PUBLIC DISCLOSURE COPY **

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 Open to Public Inspection

Α	For the	e 2016 calendar year, or tax year beginning JUL 1, 2016 and endir	<u>ng J</u> UN 30, 2017	
	Check if applicable	C Name of organization	D Employer identifi	
	Addre	INTERFAITH PEACE-BUILDERS		
	Name		03-0	598184
	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room	/suite E Telephone numbe	
	Final	1629 16mu Cmpppm NT		244-0821
	termin		G Gross receipts \$	583,230.
	Amen		H(a) Is this a group r	
	Application		for subordinates	
	pendir	SAME AS C ABOVE	H(b) Are all subordinates i	
1	Tax-exe	empt status: X 501(c)(3)	The second secon	list. (see instructions)
		te: NWW.IFPB.ORG	H(c) Group exemption	
K	Form of	organization: X Corporation Trust Association Other L	Year of formation: 2008	
P	art I	Summary	,	
a	1	Briefly describe the organization's mission or most significant activities: DELEGAT	ION-BASED EDUC	ATION ON
ııc		THE ISRAELI-PALESTINIAN CONFLICT		
L	2	Check this box if the organization discontinued its operations or disposed of	f more than 25% of its net as	ssets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)	3	14
5	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
es		Total number of individuals employed in calendar year 2016 (Part V, line 2a)		3
Ϋ́		Total number of volunteers (estimate if necessary)		20
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
_		Net unrelated business taxable income from Form 990-T, line 34		0.
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	220,123.	345,846.
	9	Program service revenue (Part VIII, line 2g)	318,651.	236,865.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	758.	445.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	74.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		583,230.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	166,925.	190,403.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
xbe	b	Total fundraising expenses (Part IX, column (D), line 25) 37,528.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	364,893.	378,115.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	531,818.	568,518.
	19	Revenue less expenses. Subtract line 18 from line 12	7,714.	14,712.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
set	20	Total assets (Part X, line 16)	276,706.	207,253.
at Age	21	Total liabilities (Part X, line 26)	179,241.	95,076.
결	22	Net assets or fund balances. Subtract line 21 from line 20	97,465.	112,177.
_	art II	Signature Block		
		lties of perjury, I declare that I have examined this return, including accompanying schedules and s		y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pr		LIA
		Signature of officer		18
Sig		In Science and the Science	Date	
Her	е	NADA EL-ERYAN, MANAGING DIRECTOR Type or print name and title		
			Date Check	PTIN
Da:		Print/Type preparer's name CLEANING MALE I REPORTED TO SIGNATURE Preparer's signature	8 11/18 II	
Paid	1	GLENN MILLER, CPA		
	Only	Firm's name WEGNER CPAS, LLP	Firm's EIN >	39-0974031
use	Only	Firm's address 400 NORTH WASHINGTON STREET	Dt	2 E10 0000
		ALEXANDRIA, VA 22314	Phone no. 7 0	3-519-0990
May	tne IF	RS discuss this return with the preparer shown above? (see instructions)	*************	X Yes No

Form 990 (2016)

Form 990 (2016) INTERFAITH P Part IV Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
	If "Yes," complete Schedule A	1	X	
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			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
6	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		X
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		X

Form 990 (2016)

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		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			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		X
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		X
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			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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		X
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		X
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	500,000		
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			77
	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			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

	990 (2016) INTERFAITH PEACE-BUILDERS 03-0598	184	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		······	Ш
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1	4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 3			.,,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	-	X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			37
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	-	+
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			v
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	-	X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	Δ.
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с	-	+
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	C-		х
	any contributions that were not tax deductible as charitable contributions?	6a	_	Α_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
_	were not tax deductible?	OD	_	+
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1.5		T
С	to file Form 8282?	7c		х
4	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
a	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
'	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
b h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
Ü	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	District the state of the state	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	On the form when the broken believe			
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?	12a	1	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	1		
С	Enter the amount of reserves on hand			

Form 990 (2016)

14a 14b

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

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 6a, 6b, 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			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	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 appoint 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 year by the following:			
а	The governing body?	8a	X	
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 reached at the			
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	Did the second still be been been been been been as officered.	40	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	Λ	
	51.1. S.	100	Х	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	Λ	
C	in Schedule O how this was done	12c	Х	
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	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	X	
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	NADA EL-ERYAN - 202-244-0821			
	1628 16TH STREET NW, WASHINGTON, DC 20009			

