Teaching Peace, Inc. dba Longmont Community Justice Partnership (a nonprofit Colorado corporation)

Longmont, Colorado

Financial Statements

December 31, 2016

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HAMBLIN AND ASSOCIATES, LLC

Certified Public Accountants

Member of the American Institute of Certified Public Accountants

3082 Evergreen Parkway, Suite 2 Evergreen, CO 80439 (303) 694-2727

INDEPENDENT ACCOUNTANT'S REVIEW REPORT

To:

Executive Director Kathleen McGoey and the Board of Directors of Longmont Community Justice Partnership Longmont, Colorado

We have reviewed the accompanying financial statements of Longmont Community Justice Partnership. (a nonprofit organization), which comprise the statement of financial position as of December 31, 2016, and the related statements of activities and cash flows for the year then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

Accountant's Responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion.

Accountant's Conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

Hamblin and Associates, IIT

Evergreen, Colorado April 4, 2017

Statements of Financial Position

| December 31, 2016 | 2016 | 2015 | | |
|---|---|---|--|--|
| ASSETS | | | | |
| Current Assets Cash and cash equivalents Investments, fair value Grants and other receivables Prepaid expenses Total current assets | \$ 93,128 2,978 3,140 3,022 102,268 | \$ 41,750 27,281 6,579 4,468 80,078 | | |
| Total assets | \$ 102,268 | \$ 80,078 | | |
| LIABILITIES AND NET ASSETS | | | | |
| Current Liabilities Accounts payable Accrued wages, PTO, and payroll taxes Funds held as fiscal agent Total current liabilities | \$ 3,008 3,610 400 7,018 | 7,276 592 1,200 9,068 | | |
| Net Assets Unrestricted Endowment - board designated Undesignated | 2,978 92,272 | 2,884 68,126 | | |
| Total net assets | 95,250 | 71,010 | | |
| Total liabilites and net assets | \$ 102,268 | \$ 80,078 | | |

STATEMENTS OF ACTIVITIES

| Year Ended December 31, 2016 | | | 20 |)16 | | | 2015 | | | | | | |
|---------------------------------------|-----|------------|------|---------|--------------|----|------------|-----|-----------|----|-----------|--|--|
| | | | Temp | orarily | | | | Ten | nporarily | | | | |
| | Uni | restricted | Rest | ricted | Total | Un | restricted | Re | stricted | | Total | | |
| Support and Revenue | · | _ | | | | · | _ | | _ | | | | |
| Support | | | | | | | | | | | | | |
| Grants: | | | | | | | | | | | | | |
| Grants-State | \$ | 52,199 | \$ | - | \$ 52,199 | \$ | 74,009 | \$ | - | \$ | 74,009 | | |
| Grants-County of Boulder | | - | | - | _ | | 0 | | - | | - | | |
| Grants-City of Longmont | | 200,000 | | - | 200,000 | | 200,000 | | - | | 200,000 | | |
| Grants-Other | | 39,604 | | - | 39,604 | | 35,914 | | <u> </u> | | 35,914 | | |
| Total grants | | 291,803 | | - | 291,803 | · | 309,923 | | - | · | 309,923 | | |
| Contributions | | 25,343 | | _ | 25,343 | | 26,261 | | - | | 26,261 | | |
| Net assets released from restrictions | | , - | | _ | · - | | 39,666 | | (39,666) | | , - | | |
| Total Support | | 317,146 | | | 317,146 | | 375,850 | | (39,666) | | 336,184 | | |
| Revenue | | | | | | | | | | | | | |
| Program revenue | | 38,118 | | _ | 38,118 | | 31,700 | | _ | | 31,700 | | |
| Interest and net gains/losses | | 217 | | _ | 217 | | 47 | | _ | | 47 | | |
| Total revenue | | 38,335 | | - | 38,335 | | 31,747 | | - | | 31,747 | | |
| Total support and revenue | | 355,481 | | | 355,481 | | 407,597 | | (39,666) | | 367,931 | | |
| Functional Expenses | | | | | | | | | | | | | |
| Program services | | 235,155 | | - | 235,155 | | 424,108 | | - | | 424,108 | | |
| Supporting services | | <u> </u> | | | | - | <u> </u> | | | | , | | |
| Fundraising | | 29,461 | | - | 29,461 | | 4,481 | | - | | 4,481 | | |
| General and administrative | | 66,625 | | _ | 66,625 | | 122,286 | | - | | 122,286 | | |
| Total supporting services | | 96,086 | | - | 96,086 | | 126,767 | | - | | 126,767 | | |
| Total functional expenses | | 331,241 | | _ | 331,241 | | 550,875 | | | | 550,875 | | |
| Change in Net Assets | | 24,240 | | - | 24,240 | | (143,278) | | (39,666) | | (182,944) | | |
| Net Assets, Beginning of Year | | 71,010 | | | 71,010 | | 214,288 | | 39,666 | | 253,954 | | |
| Net Assets, End of Year | \$ | 95,250 | \$ | | \$ 95,250 | \$ | 71,010 | \$ | | \$ | 71,010 | | |

STATEMENTS OF CASH FLOWS

| Year Ended December 31, 2016 | 2016 | 2015 |
|---|--|---|
| Cash Flows From Operating Activities Change in net assets Adjustments to reconcile change in net assets to net cash provided by operating activities | \$ 24,240 | \$ (182,944) |
| Increase (decrease) from changes in assets and liabilities Grants and other receivables Prepaid expenses Accounts payable Accrued wages, PTO, and payroll taxes Deferred revenue Funds held as fiscal agent | 3,439 1,446 (4,268) 3,018 - (800) | 77,215 (779) 5,208 (15,503) (60,430) 940 |
| Net cash provided by operating activites | 27,075 | (176,293) |
| Cash Flows From Investing Activities | | |
| Allocation of restricted cash Allocation of investments Net cash used by investing activities | 24,303 24,303 | 59 24,024 24,083 |
| The todal account of the country desired | 21,000 | 21,000 |
| Net Increase (Decrease) in Cash and Cash Equivalents | 51,378 | (152,210) |
| Cash and Cash Equivalents, Beginning of Year | 41,750 | 193,960 |
| Cash and Cash Equivalents, End of Year | \$ 93,128 | \$ 41,750 |

Notes to Financial Statements

December 31, 2016

Note 1 - Nature of Organization and Significant Accounting Policies

Nature of Organization. Teaching Peace, Inc., dba Longmont Community Justice Partnership hereinafter referred to as "the Organization" or "LCJP" was incorporated in November 1994 for the purpose of providing restorative justice to residents in and around Longmont, Colorado. Program values include respect, responsibility, relationship, repair, and reintegration.

The basic programs of the Organization are as follows:

CRJ - The Community Restorative Justice (CRJ) program works in conjunction with the Longmont Police Department, Municipal Court and Probation to work with victims and offenders to successfully repair harms caused by crime and conflict. Re-offense rates for offenders who successfully complete restorative justice processes average only 10%. Ninety-five percent (95%) of participants report being satisfied with the CRJ process.

RPS - The Restorative Practice in Schools (RPS) is a training program specific to school personnel. LCJP trains school staff, administrators, and district level officials in the use restorative practices as tools to address students' behavioral issues, and interventions that can be used in place of suspensions or expulsions. RPS is a joint effort of LCJP, Longmont Police Department's School Resource Officers and the St. Vrain Valley School District.

Volunteer & Training: The Volunteer & Training program supports all LCJP services through the recruitment, training, and maintenance of volunteers. Volunteers' presence and leadership enables LCJP's services to be truly community-driven. In 2016, volunteers contributed over 2200 hours of their time to support implementation of restorative justice in Longmont. In addition to volunteers, LCJP trains youth and adults from various stakeholder groups, including schools, universities, law enforcement agencies, and judicial districts to utilize restorative practices and participate in restorative justice processes.

Use of Estimates. The preparation of financial statements in conformity with generally accepted accounting principles in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Notes to Financial Statements

December 31, 2016

Basis of Accounting. The financial statements of the Organization have been prepared on the accrual basis of accounting and, accordingly, reflect all significant receivables, payables, and other liabilities.

Basis of Presentation. LCJP distinguishes between contributions received for each net asset category in accordance with donor-imposed restrictions. The Organization complies with established standards for external reporting by not-for-profit organizations, which requires that resources be classified for reporting purposes into three net asset categories according to externally (donor) imposed restrictions. The three net asset categories are as follows:

Unrestricted net assets. Unrestricted net assets are not subject to donor-imposed stipulations.

Temporarily restricted net assets. Temporarily restricted net assets are subject to donorimposed stipulations that may or will be met either by actions of the Organization or the passage of time. Once the stipulation is met, the assets are released from restriction and the expenditure is recorded in the activities of unrestricted net assets.

Permanently restricted net assets. Permanently restricted net assets are subject to donor-imposed stipulations that require the donated assets to be maintained permanently by the Organization. Generally, the donors of these assets would permit the Organization to use all or part of the income earned on the corpus for general or specific purposes. Currently, there are no permanently restricted net assets.

