, 1 . ; 1 ; ,	
		and sales expenses	59,165.					
	c	Gain or (loss)	3.525.					
	ď	Net gain or (loss)		<u> </u>	3,525.	1.6		3,525.
		Gross Income from fundralsing			Francisco International Intern			
Revenue	υα	including \$ 115,2						
, Kei		contributions reported on line						
		Contributions reported on line	1G). See	26 859				
her		Part IV, line 18	a	26,859.	Trian (
oth	D	Less: direct expenses		20,033.	0.			
		Net income or (loss) from fund		·····	U a	his in the same in		
	9 a	Gross Income from gaming ac						
		Part IV, line 19						
		Less: direct expenses	******	L			invia. Saivevier	
		Net income or (loss) from gam		·				<u> </u>
	10 a	Gross sales of inventory, less						
		and allowances					1. :1.:	
		Less: cost of goods sold		<u> </u>		This is deposit in the case		
	C	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu		Business Code		i da de la compania del compania de la compania de la compania del compania de la compania del compania del compania de la compania del compania d	There's the territor of	r halamaja dij
	11 a	MISCELLANEOUS R	EVENUE	900099	1,510.			1,510.
	þ	··						
	c	,						
	d	All other revenue						
			***************************************	>	1,510.		## 1. H ! ! ! . !	
	12	Total revenue. See instructions.			1,973,763.		0.	42,695.
43200 11-07	9				• • • • • • • • • • • • • • • • • • • •	·	•	Form 990 (2014)

Part IX Statement of Functional Expenses

До г	Check if Schedule O contains a response to include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	Bb, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	242 225	040 006		
	individuals. See Part IV, lines 15 and 16	912,906.	912,906.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	005 665	4.00 53.0	25 264	20 071
	trustees, and key employees	227,665.	162,530.	35,264.	29,871
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		44. 556		0 000
	persons described in section 4958(c)(3)(B)	119,176. 294,303.	114,736.	1,480. 58,847.	2,960 48,585
7	Other salaries and wages	294,303.	186,871.	58,847.	48,585
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	92,717.	71,929.	11,244.	9,544
10	Payroll taxes	45,667.	33,165.	6,753.	5,749
11	Fees for services (non-employees):				
а	Management	ļ			
	Legal				
	Accounting	15,179.		15,179.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	411 day				
a	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	3,879.			3,879
13	Office expenses	46,143.	8,647.	24,033.	13,463
14	Information technology				
15	Royalties		100		
16	Occupancy	8,500.	1,938.	3,544.	3,018
17		26,583.	2,720.		
	Travel				
18	for any federal, state, or local public officials				
40	Conferences, conventions, and meetings				
19					
20	Interest				
21	Payments to affiliates Depreciation, depletion, and amortization	2,782.	634.	1,160.	988
22	_ · ·	4,079.	930	1,701.	1,448
23	Other expenses. Itemize expenses not covered	T			
24	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 0.) MISCELLANEOUS	22,009.	0	22,009.	(
		17,000.	0		
b		1,400.	319		497
C		822.	0.		40
d		044.	U	044	,
е		1 0/0 010	1 407 205	. 223,483.	120,002
25	Total functional expenses. Add lines 1 through 24e	1,840,810.	1,497,325	443,403.	120,002
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundralsing solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (20

Form 990 (2014)
Part X | Balance Sheet

	ι. Λ .	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line In this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			318,974.	1	461,249
	2	Savings and temporary cash investments			9,213.	2	3,817
	3	Pledges and grants receivable, net	161,990.	3	131,275		
	4	Accounts receivable, net				4	
ŀ	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensations	ated er	nployees. Complete			
		Part II of Schedule L		***************************************	, , , , , , , , , , , , , , , , , , , ,	5	
-	6	Loans and other receivables from other disquali	fied pe	rsons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			
2		employees' beneficiary organizations (see instr).				6	
ASSELS	7	Notes and loans receivable, net				7	
١,	8	Inventories for sale or use				8	
ı	9	Prepaid expenses and deferred charges			13,074.	9	11,784
ı	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		28,997. 22,025.			6,972
ı	b	Less: accumulated depreciation			5,661.	10c	6,972
	11	Investments - publicly traded securities			436,179.	11	452,760
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets	• • • • • • • • • • • • • • • • • • • •			14	
	15	Other assets. See Part IV, line 11			0.45 0.04	15	4 055 055
-	16	Total assets. Add lines 1 through 15 (must equ			945,091.	16	1,067,857
	17	Accounts payable and accrued expenses			32,750.	17	43,303
	18	Grants payable		18			
	19	Deferred revenue	• • • • • • • • • • • • • • • • • • • •			19	
	20					20	
	21	Escrow or custodial account liability. Complete I		***************************************	· · · · · · · · · . · . · . · . · . · . · . · . · . · . · . · . · . · . · . · . ·	21	
	22	Loans and other payables to current and former					
		key employees, highest compensated employee				. :	
		Complete Part II of Schedule L				22	
- 1		Secured mortgages and notes payable to unrela				23	
ı		Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines		•	157,978.	۰,	147,719
	26	Schedule D Total liabilities. Add lines 17 through 25		***************************************	190.728.		191,022
-		Organizations that follow SFAS 117 (ASC 958) abou	k have X and	250,720.	20	151,022
,		complete lines 27 through 29, and lines 33 an		K liele Lass and			
	27	Unrestricted net assets			364,510.	27	461,098
	28	Temporarily restricted net assets	• • • • • • • • •		157,860.	28	183,244
					231,993.	29	232,493
		Organizations that do not follow SFAS 117 (A				2.0	
		and complete lines 30 through 34.		-,, -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1-2 12 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
	30	Capital stock or trust principal, or current funds			adional and a distribute	30	A market with a district
-		Pald-in or capital surplus, or land, building, or eq				31	
		Retained earnings, endowment, accumulated in				32	
	32				1	_~	
		Total net assets or fund balances			754,363.	33	876,835