Form 990 (2016)

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 Title	(B) Average hours per week	age (do box,			rson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
1) CATHY SULTAN	3.00									
OARD CHAIR		X		X				0.	0.	0
2) LORRAINE LEBLANC	3.00								_	_
TICE CHAIR		X		X		_		0.	0.	0
3) ILISE COHEN	3.00									
OARD MEMBER		X				_		0.	0.	0
4) MANAL FAKHOURY	3.00								_	_
OARD MEMBER		X				-		0.	0.	0
5) MARK HARRISON	3.00							_	_	_
SOARD MEMBER	2 00	X				-		0.	0.	0
6) ADAM HOROWITZ	3.00	77						0.	0.	0
OARD MEMBER	2 00	X				-		0.	0.	U
7) KATIE HUERTER	3.00	х						0.	0.	0
OARD MEMBER	3.00	Λ			_			0.	0.	0
8) HANAN IDILBI	3.00	Х						0.	0.	0
SOARD MEMBER	3.00	Δ						0.		
9) RICHARD MOSS	3.00	х						0.	0.	0
OARD MEMBER 10) LISA NESSAN	3.00									
BOARD MEMBER	0.00	X						0.	0.	0
11) JOI ORR	3.00									
BOARD MEMBER		X						0.	0.	0
12) ALEXA POLETTO	3.00									
BOARD MEMBER		X						0.	0.	0
13) MARY POOR	3.00									
SOARD MEMBER		X						0.	0.	0
14) SARAH SCRUGGS	3.00								_	
BOARD MEMBER		X				-		0.	0.	0
15) MICHAEL DALY	40.00	-						F4 446	_	10 550
MANAGING DIRECTOR		-		X				51,146.	0.	12,773
		-								
										Form 990 (201

Form **990** (2016)

	(A) Name and title	(B) Average hours per week (list any	officer and a director/trustee				than	one n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estimate amount other compensa	
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	0)	from organ and	n the nization related izations
- 1													
	Sub-total							>	51,146.		0.	12	,773
	Total from continuation sheets to Part \ Total (add lines 1b and 1c) Total number of individuals (including but compensation from the organization							▶	0. 51,146. ceived more than \$100		0.	12	,773
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for								nighest compensated en			3	res No
4 5	For any individual listed on line 1a, is the sand related organizations greater than \$15 Did any person listed on line 1a receive or	50,000? If "Yes,	le co " <i>co</i>	mple	ensa ete S	atior Sche	and adule	oth J fo	er compensation from tor such individual	the organization		4	х
Sec	rendered to the organization? If "Yes," control B. Independent Contractors	mplete Schedul	e J t	or su	ıch	pers	son .					5	X
1	Complete this table for your five highest c										ensa	ation fro	m
	the organization. Report compensation fo (A) Name and busines	-		endii ONE		vith	or w	ithin	(B) Description of s		C	(C) ompens	
	Total number of independent contractors												

Part VIII	Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any line	in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ıts	1 a	Federated campaigns	1a					
ran		Membership dues						
E, G		Fundraising events						
ar A		Related organizations						
S,E		Government grants (contributi	Carlos and					
Sign		All other contributions, gifts, grant						
her Just	•	similar amounts not included above		345,846.				
₩ 5 5		Noncash contributions included in lines	13-3-3-3-3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	313/0101				
Contributions, Gifts, Grants and Other Similar Amounts	-	Total. Add lines 1a-1f			345,846.			
0 10		Total. Add lines 14-11		Business Code	343,040.			
σ.	0 -	EDUCATIONAL DEL	ECATTON.	900099	236,865.	236,865.		
Š.				300033	230,003.	230,003.		+
ne	b							
Wen S	c							
Re	d							
Program Service Revenue	е	24 0						
-	f	All other program service reve			026 065			
\rightarrow		Total. Add lines 2a-2f			236,865.			
	3	Investment income (including			4.45			
		other similar amounts)			445.			445.
	4	Income from investment of tax						
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
		Net gain or (loss)		•				
e		Gross income from fundraising	g events (not					
Ver		including \$						
Be		contributions reported on line						
Other Revenu		Part IV, line 18						
₹		Less: direct expenses						
		Net income or (loss) from fund		>				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
	С	Net income or (loss) from gam	ing activities					
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold		9				
-	С	Net income or (loss) from sales	s of inventory .					
-		Miscellaneous Revenue	е	Business Code				3-21.0
	11 a	OTHER INCOME		900099	74.			74.
	b							
	С							
		All other revenue						
	е	Total. Add lines 11a-11d		> _	74.			
	12	Total revenue. See instructions.		>	583,230.	236,865.	0	. 519.

Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons	e or note to any line in t	his Part IX	***************************************	
	not include amounts reported on lines 6b, 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				
0	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22				
_					
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	E0 6E1	22 060	26 042	0 010
	trustees, and key employees	59,651.	23,860.	26,843.	8,948
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	100 004	02 226	0.704	0 704
7	Other salaries and wages	109,804.	92,236.	8,784.	8,784
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)		4		
9	Other employee benefits	5,589.	4,695.	447.	447
10	Payroll taxes	15,359.	11,212.	2,688.	1,459
11	Fees for services (non-employees):				
а	Management			300 000 000	
b	Legal	895.		895.	
С	Accounting	2,160.		2,160.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
•	column (A) amount, list line 11g expenses on Sch O.)	26,417.	22,250.	4,167.	
12	Advertising and promotion	2,092.	1,899.	193.	
13	Office expenses	31,775.	7,903.	9,472.	14,400
14	Information technology	3,599.	569.	3,030.	
15	Royalties				
16	Occupancy	17,239.		17,239.	
17	Travel	289,388.	278,573.	7,325.	3,490
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,677.	1,596.	1,081.	
20	Interest	2/0//-	1,000.		
20	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,873.		1,873.	
23 24	Other expenses. Itemize expenses not covered	1,075.		1,0,0.	
.4	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.)				
а					
b					
С					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	568,518.	444,793.	86,197.	37,528
26	Joint costs. Complete this line only if the organization				- , ,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2016)

Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	50,552.	1	97,348
2	Savings and temporary cash investments	213,334.	2	100,396
3	Pledges and grants receivable, net	•	3	•
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			
20	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
8 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	12,820.		9,509
	a Land, buildings, and equipment: cost or other			
100	basis. Complete Part VI of Schedule D 10a			
١,	b Less: accumulated depreciation 10b		10c	
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	276,706.	16	207,253
17	Accounts payable and accrued expenses	9,555.		1,476
18	Grants payable	•	18	•
19	Deferred revenue	169,686.	19	93,600
20	Tax-exempt bond liabilities	•	20	•
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	Loans and other payables to current and former officers, directors, trustees,			
Clabilities 22	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		25	
26	Total liabilities. Add lines 17 through 25	179,241.	26	95,076
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
SS	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	97,465.	27	112,177
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
Ē	Organizations that do not follow SFAS 117 (ASC 958), check here			
5	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32 33 32 33 33 33 33 33 33 33 33 33 33	Retained earnings, endowment, accumulated income, or other funds		32	
ž 33	Total net assets or fund balances	97,465.	33	112,177
34	Total liabilities and net assets/fund balances	276,706.	34	207,253

Form **990** (2016)

Pa	rt 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		3,2			
2	Total expenses (must equal Part IX, column (A), line 25)	2		$\frac{8,5}{4,7}$			
3	Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	7,4	<u>65.</u>		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	11	2,1	77.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,					
	consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit					
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				
			Form	990	2016)		

SCHEDULE A

(Form 990 or 990-EZ)

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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection
Employer identification number