Board-Designated Endowment. LCJP has interpreted the State of Colorado enacted Uniform Prudent Management of Institutional Funds Act (UPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, LCJP classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by LCJP in a manner consistent with the standard of prudence prescribed by UPMIFA. In accordance with UPMIFA, LCJP considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: (1) the duration and preservation of the various funds, (2) the purposes of the donor-restricted endowment funds, (3) general economic conditions, (4) the possible effect of inflation and deflation, (5) the expected total return from income and the appreciation of investments, (6) other resources of LCJP, and (7) LCJP's investment policies.

Notes to Financial Statements

December 31, 2016

Note 1 - Nature of Organization and Significant Accounting Policies (continued)

The State of Colorado enacted UPMIFA was effective September 1, 2008. The provisions of this law apply to endowment funds existing on or established after that date. Currently, LCJP has only board-designated endowment funds and does not currently have any donor-restricted funds that meet the definition of endowment funds under UPMIFA. As required by accounting principles generally accepted in the United States of America, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

Functional Allocation of Expenses. Direct expenses have been allocated to the applicable program for which the expenses were incurred. Indirect expenses have been allocated between program and supporting services based on an analysis of personnel time and space utilized for the related activities.

Cash and Cash Equivalents. LCJP considers all highly liquid debt instruments with maturities of three months or less to be cash equivalents. The carrying value of cash and cash equivalents approximates fair value because of the short maturities of those financial instruments. Certain cash is restricted for long-term purposes and, accordingly, is excluded from cash and cash equivalents.

Investments. Investments in marketable securities with readily determinable fair values and any investments in debt securities are reported at their fair values in the statement of financial position.

Fair Value Measurements. The Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, Fair Value Measurements and Disclosures, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described below:

<u>Level 1</u>. Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization has the ability to access.

Level 2. Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets:
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability; and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Notes to Financial Statements

December 31, 2016

Note 1 - Nature of Organization and Significant Accounting Policies (continued)

<u>Level 3</u>. Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The valuation methodology may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Property and Equipment. It is the Organization's policy to capitalize property and equipment at cost for purchases over \$5,000, while repair and maintenance items are charged to expense. Donations of property and equipment are capitalized at their estimated fair value at the date of gift. Such donations are reported as unrestricted contributions unless the donor has restricted the donated asset to a specific purpose. Property and equipment are depreciated using the straight- line method over the estimated useful lives of the assets. Currently, LCJP has no property and equipment.

Contributions and Promises to Give. Contributions are recognized when the donation is received. Donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets. Contributions and grants that are restricted by the donor or grantor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized.

Notes to Financial Statements

December 31, 2016

Note 1 - Nature of Organization and Significant Accounting Policies (continued)

Grants receivable are due from government agencies and nonprofit entities. These receivables are stated net of allowances for uncollectible accounts. Management provides for probable uncollectible accounts through a provision for bad debt expenses and an adjustment to the allowance account, based on its assessment of the current status of individual accounts. Balances still outstanding after management has used reasonable collection efforts are written off through a reduction to the allowance account and a corresponding reduction to pledges and accounts receivable. Management believes that all grants receivable are fully collectible at December 31, 2016 and 2015.

Contributed Services and Supplies. Contributed services and supplies are recognized if services received (a) create or enhance non-financial assets or (b) require specialized skills and are provided by individuals possessing those skills and would typically need to be purchased if not provided by donation. Total donated supplies, materials and professional services for the years ended December 31, 2016 and 2015 were \$14,742 and \$13,918, respectively.

A substantial number of individuals have made contributions of their time to assist the Organization in a variety of tasks and services. The value of these services is not recorded in the accompanying financial statements, as these services do not meet the criteria for recognition.

Advertising. The Organization expenses marketing and community education costs, including donated advertising, as they are incurred. Total marketing and community education costs for the years ended December 31, 2016 and 2015 were \$1,475 and \$1,870, respectively.

Income Taxes. LCJP is a nonprofit corporation exempt from income taxes as described in Section 501 (c)(3) of the Internal Revenue Code and is classified by the Internal Revenue Service as other than a private foundation. The Organization may be subject to income tax on unrelated business income. Income taxes from unrelated business income are recognized when incurred.

LCJP has adopted the provisions of ASC 740, pertaining to accounting for uncertainty in income taxes. The new pronouncement requires the use of a more-likely-than-not recognition criteria before and separate from the measurement of a tax position. An entity shall initially recognize the financial statement effects of a tax position when it is more likely than not, based on the technical merits, that the position will be sustained upon examination. With respect to LCJP, this would primarily relate to the determination of unrelated business taxable income and to the maintenance of its tax exempt status.

Notes to Financial Statements

December 31, 2016

Note 1 - Nature of Organization and Significant Accounting Policies (continued)

Management has evaluated the adopted policies and procedures that have been implemented to provide assurance that income is properly characterized and activities that jeopardize its tax exempt status are within limits established under existing tax code and regulations. Management has determined the effects of uncertain tax positions are not material to the Organization for recognition or disclosure in the accompanying financial statements and, accordingly, no income tax liability has been recorded for uncertain income tax positions in the accompanying financial statements.

The income tax years 2009 through the current year are open for examination and are subject to taxation at corporate tax rates. Additionally, penalties and interest may be assessed on income taxes that are delinquent. The assessment of uncertain income taxes is subject to estimate, and it is reasonably possible that the estimate may change in the near term and the change may be material.

Note 2 - Investments and Fair Value Measurements

Within the fair value hierarchy, LCJP's investments as of December 31, 2016 and 2015 were all level one investments of \$2,978 and \$27,282, respectively.

Changes in Fair Value Levels. The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

Management evaluated the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer. There were no significant transfers up or down levels 1, 2, or 3 during the years ended December 31, 2016 and 2015.

Note 3 - Commitments

Operating Leases. The Organization leased office space under a cancelable operating lease. Rent expense under the lease totaled \$20,200 and \$26,100 for the years ended December 31, 2016 and 2015, respectively.

Notes to Financial Statements

December 31, 2016

Note 4 - Temporarily Restricted Net Assets

The balances of temporarily restricted net assets are as follows:

| | January 1, 2016 | | Recei | pts | Disbur | rsements | Decembe | r 31, 2016 |
|----------------------------------|-----------------|---------|-------|----------|--------|----------|---------|------------|
| Samantha Heather Wittier Fund | \$ | | \$ | <u>-</u> | \$ | <u>-</u> | \$ | |
| Samantha Heather | January | 1, 2015 | Recei | pts | Disbur | rsements | Decembe | r 31, 2015 |
| Wittier Fund | \$ | 39,666 | \$ | - | \$ | 39,666 | \$ | - |

The Samantha Heather Wittier Fund was temporarily restricted for future use in the Organization's RPS program. By December 31, 2015, all requirements were met for release from restrictions.

Note 5 - Retirement Plan

In 2008, the Organization established a SIMPLE IRA plan, for its full-time employees. The plan includes a discretionary match, based on a percentage of annual gross wages. In order to be eligible to participate, an employee must have completed 90 days of employment and have attained the age of 21 years. All employer contributions are immediately vested. The Organization contributed \$2,776 and \$5,142 during the years ending December 31, 2016 and 2015, respectively.

Note 6 - Concentration of Credit Risk

Concentration of Revenue. Approximately 33% and 52% of LCJP's revenues were received from the City of Longmont during the years ended December 31, 2016 and 2015, respectively. Approximately 44% and 25% of LCJP's revenues were received from the State of Colorado during the years ended December 31, 2016 and 2015, respectively.

Geographical Concentration. The Organization receives predominantly all of its support and revenue from Longmont, Colorado and surrounding communities.



SCHEDULE OF FUNCTIONAL EXPENSES

Year Ended December 31, 2016

| | | Pr | ogram Servic | es | Su | | | | |
|-------------------------------------|------------|------------|--------------|-----------|------------|-------------|---------------|-----------|------------|
| | Volunteer | | | | | | General and | | Total |
| | & Training | CRJ | RPS | Other | Total | Fundraising | Adminstrative | Total | Expenses |
| Salaries and wages | \$ 29,255 | \$ 89,552 | \$ 26,858 | \$ - | \$ 145,665 | \$ - | \$ 37,781 | \$ 37,781 | \$ 183,446 |
| Payroll taxes | 2,340 | 6,812 | 2,105 | 396 | 11,653 | 28 | 2,765 | 2,793 | 14,446 |
| Employee Benefits | 789 | 279 | 691 | - | 1,760 | - | 10,716 | 10,716 | 12,475 |
| Total Personnel | 32,385 | 96,642 | 29,654 | 396 | 159,078 | 28 | 51,262 | 51,290 | 210,368 |
| Legal, professional, and consulting | 3,714 | 543 | 430 | 7,984 | 12,671 | 2,433 | 2,937 | 5,370 | 18,041 |
| Staff development | 150 | | | 217 | 367 | 14 | 921 | 936 | 1,303 |
| Rent | - | 12,000 | - | 14,140 | 26,140 | 1,010 | 5,050 | 6,060 | 32,200 |
| Supplies | 428 | 1,727 | 230 | 2,026 | 4,411 | 179 | 1,397 | 1,576 | 5,987 |
| Accounting | | | | | - | | | - | = |
| Database development | | | | | = | | | - | - |
| Website | | | | | = | | | - | - |
| Insurance | - | | | 2,524 | 2,524 | 180 | 901 | 1,082 | 3,605 |
| Fundraising expenses | | = | - | = | = | 152 | - | 152 | 152 |
| Volunteer training and recognition | 3,939 | | | | 3,939 | | | | 3,939 |
| Repair and maintenance | | | | 1,919 | 1,919 | 137 | 685 | 822 | 2,741 |
| Telephone, Computer and internet | 780 | - | 191 | 2,138 | 3,108 | 59 | 630 | 689 | 3,798 |
| Conferences, conventions, meetings | | | 89 | 956 | 1,045 | | 126 | 126 | 1,170 |
| Utilities | | | | 1,369 | 1,369 | 104 | 519 | 622 | 1,992 |
| Travel and mileage | 336 | | 332 | 619 | 1,287 | 87 | 101 | 188 | 1,475 |
| Training | 303 | | 13,007 | | 13,311 | | | - | 13,311 |
| Board expenses | | | | | - | | 10 | 10 | 10 |
| Marketing and community education | 6 | | 108 | 916 | 1,030 | 146 | 306 | 452 | 1,482 |
| Events | 72 | | | 535 | 607 | 248 | | 248 | 855 |
| Dues and subscriptions | | | | 586 | 586 | 24 | 205 | 229 | 815 |
| Bank fees | 48 | 47 | - | 33 | 129 | 188 | 266 | 454 | 583 |
| Postage | | 255 | | 588 | 843 | 35 | 367 | 402 | 1,245 |
| Printing | | 246 | | 544 | 790 | 39 | 251 | 290 | 1,081 |
| Program expenses | | | | | - | | | - | _ |
| Miscellaneous | | 2 | | | 2 | 24,397 | 691 | 25,088 | 25,090 |
| TOTAL FUNCTIONAL EXPENSES | \$ 42,162 | \$ 111,462 | \$ 44,040 | \$ 37,490 | \$ 235,155 | \$ 29,461 | \$ 66,625 | \$ 96,086 | \$ 331,240 |

SCHEDULE OF FUNCTIONAL EXPENSES

Year Ended December 31, 2015

| | | | Program | Services | | | Suj | pporting Servic | es | |
|-------------------------------------|-----------|------------|-----------|-----------|----------|-----------|-------------|-----------------|-----------|-----------|
| | | Volunteer | | | | | | General and | | Total |
| | BCRJ | & Training | CRJ | RPS | Other | Total | Fundraising | Adminstrative | Total | Expenses |
| Salaries and wages | \$ 70,704 | \$ 40,077 | \$ 90,717 | \$ 77,925 | \$ - | \$279,423 | \$ - | \$ 39,409 | \$ 39,409 | \$318,832 |
| Payroll taxes | 5,918 | 3,269 | 7,243 | 6,330 | 707 | 23,467 | 51 | 4,085 | 4,136 | 27,603 |
| Employee Benefits | 5,164 | 623 | 4,162 | 2,448 | - | 12,397 | - | 4,615 | 4,615 | 17,012 |
| Total Personnel | 81,786 | 43,969 | 102,122 | 86,703 | 707 | 315,287 | 51 | 48,109 | 48,160 | 363,447 |
| Legal, professional, and consulting | 2,598 | 3,747 | 2,583 | 1,607 | 5,426 | 15,961 | 759 | 9,413 | 10,172 | 26,133 |
| Staff development | 1,601 | 1,282 | 1,830 | 1,409 | 264 | 6,386 | 140 | 2,735 | 2,875 | 9,261 |
| Rent | - | · - | 12,000 | 1,140 | 17,130 | 30,270 | 1,325 | 6,505 | 7,830 | 38,100 |
| Supplies | 8,859 | 2,803 | 6,193 | 4,908 | 924 | 23,687 | 97 | 3,735 | 3,832 | 27,519 |
| IT | _ | _ | 30 | 90 | _ | 120 | _ | 116 | 116 | 236 |
| Insurance | _ | _ | _ | - | 2,205 | 2,205 | 157 | 788 | 945 | 3,150 |
| Fundraising expenses | - | | - | - | _ | - | 1,109 | - | 1,109 | 1,109 |
| Volunteer training and recognition | - | 3,997 | - | - | - | 3,997 | - | - | - | 3,997 |
| Repair and maintenance | - | 107 | 72 | 107 | 1,910 | 2,196 | 110 | 565 | 675 | 2,871 |
| Telephone and internet | 10 | 299 | 415 | 569 | 568 | 1,861 | 105 | 633 | 738 | 2,599 |
| Conferences, conventions, meetings | 183 | 180 | 2,999 | 319 | 114 | 3,795 | | | 1,678 | 5,473 |
| Utilities | - | 345 | 347 | 364 | 1,221 | 2,277 | 163 | 813 | 976 | 3,253 |
| Travel and mileage | 48 | 81 | 457 | 107 | 183 | 876 | - | - 808 | 808 | 1,684 |
| Training | 400 | 963 | 1,710 | 6,901 | - | 9,974 | = | = | - | 9,974 |
| Board expenses | - | - | = | - | - | = | = | 302 | 302 | 302 |
| Marketing and community education | - | 369 | 234 | 88 | 228 | 919 | 78 | 873 | 951 | 1,870 |
| Internship | - | - | 1,333 | - | - | 1,333 | - | - | - | 1,333 |
| Dues and subscriptions | - | 181 | 501 | 126 | - | 808 | 11 | 25 | 36 | 844 |
| Licenses and permits | - | - | - | - | - | - | - | 65 | 65 | 65 |
| Bank fees | - | 54 | - | - | 351 | 405 | 217 | 1,160 | 1,377 | 1,782 |
| Postage | 97 | 52 | 547 | - | 136 | 832 | 89 | 321 | 410 | 1,242 |
| Printing | - | 322 | 597 | - | - | 919 | - | 176 | 176 | 1,095 |
| Settlement costs - DA | - | - | - | - | - | - | - | 43,000 | 43,000 | 43,000 |
| Miscellaneous | | | | | | | | 536 | 536 | 536 |
| TOTAL FUNCTIONAL EXPENSES | \$ 95,582 | \$ 58,751 | \$133,970 | \$104,438 | \$31,367 | \$424,108 | \$ 4,481 | \$ 122,286 | \$126,767 | \$550,875 |

2016 TAX RETURN

GOVERNMENT COPY

| Client: | LCJP |
|---------------|---|
| Prepared for: | TEACHING PEACE INC. DBA LGMNT COMMUNITY JUSTICE PARTNERSHIP 528 MAIN ST. LONGMONT, CO 80501 303-776-1527 |
| Prepared by: | LYMAN HAMBLIN HAMBLIN AND ASSOCIATES 3082 EVERGREEN PKWY, #2 EVERGREEN, CO 80439 303-694-2727 |
| Date: | MAY 15, 2017 |
| Comments: | |
| Route to: | |
| | |

FDIL2001L 09/01/16

HAMBLIN AND ASSOCIATES 3082 EVERGREEN PKWY, #2 EVERGREEN, CO 80439 303-694-2727

May 15, 2017

TEACHING PEACE INC.
DBA LGMNT COMMUNITY JUSTICE PARTNERSHIP 528 Main St.
Longmont, CO 80501

Dear Client:

Enclosed is your 2016 Federal Return of Organization Exempt from Income Tax. The original should be signed at the bottom of page one. No tax is payable with the filing of this return. Mail your Federal return on or before November 15, 2017 to:

DEPARTMENT OF TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0027

| Please be sure to call us if you have any questions | Pl | be sure to call us | f you have | any questions |
|---|----|--------------------|------------|---------------|
|---|----|--------------------|------------|---------------|

Sincerely,

Lyman Hamblin

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

Department of the Treasury

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 900 and the instructions is at years in a position and a public and the public and