Nam	e of t	the organization					E	mployer	identification number
				CE-BUILDERS				0	3-0598184
Pa	rt I	Reason for Public (Charity Status	All organizations must co	omplete th	is part.) Se	ee instructions.		
The	organ	ization is not a private found	ation because it is:	(For lines 1 through 12, of	heck only	one box.)			
1		A church, convention of chi	urches, or associati	on of churches describe	d in section	on 170(b)(1	1)(A)(i).		
2		A school described in secti	on 170(b)(1)(A)(ii).	(Attach Schedule E (Forn	n 990 or 9	90-EZ).)			
3		A hospital or a cooperative	hospital service org	anization described in se	ection 170	0(b)(1)(A)(ii	ii).		
4		A medical research organization	ation operated in co	onjunction with a hospita	describe	d in sectio	n 170(b)(1)(A)(ii	ii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a co	ollege or university owner	d or opera	ted by a g	overnmental uni	it describ	ed in
		section 170(b)(1)(A)(iv). (C	complete Part II.)						
6		A federal, state, or local gov	vernment or governi	mental unit described in	section 1	70(b)(1)(A)	(v).		
7		An organization that norma	lly receives a substa	antial part of its support	rom a gov	ernmental	unit or from the	general	public described in
		section 170(b)(1)(A)(vi). (Co	omplete Part II.)						
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operat	ed in conju	inction with a la	nd-grant	college
		or university or a non-land-g	rant college of agric	culture (see instructions)	Enter the	name, city	y, and state of the	ne colleg	e or
		university:							
10	X	An organization that norma	lly receives: (1) more	e than 33 1/3% of its sup	port from	contribution	ons, membershi	ip fees, a	nd gross receipts from
		activities related to its exen	npt functions - subje	ect to certain exceptions,	and (2) no	o more tha	n 33 1/3% of its	s support	from gross investment
		income and unrelated busin	ness taxable income	e (less section 511 tax) fr	om busine	esses acqu	ired by the orga	anization	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclus	sively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a						y out the	purposes of one or
		more publicly supported or							
		lines 12a through 12d that							
а		Type I. A supporting orga	anization operated,	supervised, or controlled	by its sup	ported org	ganization(s), typ	pically by	giving
		the supported organization							
		organization. You must o							
b		Type II. A supporting org			tion with i	ts support	ed organization	(s), by ha	ving
		control or management o							
		organization(s). You mus							
С		Type III functionally inte			in connec	tion with,	and functionally	integrate	ed with,
		its supported organization	•					•	
d		Type III non-functionally	3 1 2					ed organi	zation(s)
-		that is not functionally int							
		requirement (see instruct	150						
е		Check this box if the orga						. Type III	
	-	functionally integrated, or					20 20		
f	Ente	er the number of supported of		,,	3 - 3 -				
		vide the following information		ed organization(s).					
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the org	anization listed ing document?	(v) Amount of m	onetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see inst	ructions)	support (see instructions)
				above (dee mondeniens)					
_									

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, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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						
	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.						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	, , , , , , , , , , , , , , , , , , ,	1	X-7	12/	107	.,
8	Gross income from interest.						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
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.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities, e	etc. (see instructi	ions)			12	
	First five years. If the Form 990 is for t			d, fourth, or fifth ta	ax vear as a section		
	organization, check this box and stop			CONT. PROCESSION SECTIONS			▶ □
Sec	ction C. Computation of Public						
14	Public support percentage for 2016 (lin	ne 6, column (f) d	livided by line 11, o	column (f))		14	%
	Public support percentage from 2015					15	%
	33 1/3% support test - 2016. If the or						ox and
	stop here. The organization qualifies a	s a publicly supp	orted organization				
b	33 1/3% support test - 2015. If the or						
	and stop here. The organization qualifi	es as a publicly	supported organiz	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the "facts	s-and-circumstar	nces" test, check t	nis box and stop h	ere. Explain in Pa	art VI how the organ	nization
	meets the "facts-and-circumstances" to	est. The organiza	ation qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances test						
	more, and if the organization meets the	"facts-and-circu	ımstances" test, c	neck this box and	stop here. Explai	n in Part VI how the	e
	organization meets the "facts-and-circu	ımstances" test.	The organization of	qualifies as a publi	cly supported org	anization	
18	Private foundation. If the organization	did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box	and see instruction	s
					Sch	edule A (Form 990	or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 INTERFAITH PEACE-BUILDERS 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	ciow, piease comp	nete i art ii.j				
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.")	164.234.	180,242.	167.533.	220,123.	345.846.	1077978.
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the				318,651.		
organization's tax-exempt purpose	417,252.	302,029.	201,055.	310,031.	230,005.	1010050.
3 Gross receipts from activities that are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ- ization'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	581,486.	542,271.	449,386.	538,774.	582,711.	2694628.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received	10,292.	31,055.	30,225.	20,259.	22,155.	113,986.
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	22.	5,572.				5,594.
c Add lines 7a and 7b	10,314.	36,627.	30,225.	20,259.	22,155.	119,580.
8 Public support. (Subtract line 7c from line 6.)	10,314.	30,027.	30,223.	20,233.	22,133.	2575048.
Section B. Total Support						23/3040.
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6	581,486.	542,271.			582,711.	2694628.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	340.	529.	492.	758.	445.	2,564.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	340.	529.	492.	758.	445.	2,564.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	340.	323.	472.	750.	443.	2,304.
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.)	581,826.	542,800.	449,878.	539,532.	583,156.	2697192.
14 First five years. If the Form 990 is for						
check this box and stop here						
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2016 (I	ne 8, column (f) di	vided by line 13, c	olumn (f))		15	95.47 %
16 Public support percentage from 2015					16	96.06 %
Section D. Computation of Inves	stment Income	e Percentage				
17 Investment income percentage for 20	16 (line 10c, colum	nn (f) divided by lin	e 13, column (f))		17	.10 %
18 Investment income percentage from 2					18	10.00 %
19a 33 1/3% support tests - 2016. If the						
more than 33 1/3%, check this box and b 33 1/3% support tests - 2015. If the	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ition	▶ X
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization						