| Inter | nal Rev | venue Service | 140 | Filliothiation about Form 350 and its insudedons is at www.irs.gov | /IOIIII990. | • | | mspection |
|--------------------------------|---------------------|--|------------------|---|-----------------------|------------------|-------------------------|------------------------------|
| Α | For t | he 2016 calen | dar | year, or tax year beginning , 2016, and endin | g | | , | , |
| В | Check | if applicable: | С | | | D Employ | er identi | fication number |
| | XA | ddress change | TE | ACHING PEACE INC. | | 84- | 1291 | 1 3 3 |
| | H_{N} | lame change | | A LGMNT COMMUNITY JUSTICE PARTNERSHIP | | E Telepho | | |
| | | nitial return | | 8 MAIN ST. | | 202 | 776 | -1527 |
| | \vdash | | LO | NGMONT, CO 80501 | | 303 | - / / 0 | -1327 |
| | H | nal return/terminated | l | | | | | 2 255 401 |
| | | mended return | _ | | IV-> l- Al-i- | G Gross r | | 1 1991 |
| | ША | pplication pending | | r | H(a) Is this a | | | ☐ 163 ☐ 140 |
| | | | | ME AS C ABOVE | H(b) Are all If 'No,' | attach a list. | s included (see inst | 1? Yes No |
| <u></u> | Tax | -exempt status | X | 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 | | | | |
| J | We | ebsite: ► WW | W.] | LCJP.ORG | H(c) Group | exemption nu | umber 🕨 | |
| K | Forr | m of organization: | X | Corporation Trust Association Other ► L Year of formation | on: 1995 | 5 M s | State of le | egal domicile: CO |
| Pa | rtl | Summar | y | | | | | |
| | 1 | Briefly descri | be th | he organization's mission or most significant activities:RESTORATIV | Æ JUST | TICE F | OR LO | ONGMONT, ST. |
| 4 | | | | EY SCHOOLS, BOULDER COUNTY, AND COLORADO. | | | | |
| Activities & Governance | | | | | | | | |
| Пa | | | | | | | | |
| Š | 2 | | | if the organization discontinued its operations or disposed of mo | | | net ass | sets. |
| Ğ | 3 | | | members of the governing body (Part VI, line 1a) | | | 3 | 6 |
| ∞ ഗ | 4 | | | endent voting members of the governing body (Part VI, line 1b) | | | 4 | 6 |
| ij. | 5 | | | ndividuals employed in calendar year 2016 (Part V, line 2a) | | | 5 | 5 |
| 흦 | 6 | | | volunteers (estimate if necessary) | | | 6 | 142 |
| ĕ | | | | usiness revenue from Part VIII, column (C), line 12 | | | 7a | 0. |
| | D | Net unrelated | i bus | siness taxable income from Form 990-T, line 34 | | | 7b | 0. |
| | | | | | | rior Year | | Current Year |
| e | 8 | | | grants (Part VIII, line 1h) | | 336,1 | | 317,146. |
| Revenue | 9 | | | revenue (Part VIII, line 2g) | | 31,7 | | 38,118. |
| ě | 10 | | | ne (Part VIII, column (A), lines 3, 4, and 7d) | | | 47. | 217. |
| | 11 | | | art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 267.0 | 21 | 255 401 |
| | 12 | | | | | 367,9 | 31. | 355,481. |
| | 13 | | | ar amounts paid (Part IX, column (A), lines 1-3) | | | | |
| | 14 | | | or for members (Part IX, column (A), line 4) | | | | |
| ø | 15 | | | empensation, employee benefits (Part IX, column (A), lines 5-10) | | 363,4 | 47. | 210,368. |
| Expenses | 16 a | Professional : | fund | raising fees (Part IX, column (A), line 11e) | | | | |
| ē | b | Total fundrais | sing | expenses (Part IX, column (D), line 25) > 29, 461. | | | | |
| ŵ | 17 | Other expens | ses (| Part IX, column (A), lines 11a-11d, 11f-24e) | | 187,4 | 28 | 120,873. |
| | 18 | | | Add lines 13-17 (must equal Part IX, column (A), line 25) | | 550,8 | | 331,241. |
| | 19 | | | penses. Subtract line 18 from line 12 | | -182,9 | | 24,240. |
| > 8 | | 1.0101140 1000 | , 0,1 | orisos. Castract into 15 from into 12 | | g of Curren | | End of Year |
| Net Assets or Fund Balances | 20 | Total assets (| (Par | t X, line 16) | Deyillilli | 80,0 | | 102,268. |
| Ball | 21 | | | art X, line 26) | ` | 9,0 | | 7,018. |
| \$ E | 20 | | | | ` | | | |
| | | | | d balances. Subtract line 21 from line 20 | | 71,0 | 10. | 95,250. |
| | rt II | Signatur | | | | | | |
| Unde | er pena olete. D | Ities of perjury, I de Jeclaration of prepa | eclare ger (o | that I have examined this return, including accompanying schedules and statements, and to ther than officer) is based on all information of which preparer has any knowledge. | he best of m | y knowledge | and belie | ef, it is true, correct, and |
| - | | 1 | , | P 1/2 | | | | , |
| ٥. | | Signatu | re of | officer | Dai | 5-17 | -// | |
| Sig | ın | S I I I | 100 | 2 | Da | | | |
| He | re | Type or | K/ | DATES. | | | | |
| | | | | name and title | | | т. | DTIN! |
| | | Print/Type_p | | | | Check | J″ | PTIN |
| Pa | | LYMAN | | | 17 | self-employe | ed] | P01701322 |
| | epar | | 9 | ► HAMBLIN AND ASSOCIATES | | | | |
| Us | e Or | Ily Firm's addre | ess | 3082 EVERGREEN PKWY, #2 | | Firm's EIN | 46- | -1778573 |
| | | | | EVERGREEN, CO 80439 | | Phone no. | | 694-2727 |
| May | / the | IRS discuss th | is re | eturn with the preparer shown above? (see instructions) | | | | X Yes No |

| | | | | G PEACE I | | | | | | 84-1 | 129113 | 33 | P | age 2 |
|------------|--------|------------------|----------------------|--------------------|---------------|----------------|--------------|------------------|-------------|-------------------|----------|----------|-------------|--------------|
| Par | t III | | | rogram Ser | | | | | | | | | | |
| | | | | O contains a r | | note to any li | ne in this F | Part III | | | | | | |
| 1 | | - | _ | ization's missi | | | | | | | | | | |
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| | | | | w services on | | | | | | | · · · Ш | Yes | X | No |
| 3 | | | | e conducting, | | | es in how | it conducts : | any progra | ım services? | | Yes | X | No |
| 3 | | - | | anges on Sch | - | illicant chang | jes iii iiow | it coridacis, i | arry progre | IIII SCI VICCS: . | · Ц | 163 | Λ | NO |
| 4 | | | | 's program ser | | olishments for | each of its | s three large | st nroaram | services as | measur | ad hv a | vnens | 202 |
| • | Secti | ion 501 <i>(</i> | (c)(3) and 501 | (c)(4) organiz | ations are re | equired to ren | ort the am | ount of grant | s and allo | cations to oth | ers, the | total ex | pens | es, |
| | and r | revenue | , if any, for ea | ach program s | service repor | ted. | | | | | | | | |
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Form 990 (2016) TEACHING PEACE INC. 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 | 110 |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | Х | |
| 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 | | Х |
| 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 | | Х |
| 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 | | Х |
| 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 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i> | 7 | | Х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete 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, VII, VIII, IX, or X as applicable. | | | |
| i | a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. | 11 a | | Х |
| | b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i> | 11 b | | Х |
| | c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII. | 11 c | | 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 Part X, line 16? If 'Yes,' complete Schedule D, Part IX. | 11 d | | Х |
| | e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X | 11 e | Х | |
| | 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 | 11 f | Х | |
| 12 | a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII | 12a | Х | |
| | 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 | | Х |
| | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 13 | | X |
| | a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| | b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If 'Yes,' complete Schedule F, Parts I and IV</i> | 14b | | Х |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV. | 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 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). | 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 | | Х |
| 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) TEACHING PEACE INC. Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-------------|--|-----|-----|----|
| 20 a | Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H | 20a | | Χ |
| b | 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 | | Х |
| 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 | | Х |
| 23 | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i> | 23 | | Х |
| 24 a | a 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 | | Х |
| ŀ | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| (| d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | |
| 25 a | a 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 |
| ŀ | s 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 | | Х |
| 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 | | Х |
| 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): | | | |
| á | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28a | | X |
| ŀ | A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28b | | Х |
| (| 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 | | Х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 29 | | Х |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i> | 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? <i>If 'Yes,' complete Schedule R, Part I</i> | 33 | | Х |
| | Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. | 34 | | Х |
| 35 a | a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| ŀ | olf '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? If 'Yes,' complete Schedule R, Part V, line 2. | 36 | | Х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i> | 37 | | Х |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Х | |

Form 990 (2016) TEACHING PEACE INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

| | Check if Schedule O contains a response or note to any line in this Part V | | | | . □ | | |
|---|---|---|------|-------|------|--|--|
| | • | | | Yes | No | | |
| 1 a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a 6 | | | | | |
| Ł | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b 0 | | | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and r | eportable gaming | | | | | |
| | (gambling) winnings to prize winners? | | 1 c | | X | | |
| 2 a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- | | | | | | |
| _ | ments, filed for the calendar year ending with or within the year covered by this return | 2 a 5 | | 37 | | | |
| t | If at least one is reported on line 2a, did the organization file all required federal employmen | | 2b | Х | | | |
| _ | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see in: | • | | | V | | |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year | | 3 a | | X | | |
| | of Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O | | 3 b | | | | |
| 4 a | At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, securities account, securities account, securities account in a foreign country (such as a bank account, securities account, securities account, securities account, securities account in a foreign country (such as a bank account, securities account, securities account account in a foreign country (such as a bank account | er authority over, a inancial account)? | 4a | | Х | | |
| 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). | | | | | | | |
| 5 a | Was the organization a party to a prohibited tax shelter transaction at any time during the ta | · | 5 a | | Χ | | |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt | • | 5 b | | Χ | | |
| | If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | | 5 c | | | | |
| | - | | | | | | |
| 6 a 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 as charitable contributions? | | | | | | | |
| b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | | | | | | |
| not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). | | | | | | | |
| | | | | | | | |
| ā | Did the organization receive a payment in excess of \$75 made partly as a contribution and p services provided to the payor? | eartly for goods and | 7 a | | Х | | |
| b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | | | | | | | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file | | | | | | | |
| | Form 8282? | | 7 c | | Х | | |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal | | 7 e | | Χ | | |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben | | 7 f | | X | | |
| | If the organization received a contribution of qualified intellectual property, did the organization file I | | | | | | |
| - | as required? | | 7 g | | | | |
| ł | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C? | organization file a | 7 h | | | | |
| 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 organizations maintaining donor advised funds. | | | | | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | | 9 a | | | | |
| | Did the sponsoring organization make a distribution to a donor, donor advisor, or related per | son? | 9 b | | | | |
| | Section 501(c)(7) organizations. Enter: | 1 | | | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 | 10 a | | | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10 b | | | | | |
| | Section 501(c)(12) organizations. Enter: | aa 1 | | | | | |
| | Gross income from members or shareholders. | 11 a | | | | | |
| t | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11 b | | | | | |
| 12 a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu or | • | 12a | | | | |
| | If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12b | | | | | |
| | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | |
| a | 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 Schedul | e ∪. | | | | | |
| t | 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. | 13b | | | | | |
| | Enter the amount of reserves on hand | 13c | | | | | |
| 14 a | Did the organization receive any payments for indoor tanning services during the tax year? | | 14a | | Х | | |
| k | If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in | Schedule O | 14b | | | | |
| 3 N N | TEE 001051 11/16/16 | | Earm | aan (| 2016 | | |

KATHLEEN MCGOEY 528 MAIN ST.

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. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 6 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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? Χ a The organization's CEO, Executive Director, or top management official.. SEE . SCHEDULE..Q...... 15a **b** Other officers or key employees of the organization..... 15 b 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?..... Χ 16 a **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?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records:

LONGMONT CO 80501 303-776-1527

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

- 1 a 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.

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

| | | (C) | | | | | | | | |
|-----------------------|--|-----------------------------------|-----------------------|--|---|--------------------------------------|---|----|--|--|
| (A) Name and Title | (B) Average hours | director/trustee) con | | (D) Reportable compensation from the organization | (E) Reportable compensation from | (F) Estimated amount of other | | | | |
| | per week (list any hours for related organiza- tions below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | the organization (W-2/1099-MISC) the organization (W-2/1099-MISC) the organization (W-2/1099-MISC) (W-2/1099-MISC) | | related organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (1) KARIN HIGGINS | 3 | | | | | | | | | |
| PRESIDENT | 0 | Х | | Χ | | | | 0. | 0. | 0. |
| | - <u>2</u> - | Х | | Χ | | | | 0. | 0. | 0. |
| (3) TONYA DALHAUS | 2 | | | | | | | | | |
| MEMBER | 0 | Χ | | | | | | 0. | 0. | 0. |
| | 3 | Х | | Х | | | | 0. | 0. | 0. |
| (5) JOHN DANA | 2 | 21 | | 21 | | | | 0. | 0. | <u> </u> |
| MEMBER | 0 | Х | | | | | | 0. | 0. | 0. |
| (6) TIM JOHNSON | 2 | | | | | | | | | |
| MEMBER | 0 | Χ | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
| (8) | | : | | | | | | | | |
| (9) | | | | | | | | | | |
| (10) | | | | | | | | | | |
| <u>(11)</u> | | | | | | | | | | |
| (12) | | | | | | | | | | |
| (13) | | | | | | | | | | |
| (14) | | | | | | | | | | |

| Part VII Section A. Officers, Directors, Tru | | Key | Em | _ | _ | es, | and | d Highest Com | pensated Emp | loyees | (conti | inued) |
|--|------------------------------|--|-----------------------|------------------------|---------------------------|---------------------------------|-------------|--|---|---------|-----------------------|--------|
| | (B) | (B) (C) Position Average (do not check more than one | | | | | | | | | | |
| (A) | Average hours | (do box | not o | Pos check ess pe | sition : more erson | than | one h an | (D) Reportable | (E) Reportable | _ | (F) stimated | 4 |
| Name and title | per week | offic | cer ar | nd a | direct | or/trus | tee) | compensation from | compensation from related organizations | amo | unt of ot ipensati | ther |
| | (list any hours | Individual or director | nstit | Officer | Key employee | empl High | Former | the organization (W-2/1099-MISC) | (W-2/1099-MISC) | f | rom the anizatio | |
| | for related | Individual trustee or director | ution | ď | emp | est c oyee | ner | | | an | d relate anization | d |
| | organiza - tions below | 3 5 | na tr | | loye | omp | | | | | | |
| | dotted line) | stee | Institutional trustee | | () | Highest compensated employee | | | | | | |
| | , | | €13 | | | ted | | | | | | |
| (15) | | | | | | | | | | | | |
| 44.00 | | | | | | | | | | | | |
| (16) | | | | | | | | | | | | |
| (17) | | | | | | | | | | | | |
| | | • | | | | | | | | | | |
| (18) | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| (19) | | | | | | | | | | | | |
| (20) | | - | | | | | | | | | | |
| (20) | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| (22) | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | |
| (05) | | | | | | | | | | | | |
| (25) | | • | | | | | | | | | | |
| 1 b Sub-total | | | | | | <u> </u> | > | 0. | 0. | | | 0. |
| c Total from continuation sheets to Part VII, Secti | on A | | | | | | > | 0. | 0. | | | 0. |
| d Total (add lines 1b and 1c). | | | | | | | > | 0. | 0. | | | 0. |
| 2 Total number of individuals (including but not limited | I to those I | isted | abo | ve) v | who | recei | ved | more than \$100,00 | 0 of reportable comp | ensatio | n | |
| from the organization • 0 | | | | | | | | | | | V | NI- |
| 2 5:11 | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc | ctor, or tru ch individu | istee, <i>ial</i> | key | / en | ıploy | yee, | or h | nighest compensa | ted employee | . 3 | | Х |
| 4 For any individual listed on line 1a, is the sum of | f reportab | le co | mne | ensa | ation | and | oth | er compensation | from | | | |
| 4 For any individual listed on line 1a, is the sum o the organization and related organizations greate such individual. | er than \$1 | 50,00 | 00? | If ' | es, | com | nple | te Schedule J for | | 4 | | Х |
| 5 Did any person listed on line 1a receive or accru | | | | | | | | | | | | Λ |
| for services rendered to the organization? If 'Yes | s,' comple | te So | chea | dule | J fo | r suc | ch p | erson | | . 5 | | Х |
| Section B. Independent Contractors | | | | | | | | | #100.000 | | | |
| Complete this table for your five highest comper compensation from the organization. Report comper | isated indi isation for | epend the ca | deni alen | t coi dar | ntra year | endi | tna ng v | it received more ti vith or within the or | ganization's tax year | | | |
| (A) Name and business add | | | | | | | | (B) | - | (| C) | |
| | ress | | | | | | | Description (| of services | Compe | ensatio | on |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 2 Total number of independent contractors (including | | ited to | o tho | ose I | listed | d abo | ve) | who received more | than | | | |
| \$100,000 of compensation from the organization | • 0 | | | | | | | | | | | |

| | | Check if Schedule O contains a response or note to any | Ine in this Part VI | III | | |
|--|-----------------------|---|-----------------------------|--|---|--|
| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| Contributions, Gifts, Grants and Other Similar Amounts | b c d e f | Federated campaigns | 217 146 | | | |
| <u>တ္က</u> | п | Business Code | 317,146. | | | |
| Program Service Revenue | 2a b | CLIENT FEES AND DUES 812900 | 38,118. | 38,118. | | |
| vice. | C | | | | | |
| Se | d | | | | | |
| ram | e f | All other program service revenue | | | | |
| ğ | | Total. Add lines 2a-2f | 38,118. | | | |
| | 3 | Investment income (including dividends, interest and | 30,110. | | | |
| | 3 | other similar amounts) | 217. | 217. | | |
| | 4 | Income from investment of tax-exempt bond proceeds | | | | |
| | 5 | Royalties | | | | |
| | 6 a | Gross rents | | | | |
| | | Less: rental expenses | | | | |
| | | Rental income or (loss) | | | | |
| | d | Net rental income or (loss) | | | | |
| | 7 a | Gross amount from sales of assets other than inventory (i) Securities (ii) Other | | | | |
| | b | Less: cost or other basis and sales expenses | | | | |
| | | Gain or (loss) | | | | |
| | d | Net gain or (loss) | | | | |
| Other Revenue | 8 a | Gross income from fundraising events (not including \$ of contributions reported on line 1c). | | | | |
| æ | | See Part IV, line 18 a | | | | |
| her | b | Less: direct expenses b | | | | |
| ರ | С | Net income or (loss) from fundraising events | | | | |
| | | Gross income from gaming activities. See Part IV, line 19 a | | | | |
| | | Less: direct expenses | | | | |
| | | Net income or (loss) from gaming activities | | | | |
| | | Gross sales of inventory, less returns and allowances | | | | |
| | | Less: cost of goods soldb | | | | |
| | С | Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code | | | | |
| | 11 a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | | All other revenue | | | | |
| | | Total. Add lines 11a-11d | | | | |
| | 12 | Total revenue. See instructions | 355.481 | 38.335 | 0 . | 0. |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