Part IV

Supporting Organizations

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

Section A. All Supporting Organi	zations
----------------------------------	---------

- 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		_
	3b		
	3с		
	4a		_
	4b		_
	4c		
	5a		
	5b 5c		
	6		
	7		_
	8		
	9a		
	9b		
	9c		
	10a		
n 0	10b	0. E7	2016

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

Schedule A (Form 990 or 990-EZ) 2016

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on l	Nov. 20, 1970 (explain in	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co			
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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		
7	Check here if the current year is the organization's first as a non-functional	ly integrate	ed Type III supporting org	ganization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2016

Par	t V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Section	on D -	Distributions			Current Year
1	Amou	nts paid to supported organizations to accomplish exe	mpt purposes		
2	Amou	nts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organ	izations, in excess of income from activity			
3	Admir	nistrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amou	nts paid to acquire exempt-use assets			
5	Qualif	ied 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	Distrib	outions to attentive supported organizations to which the	he organization is responsive	e	
	(provid	de details in Part VI). See instructions			
9	Distrib	outable amount for 2016 from Section C, line 6			
10	Line 8	amount divided by Line 9 amount			
			(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
Section	on E -	Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distrib	outable amount for 2016 from Section C, line 6			
	Gran A	distributions, if any, for years prior to 2016 (reason-			
		ause required- explain in Part VI). See instructions			
		s distributions carryover, if any, to 2016:			
а					
b					
С	From	2013			
d	From	2014			
е	From 2	2015			
f	Total	of lines 3a through e			
g	Applie	ed to underdistributions of prior years			
h	Applie	ed to 2016 distributable amount			
i	Carry	over from 2011 not applied (see instructions)			
j	Rema	inder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distrib	outions for 2016 from Section D,			
	line 7:	\$			
а	Applie	ed to underdistributions of prior years			
b	Applie	ed to 2016 distributable amount			
С	Remai	inder. Subtract lines 4a and 4b from 4			
5	Remai	ining underdistributions for years prior to 2016, if			
	any. S	subtract lines 3g and 4a from line 2. For result greater			
	than z	ero, explain in Part VI. See instructions			
6	Remai	ining underdistributions for 2016. Subtract lines 3h			
	and 4	o from line 1. For result greater than zero, explain in			
	Part V	I. See instructions			
7	Exces	ss distributions carryover to 2017. Add lines 3j			
	and 4	3			
8	Break	down of line 7:			
а					
		s from 2013			
С	Exces	s from 2014			
d	Exces	s from 2015			

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No. 1545-0047

2016

Name of	the	organization
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Employer identification number