| Do i | Check if Schedule O contains a re not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service | (C) Management and | (D) Fundraising |
|----------|--|--------------------|-------------------------------|-----------------------|---------------------------|
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | expenses | general expenses | expenses |
| 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 individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 0. | 0. | 0. | 0. |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0. | 0. | 0. | 0. |
| 7 | Other salaries and wages | 183,446. | 145,665. | 37,781. | · · |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 1037 110. | 110,000. | 37,701. | |
| 9 | Other employee benefits | 12,476. | 1,760. | 10,716. | |
| 10 | Payroll taxes | 14,446. | 11,653. | 2,765. | 28. |
| 11 | Fees for services (non-employees): | | | | |
| á | a Management | | | | |
| ŀ |) Legal | | | | |
| (| Accounting | 11,106. | 7,774. | 2,777. | 555. |
| (| d Lobbying | | | | |
| • | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column | 6,935. | 4,897. | 160. | 1,878. |
| 12 | (A) amount, list line 11g expenses on Schedule 0.) | 1,482. | 1,030. | 306. | 146. |
| 13 | Office expenses | 30,733. | 27,107. | 3,060. | 566. |
| 14 | Information technology | 20,700. | 27/1071 | 2,000. | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 34,616. | 27,806. | 5,675. | 1,135. |
| 17 | Travel | 1,485. | 1,287. | 111. | 87. |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | , | , - | | |
| | Conferences, conventions, and meetings | 1,171. | 1,045. | 126. | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 2 625 | 0.504 | 0.01 | 100 |
| 23 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | 3,605. | 2,524. | 901. | 180. |
| á | MISC | 25,108. | 2. | 708. | 24,398. |
| _ | STAFF DEVELOPMENT | 1,301. | 366. | 921. | 14. |
| | POSTAGE AND SHIPPING | 1,245. | 843. | 367. | 35. |
| | PRINTING AND PUBLICATIONS | 1,080. | 790. | 251. | 39. |
| • | All other expenses | 1,006. | 606. | | 400. |
| 25 | Total functional expenses. Add lines 1 through 24e | 331,241. | 235,155. | 66,625. | 29,461. |
| 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) | | | | |

| | | 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 | | 1 | |
| | 2 | Savings and temporary cash investments | 41,750. | 2 | 93,128. |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | 6,579. | 4 | 3,140. |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | F | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 5 | |
| | _ | | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | 7 | |
| SS | 8 | Inventories for sale or use | | 8 | |
| ⋖ | 9 | Prepaid expenses and deferred charges | 4,468. | 9 | 3,022. |
| | | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | | | |
| | b | Less: accumulated depreciation | | 10 c | |
| | 11 | Investments — publicly traded securities. | 27,281. | 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 | 2,978. |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 80,078. | 16 | 102,268. |
| | 17 | Accounts payable and accrued expenses | 7,276. | 17 | 3,008. |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| es | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| Liabilities | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | , , | | | |
| | 26 | 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. Total liabilities. Add lines 17 through 25. | 1,792. 9,068. | 25 26 | 4,010. 7,018. |
| | | Organizations that follow SFAS 117 (ASC 958), check here ► X and complete | 3,000. | | 7,010. |
| es | | lines 27 through 29, and lines 33 and 34. | | | |
| ů | 27 | Unrestricted net assets. | 71,010. | 27 | 95,250. |
| <u>a</u> | 28 | Temporarily restricted net assets. | 71,010. | 28 | 33/230. |
| 2 | 29 | Permanently restricted net assets. | | 29 | |
| Ĭ | | Organizations that do not follow SFAS 117 (ASC 958), check here ► | | | |
| Net Assets or Fund Balances | | and complete lines 30 through 34. | | | |
| Ö | 30 | Capital stock or trust principal, or current funds | | 30 | |
| ž. | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| AS | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| et | 33 | Total net assets or fund balances | 71,010. | 33 | 95,250. |
| Z | 34 | Total liabilities and net assets/fund balances. | 80,078. | 34 | 102,268. |

BAA Form **990** (2016)

| . 011 | 11330 (2010) ILACHING ILACL INC. | 12711 | - 3 3 | | age 12 | |
|-------|--|----------|-------|------|--------|--|
| 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 | | 355, | 481. | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 331, | 241. | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | 24, | 240. | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | 010. | |
| 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, | | | | 250. | |
| | column (B)) | | | | | |
| Pa | rt XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | П | |
| | | | | 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 O. | | | | | |
| 2 | a Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2 | a X | | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review | ved on a | | | | |
| | separate basis, consolidated basis, or both: | rou on u | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| ı | b Were the organization's financial statements audited by an independent accountant? | | 2 | b X | | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa | rate | | | | |
| | basis, consolidated basis, or both: | | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| (| c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud | it, | | ., | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2 | c X | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | | | |
| 3: | a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single | | | | | |
| ٠, | Audit Act and OMB Circular A-133? | | 3 | а | X | |
| ı | b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required at | ıdit | | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3 | b | | |

BAA 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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is

OMB No. 1545-0047 2016

Open to Public

Department of the Treasury Internal Revenue Service Inspection at www.irs.gov/form990. Name of the organization Employer identification number TEACHING PEACE INC. DBA LGMNT COMMUNITY JUSTICE PARTNERSHIP 84-1291133 **Reason for Public Charity Status** (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 Χ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. C **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **q** Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E)

Total

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

(Complete only if you checked the box on line 5, 7, 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.)

| Sec | tion A. Public Support | | | | | | | | |
|--------------|--|-----------------------|------------------------|-------------------------|----------------------|---------------------------|--------------------|--|--|
| begi | ndar year (or fiscal year nning 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.') | 339,811. | 367,739. | 642,792. | 336,184. | 317,146. | 2,003,672. | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0. | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. | | |
| | 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) | 339,811. | 367,739. | 642,792. | 336,184. | 317,146. | 2,003,672. | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 2,003,672. | | |
| Sec | tion B. Total Support | | | | | | | | |
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total | | |
| 7 | Amounts from line 4 | 339,811. | 367,739. | 642,792. | 336,184. | 317,146. | 2,003,672. | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 520. | 4,488. | 3,959. | 47. | 217. | 9,231. | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | · | · | | | 0. | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). | | | | | | 0. | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 2,012,903. | | |
| 12 | Gross receipts from related activ | vities, etc. (see ins | structions) | | | 12 | 137,136. | | |
| 13 | First five years. If the Form 990 is organization, check this box and | for the organization | n's first, second, thi | ird, fourth, or fifth t | tax year as a sectio | on 501(c)(3) | ▶ □ | | |
| Sec | tion C. Computation of Pu | blic Support P | ercentage | | | | | | |
| | Public support percentage for 20 Public support percentage from | | | | | | 99.54 % | | |
| | 33-1/3% support test—2016. If t and stop here. The organization | he organization di | d not check the b | ox on line 13. and | d line 14 is 33-1/3 | B% or more, check | 99.56 % this box | | |
| b | 33-1/3% support test—2015. If the and stop here. The organization | ne organization did | d not check a box | on line 13 or 16a | a, and line 15 is 3 | 3-1/3% or more, o | check this box | | |
| 17a | 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts | meets the 'facts-a | and-circumstances | s' test, check this | box and stop her | e. Explain in Part | VI how | | |
| | b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization | | | | | | | | |
| 18 | Private foundation. If the organi | zation did not che | ck a box on line 1 | 13, 16a, 16b, 17a | , or 17b, check thi | is box and see ins | structions | | |
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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.)

| Sec | tion A. Public Support | | | | | | |
|-----|--|-------------------------|--------------------------|----------------------|---------------------|--------------------|------------------|
| | lar year (or fiscal year beginning in) > | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose. | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513. | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| | Public support. (Subtract line 7c from line 6.) | | | | | | |
| Sec | tion B. Total Support | | | | | | |
| | dar year (or fiscal year beginning in) 🟲 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| | Amounts from line 6 | | | | | | |
| | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 | | | | | | |
| c | taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b | | | | | | |
| | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| | First five years. If the Form 990 organization, check this box and | stop here | | nd, third, fourth, o | r fifth tax year as | a section 501(c)(| 3) ▶ □ |
| | tion C. Computation of Pul | | | | | | |
| | Public support percentage for 20 | • | `` | | | | % |
| | Public support percentage from 2 | | | | | 16 | % |
| | tion D. Computation of Inv | | | | | | |
| | Investment income percentage for | | | | | | % |
| | Investment income percentage f | | | | | <u> </u> | 0/0 |
| | 33-1/3% support tests—2016. If t is not more than 33-1/3%, check | this box and sto | p here. The orgar | nization qualifies a | as a publicly supp | orted organization | ۱ ► 📗 |
| | 33-1/3% support tests—2015. If the line 18 is not more than 33-1/3% | , check this box a | and stop here. Th | ie organization qu | alifies as a public | ly supported orga | nization ► |
| 20 | Private foundation. If the organize | zation did not che | ck a box on line | 14, 19a, or 19b, c | neck this box and | see instructions. | ▶ ∐ |

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

| | | | Yes | No |
|-----|---|-----|-----|----|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). | 2 | | |
| За | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below. | За | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination. | 3b | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use. | 3с | | |
| 4a | Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below. | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. | 4b | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). | 5a | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5с | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i> | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i> | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ). | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI . | 9a | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI . | 9b | | |
| c | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI . | 9с | | |
| l0a | 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. | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.) | 10b | | |

| Pa | rt IV | Supporting Organizations (continued) | | | |
|-----|--|---|--------|---------|----|
| 11 | ∐ac : | the organization accepted a gift or contribution from any of the following persons? | | Yes | No |
| | | rson who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the | | | |
| | | erning body of a supported organization? | 11a | | |
| | b A far | mily member of a person described in (a) above? | 11b | | |
| | c 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 | ction | B. Type I Supporting Organizations | | | |
| | D: 1 11 | | | Yes | No |
| 1 | or ele Part If the direc | he directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in 'VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. e organization had more than one supported organization, describe how the powers to appoint and/or remove ctors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, lied to such powers during the tax year. | 1 | | |
| 2 | Did t that | the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such efit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization. | 2 | | |
| Sec | ction | C. Type II Supporting Organizations | | | |
| | | | | Yes | No |
| 1 | of ea | e a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the porting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| Sec | ction | D. All Type III Supporting Organizations | | | |
| | | | | Yes | No |
| 1 | orgai year, | the organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | orgai | e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported inization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | voice all tir | eason of the relationship described in (2), did the organization's supported organizations have a significant e in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played his regard. | 3 | | |
| Sec | ction | E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Chec | ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | | |
| | | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| | ᆷ | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| | ᆷ | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in | nstruc | tions). | |
| | • Ш | g | | | |
| 2 | Activ | vities Test. Answer (a) and (b) below. | | Yes | No |
| i | suppo orga respo | substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported anizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted stantially all of its activities. | 2a | | |
| | the c | the activities described in (a) constitute activities that, but for the organization's involvement, one or more of organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for organization's position that its supported organization(s) would have engaged in these activities but for the inization's involvement. | 2b | | |
| 3 | Pare | ent of Supported Organizations. <i>Answer (a) and (b) below.</i> | | | |
| i | a Did t each | the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i> | 3a | | |
| | b Did th supp | he organization exercise a substantial degree of direction over the policies, programs, and activities of each of its ported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard. | 3b | | |

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| Pa | rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga | anizat | tions | |
|-----|--|---------|--|--------------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization | t on No | ov. 20, 1970 (explain ir st complete Sections A | n Part VI). See through E. |
| Sec | tion 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 | | |
| Sec | tion 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): | | | |
| ā | Average monthly value of securities | 1a | | |
| | Average monthly cash balances | 1b | | |
| • | Fair market value of other non-exempt-use assets | 1c | | |
| | Total (add lines 1a, 1b, and 1c) | 1d | | |
| - | 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 | | |
| Sec | tion 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-functionally inte (see instructions). | egrated | Type III supporting or | ganization |

Schedule A (Form 990 or 990-EZ) 2016

| Pai | t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) | |
|-----|--|--------------|
| Sec | tion D – Distributions | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| 4 | Amounts paid to acquire exempt-use assets | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | |
| 6 | Other distributions (describe in Part VI). See instructions. | |
| 7 | Total annual distributions. Add lines 1 through 6. | |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. | |
| 9 | Distributable amount for 2016 from Section C, line 6 | |
| 10 | Line 8 amount divided by Line 9 amount | |

| Section E — Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2016 | (iii) Distributable Amount for 2016 |
|---|--------------------------------|--|---|
| 1 Distributable amount for 2016 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2016 (reasonable cause required — explain in Part VI). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2016: | | | |
| a | | | |
| b | | | |
| c From 2013 | | | |
| d From 2014 | | | |
| e From 2015 | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2016 distributable amount | | | |
| i Carryover from 2011 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 Distributions for 2016 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2016 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. | | | |
| 6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | |
| 7 Excess distributions carryover to 2017. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a | | | |
| b Excess from 2013 | | | |
| c Excess from 2014 | | | |
| d Excess from 2015 | | | |
| e Excess from 2016 | | | |
| BAA | | Schedule A (Fo | rm 990 or 990-EZ) 2016 |

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Schedule A (Form 990 or 990-EZ) 2016

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

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2016

| Name of the organization TEACHING PEAC | CE INC. | Employer identification number |
|---|--|--|
| DBA LGMNT CON | MUNITY JUSTICE PARTNERSHIP | 84-1291133 |
| Organization type (check one): | | • |
| Filers of: | Section: | |
| Form 990 or 990-EZ | \overline{X} 501(c)(3) (enter number) organization | 1 |
| | 4947(a)(1) nonexempt charitable trust not t | reated as a private foundation |
| | 527 political organization | |
| | | |
| Form 990-PF | 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treate | ed as a private foundation |
| | 501(c)(3) taxable private foundation | |
| | | |
| Check if your organization is covered by the | General Rule or a Special Rule. | |
| Note. Only a section 501(c)(7), (8), or (| 10) organization can check boxes for both the General F | Rule and a Special Rule. See instructions. |
| General Rule | | |
| For an organization filing Form 990, | 990-EZ, or 990-PF that received, during the year, contr Complete Parts I and II. See instructions for determinin | ibutions totaling \$5,000 or more (in money or g a contributor's total contributions. |
| Special Rules | | |
| X For an organization described in secunder sections 509(a)(1) and 170(b)(1) received from any one contributor. | ction 501(c)(3) filing Form 990 or 990-EZ that met the 33 (A)(vi), that checked Schedule A (Form 990 or 990-EZ), Parduring the year, total contributions of the greater of (1) \$ form 990-EZ, line 1. Complete Parts I and II. | 3-1/3% support test of the regulations rt II, line 13, 16a, or 16b, and that \$5,000 or (2) 2% of the amount on (i) |
| during the year, total contributions of | ction 501(c)(7), (8), or (10) filing Form 990 or 990-EZ th of more than \$1,000 <i>exclusively</i> for religious, charitable, ruelty to children or animals. Complete Parts I, II, and II | scientific, literary, or educational |
| during the year, contributions exclus \$1,000. If this box is checked, enter charitable, etc., purpose. Don't com | ction 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the sively for religious, charitable, etc., purposes, but no such here the total contributions that were received during the plete any of the parts unless the General Rule applies to charitable, etc., contributions totaling \$5,000 or more during \$5,0 | ch contributions totaled more than ne year for an <i>exclusively</i> religious, to this organization because |
| 990-PF), but it must answer 'No' on Pai | red by the General Rule and/or the Special Rules doesn t IV, line 2, of its Form 990; or check the box on line H | of its Form 990-EZ or on its Form 990-PF, |
| Part I, line 2, to certify that it doesn't m | eet the filing requirements of Schedule B (Form 990, 99 | 0-L∠, or 990-PF). |

Page

1 of

1 of Part I

TEACHING PEACE INC.

Employer identification number

| | 84-1291133 | |
|--|------------|--|
|--|------------|--|

| Part I | Contributors | (see instructions). | Use duplicate | copies of Part | I if additional space is need | ded. |
|--------|--------------|---------------------|---------------|----------------|-------------------------------|------|
|--------|--------------|---------------------|---------------|----------------|-------------------------------|------|

| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---------------|---|-------------------------------|--|
| 1 | | \$200,000. | Person X Payroll Noncash (Complete Part II for |
| (a) Number | LONGMONT, CO 80501 (b) Name, address, and ZIP + 4 | (c) Total contributions | noncash contributions.) (d) Type of contribution |
| 2 | ST. VRAIN VALLEY SCHOOL DISTRICT 395 SOUTH PRATT PARKWAY LONGMONT, CO 80501 | \$ 20,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | STATE OF COLORADO 1375 SHERMAN ST DENVER, CO 80261 | \$52,199. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | 45 | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions.) |

Page

1 of Part II

Name of organization

Employer identification number

TEACHING PEACE INC. 84-1291133

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| <u>N/A</u> _ | | | |
| | | s | |
| (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 | (b) | (a) | (d) |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | s | |
| (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 |
| | | | |
| | | 1 _{\$} | |
| AA | | Schedule B (Form 990, 990-E | |

TEEA0703L 08/09/16

1 to

of Part III

Nam TE

| ne of organization | Employer identification number |
|--------------------|--------------------------------|
| CACHING PEACE INC. | 84-1291133 |

| Part III | Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) | | | | | |
|---------------------------|--|---|--|---|--|--|
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held | | |
| | N/A | | | | | |
| | | | | | | |
| | Transferee's name, address | (e) Transfer of gift s, and ZIP + 4 | Rela | tionship of transferor to transferee | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held | | |
| | | (e) Transfer of gift | | | | |
| (a) No. from | Transferee's name, address (b) Purpose of gift | (c) Use of gift | | tionship of transferor to transferee (d) Description of how gift is held | | |
| Part I | | | | | | |
| | Transferee's name, address | (e) Transfer of gift s, and ZIP + 4 | Relationship of transferor to transferee | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held | | |
| | | | | | | |
| | Transferee's name, address | (e) Transfer of gift s, and ZIP + 4 | Rela | tionship of transferor to transferee | | |
| | <u></u> | | | | | |

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

m990. Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

TEACHING PEACE INC.