	INTERFAITH PEACE-BUILDERS	03-0598184
Organization	n type (check one):	
Filers of:	Section:	
Form 990 or 9	990-EZ X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	r organization is covered by the General Rule or a Special Rule . section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	cial Rule. See instructions.
General Rule	e	
	an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to perty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor.	
Special Rule	es	
sect any	an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sutions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the i) Form 990-EZ, line 1. Complete Parts I and II.	3, 16a, or 16b, and that received from
year	an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received r, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or prevention of cruelty to children or animals. Complete Parts I, II, and III.	
year is ch purp	an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received r, contributions exclusively for religious, charitable, etc., purposes, but no such contributions total hecked, enter here the total contributions that were received during the year for an exclusively repose. Don't complete any of the parts unless the General Rule applies to this organization becausious, charitable, etc., contributions totaling \$5,000 or more during the year	aled more than \$1,000. If this box eligious, charitable, etc., use it received <i>nonexclusively</i>
but it must a	organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedu Inswer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or or doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

INTERFAITH PEACE-BUILDERS

03-0598184

Part I	Contributors (See instructions). Use duplicate copies of Part I if ac	lditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$11,600.	Person X Payroll
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5</u>		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$8,500.	Person X Payroll
100150 10 10		Schodule P /Form	990 990-F7 or 990-PF) (2016)

Name of organization

Employer identification number

INTERFAITH PEACE-BUILDERS

03-0598184

Person Payroll Noncash (Complete Financash compayroll 5,000. Type of complete Financash compayroll Noncash (Complete Financash compayroll Noncash (Complete Financash compayroll Noncash compayroll Nonca	Part II for contributions.) (d) contribution X Part II for contribution
(c) Type of c Solutions Payroll Noncasi (Complete innoncash complete	Part II for contributions.) (d) contribution X Part II for contribution
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	Contributions Person Payroll Noncasi (Complete in noncash contributions Type of contributions Person Payroll Noncasi (Complete in noncash contributions) Person Payroll Noncasi (Complete in noncash contributions)

Employer identification number

INTERFAITH PEACE-BUILDERS

03-0598184

art II	Noncash Property (See instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Name of organization

Employer identification number

INTERF Part III	AITH PEACE-BUILDERS Exclusively religious, charitable, etc., cor the year from any one contributor. Complete completing Part III, enter the total of exclusively religion.	columns (a) through (e) and the f	following line entry. For organization	ions _
	Use duplicate copies of Part III if additio		oo or less for the year, (chick this line, o	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De:	scription of how gift is held
		(e) Transfer of	gift	
,	Transferee's name, address, a	and ZIP + 4	Relationship of tr	ransferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held
		(e) Transfer of	gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of tr	ransferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held
	Transferee's name, address, a	(e) Transfer of and ZIP + 4		ansferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held
-		(e) Transfer of	gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of tr	ansferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

2016
Open to Public

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

		01/01/41 (5) or (6) organiza	tions: Complete Bort III			
		01(c)(4), (5), or (6) organiza nization	tions. Complete Part III.		Em	ployer identification number
			ITH PEACE-BUILDE	RS	-	03-0598184
Part	I-A	Complete if the org	ganization is exempt und	er section 501(c	or is a section 527	organization.
2 P	olitical	campaign activity expendi	zation's direct and indirect politic tures ign activities		>	\$
David		0 11 77			1/01	
	I-B		ganization is exempt und			
			incurred by the organization und			
			incurred by organization manage			
			on 4955 tax, did it file Form 4720			
		describe in Part IV.			***************************************	Yes No
Part	I-C	Complete if the ord	ganization is exempt und	er section 501(c)	except section 50	(c)(3).
			d by the filing organization for se			
			nization's funds contributed to ot			Ψ
						\$
			s. Add lines 1 and 2. Enter here a			*
						\$
			1120-POL for this year?			
			nployer identification number (El			
			ition listed, enter the amount paid			
			omptly and directly delivered to			ate segregated fund or a
р	olitical a	action committee (PAC). If	additional space is needed, prov	ide information in Par	t IV.	
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

Schedule C (Form 990 or 990-EZ) 2016

896.

935.

888.

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

1,034.

155,369.

3,753.

Schedule C (Form 990 or 990-EZ) 2016 INTERFAITH PEACE-BUILDERS 03-059818 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)
of the lobbying activity.	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or			
local legislation, including any attempt to influence public opinion on a legislative matter			
or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), 501(c)(6).	section 501(c)(5)	, or se	ction
co (CNO)			Yes
1 Were substantially all (90% or more) dues received nondeductible by members?		1	
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures Part III-B Complete if the organization is exempt under section 501(c)(4), 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered.	from the prior year? section 501(c)(5)	2 3 or se	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures Part III-B Complete if the organization is exempt under section 501(c)(4), 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answanswered "Yes."	from the prior year? section 501(c)(5) vered "No," OR (l	2 3 , or se o) Par	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answarswered "Yes." Dues, assessments and similar amounts from members	from the prior year? section 501(c)(5) vered "No," OR (2 3 or se	
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SCHEDULE F (Form 990)

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number

Name of the organization				Employer ide	ntification number
INTERFAITH PEAC				03-0598	184
		ctivities Ou	tside the United States. Comple	ete if the organization answere	d "Yes" on
Form 990, Part IV		maintain recor	ds to substantiate the amount of its gr	ants and other assistance	
-			the selection criteria used to award the		Yes No
	,-				
	cribe in Part V the	organization's	procedures for monitoring the use of it	s grants and other assistance	outside the
United States.					
	(b) Number of		an be duplicated if additional space is		(0 T-+-1
(a) Region	offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a program service,	(f) Total expenditures for and investments in the region
MIDDLE EAST AND					
NORTH AFRICA	0	0	PROGRAM SERVICES	EDUCATIONAL TRIPS	346,136,
3 a Sub-total	0	0			346,136
b Total from continuation					
sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	_	0			345 335
LHA For Paperwork Reducti	ion Act Notice		tions for Form 990	Schadula	F (Form 990) 2016

632071 09-21-16

Page 2

INTERFAITH PEACE-BUILDERS

Schedule F (Form 990) 2016

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

1 (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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	recipient organization the grantee or counse	ns listed above that are lel has provided a section	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-ex	empt by		
s Eliter total number of other organizations of entities	other organizations o	or emines					Sched	Schedule F (Form 990) 2016

Schedule F (Form 990) 2016 INTERFAITH PEACE-BUILDERS

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance (b) Region	(b) Region	c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
						Sched	Schedule F (Form 990) 2016

	Totelgii Fornis		
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	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X 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	X 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	X 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	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2016

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

-

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.

2016 Open to Public

OMB No. 1545-0047

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

m990. Inspection
Employer identification number

03-0598184

Name of the organization

INTERFAITH PEACE-BUILDERS

FORM 990, PART VI, SECTION B, LINE 11B:

THE FINANCE COMMITTEE PERFORMS A DETAILED REVIEW OF THE FORM 990 IN DRAFT.

A FINAL FORM 990 IS THEN PREPARED, REVIEWED, AND CONSENTED TO BY THE FULL

BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH BOARD MEMBERS SIGNS A CONFLICT OF INTEREST STATEMENT ANNUALLY,

AFFIRMING THAT S/HE: HAS RECEIVED A WRITTEN COPY OF THE IFPB CONFLICT OF

INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, AND HAS INDICATED

THAT S/HE IS IN COMPLIANCE WITH THE POLICY AND/OR HAS DISCLOSED AND

POTENTIAL CONFLICTS OF INTEREST.

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN

INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND

BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS

AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING

THE PROPOSED TRANSACTION OR ARRANGEMENT.

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND

AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE

GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT

OF INTEREST IS DISCUSSED. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL

USE ITS REGULAR DECISION-MAKING PROCESS TO DECIDE IF A CONFLICT OF INTEREST

EXISTS.

TO ADDRESS ANY CONFLICTS OF INTEREST THAT EXISTS, THE INTERESTED PERSON MAY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE DECISION-MAKING PROCESS ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. HE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A CONSENSUS OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION FOR ALL EMPLOYEES, INCLUDING THE MANAGING DIRECTOR, IS REVIEWED BY THE BOARD'S PERSONNEL COMMITTEE AND IS BASED ON A REVIEW OF NON-PROFIT SALARY SURVEYS AND PERFORMANCE.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO PUBLIC UPON REQUEST.