OMB No. 1545-0047

| | DBA LGMNT COMMUNITY JUSTICE | E PARTNERSHIP | | 84-1291133 | |
|-----|---|--|---|---|------|
| Par | t Organizations Maintaining Dono | r Advised Funds or Other | Similar Funds | | |
| | Complete if the organization answ | vered 'Yes' on Form 990, F | Part IV, line 6. | | |
| | | (a) Donor advised fun | nds | (b) Funds and other accounts | |
| 1 | Total number at end of year | | | | |
| 2 | Aggregate value of contributions to (during year) | | | | |
| 3 | Aggregate value of grants from (during year) | | | | |
| 4 | Aggregate value at end of year | | | | |
| 5 | Did the organization inform all donors and dor are the organization's property, subject to the | | | | 0 |
| 6 | Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit? | rs, and donor advisors in writing of the donor or donor advisor, o | that grant funds or for any other pu | ran be used only rpose conferring Yes No | 0 |
| Par | Conservation Easements. Complete if the organization answ | wered 'Yes' on Form 990, F | Part IV, line 7. | | |
| 1 | Purpose(s) of conservation easements held by | | | | |
| | Preservation of land for public use (e.g., r | ecreation or education) | Preservation of a | historically important land area | |
| | Protection of natural habitat | · H | Preservation of a | certified historic structure | |
| | Preservation of open space | Ш | | | |
| 2 | Complete lines 2a through 2d if the organization hast day of the tax year. | eld a qualified conservation contrib | ution in the form of | a conservation easement on the | |
| | | | | Held at the End of the Tax Y | ear |
| á | Total number of conservation easements | | | 2a | |
| ŀ | Total acreage restricted by conservation easer | ments | | 2 b | |
| (| : Number of conservation easements on a certif | ied historic structure included in | (a) | 2 c | |
| C | Number of conservation easements included in structure listed in the National Register | n (c) acquired after 8/17/06, and | not on a historic | 2 d | |
| 3 | Number of conservation easements modified, trantax year ► | sferred, released, extinguished, or | terminated by the c | organization during the | |
| 4 | Number of states where property subject to conse | rvation easement is located ► | | | |
| 5 | Does the organization have a written policy re- | garding the periodic monitoring, | inspection, handli | ng of violations, | |
| | and enforcement of the conservation easemer | | | | 0 |
| 6 | Staff and volunteer hours devoted to monitoring, i | | - | | |
| 7 | Amount of expenses incurred in monitoring, inspe | cting, handling of violations, and er | nforcing conservation | on easements during the year | |
| 8 | Does each conservation easement reported or and section 170(h)(4)(B)(ii)? | line 2(d) above satisfy the requ | irements of sectio | n 170(h)(4)(B)(i) Yes No | 0 |
| 9 | In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements. | conservation easements in its reve o the organization's financial sta | enue and expense s tements that desc | statement, and balance sheet, and cribes the organization's accounting for | or |
| Par | | ctions of Art, Historical Tr wered 'Yes' on Form 990, F | easures, or Ot Part IV, line 8. | her Similar Assets. | |
| 1 a | If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan | ld for public exhibition, education, of | or research in furth | statement and balance sheet works erance of public service, provide, | of |
| ŀ | If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items: | or public exhibition, education, or re | search in furtheran | ce of public service, provide the | art, |
| | (i) Revenue included on Form 990, Part VIII, | | | | |
| | (ii) Assets included in Form 990, Part X \dots | | | | |
| | If the organization received or held works of art, h amounts required to be reported under SFAS | 116 (ASC 958) relating to these i | items: | | |
| | Revenue included on Form 990, Part VIII, line | 1 | | | |
| L | Accets included in Form 900 Part Y | | | ⊳ ġ | |

| Part III Organizations Maintai | ning Collec | ctions of Art, | HISTORICA | ai ireasures, or | Otner Similar Ass | ets (continu | iea) |
|--|--------------------------|---------------------------------|---------------|--------------------------------|------------------------------|------------------------|----------|
| 3 Using the organization's acquisition items (check all that apply): | , accession, and | d other records, | | · · | a significant use of its | collection | |
| a Public exhibition | | d | Loan or ex | change programs | | | |
| b Scholarly research | | е | Other | | | | |
| c Preservation for future gener | ations | | | | | | |
| 4 Provide a description of the organiz Part XIII. | ation's collectio | ns and explain h | ow they furtl | ner the organization's | exempt purpose in | | |
| 5 During the year, did the organiza to be sold to raise funds rather the | nan to be main | itained as part o | of the organ | ization's collection? | | Yes | No |
| Part IV Escrow and Custodia line 9, or reported an | Arrangeme amount on F | ents. Comple Form 990, Pa | art X, line | organization ans 21. | wered 'Yes' on Fo | rm 990, Pai | rt IV, |
| 1 a Is the organization an agent, trus on Form 990, Part X? | tee, custodian | or other interm | nediary for o | contributions or other | assets not included | Yes | No |
| b If 'Yes,' explain the arrangement | in Part XIII an | nd complete the | following ta | able: | <u>'</u> | | |
| | | | | | | Amount | |
| c Beginning balance | | | | | . 1c | | |
| d Additions during the year | | | | | . 1 d | | |
| e Distributions during the year | | | | | . 1e | | |
| f Ending balance | | | | | . 1f | | |
| 2 a Did the organization include an a | mount on Forn | n 990, Part X, I | ine 21, for e | escrow or custodial a | account liability? | Yes | No |
| b If 'Yes,' explain the arrangement | in Part XIII. C | heck here if the | explanatio | n has been provided | on Part XIII | | |
| Part V Endowment Funds. C | omplete if the | he organizati | on answe | ered 'Yes' on For | m 990, Part IV, Iir | ne 10. | |
| | (a) Current y | ear (b) | Prior year | (c) Two years back | (d) Three years back | (e) Four year | rs back |
| 1 a Beginning of year balance | | | | | | | |
| b Contributions | | | | | | | |
| c Net investment earnings, gains, and losses | | | | | | | |
| d Grants or scholarships | | | | | | | |
| e Other expenditures for facilities and programs | | | | | | | |
| f Administrative expenses | | | | | | | |
| g End of year balance | | | | | | | |
| 2 Provide the estimated percentage | e of the current | t year end bala | nce (line 1g | , column (a)) held a | S: | | |
| a Board designated or quasi-endowm | ent ► | % | | | | | |
| b Permanent endowment ► | % | | | | | | |
| c Temporarily restricted endowmer | nt ► | % | | | | | |
| The percentages on lines 2a, 2b, ar | nd 2c should equ | ual 100%. | | | | | |
| 3 a Are there endowment funds not in to organization by: | | | | | | Yes | No |
| (i) unrelated organizations | | | | | | 3a(i) | <u> </u> |
| (ii) related organizations | | | | | | 3a(ii) | <u> </u> |
| b If 'Yes' on line 3a(ii), are the rela | - | | • | | | 3b | |
| 4 Describe in Part XIII the intended | | | ndowment fu | unds. | | | |
| Part VI Land, Buildings, and I Complete if the organi | • • | | n Form 99 | 90, Part IV, line | 11a. See Form 99 | 0, Part X, li | ne 10. |
| Description of property | (7 | a) Cost or other (investment | basis (I | b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book va | alue |
| 1 a Land | | - | | | | | |
| b Buildings | | | | | | | |
| c Leasehold improvements | _ | | | | | | |
| d Equipment | | | | | | | |
| e Other | | | | | | | |
| Total. Add lines 1a through 1e. (Colum | | ual Form 990. F | Part X. colur | mn (B), line 10c.) | > | | 0. |
| BAA | (1) | | . , | (), | | ıle D (Form 990 | |

Schedule **D** (Form 990) 2016

| Part VII Investments – Other Securities. | IVaal on Farm 00 | N/A | 000 Dort V line 12 |
|---|------------------------|--|------------------------|
| Complete if the organization answered (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end- | |
| | (D) Book value | (C) Method of Valuation. Cost of end-t | or-year market value |
| (1) Financial derivatives | | | |
| (3) Other | | | |
| | | | |
| (A) (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| <u>`</u> (H) | | | |
| (l) | | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶ | | | |
| Part VIII Investments — Program Related. | | N/A | |
| Complete if the organization answered | | | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end | I-of-year market value |
| _ (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| <u>(9)</u> (10) | | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) • | | | |
| Part IX Other Assets. | N/A | | |
| Complete if the organization answered | | 0, Part IV, line 11d. See Form 9 | |
| • | scription | | (b) Book value |
| <u>(1)</u> (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| (10) | D) // 15) | | |
| Total. (Column (b) must equal Form 990, Part X, column (b) | 3) line 15.) | | |
| Part X Other Liabilities. Complete if the organization answered 'Yes' on F | orm 990 Part IV line 1 | 1e or 11f See Form 990 Part X line 25 | |
| (a) Description of liability | (b) Book value | | |
| (1) Federal income taxes | (1) | | |
| (2) ACCRUED WAGES, PTO & RLTD PAYROLL | T 3,61 | 10. | |
| (3) RESTITUTION PAYABLE | 4(| 00. | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) (8) | | | |
| (9) | | | |
| (10) | | | |
| (11) | | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) | . • 4,01 | 10. | |
| 2 11 12 1 | | | |

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

| Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R | oturn | - |
|--|---------|----------|
| | eturii. | |
| Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. | | |
| 1 Total revenue, gains, and other support per audited financial statements | 1 | 355,481. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a Net unrealized gains (losses) on investments | | |
| b Donated services and use of facilities | | |
| c Recoveries of prior year grants | | |
| d Other (Describe in Part XIII.) | | |
| e Add lines 2a through 2d. | 2 e | |
| 3 Subtract line 2e from line 1. | 3 | 355,481. |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b 4a | | |
| b Other (Describe in Part XIII.) | | |
| c Add lines 4a and 4b. | 4 c | |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 355,481. |
| Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per | Return. | |
| Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. | | |
| 1 Total expenses and losses per audited financial statements | 1 | 331,241. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: | | • |
| a Donated services and use of facilities | | |
| b Prior year adjustments | | |
| c Other losses | | |
| d Other (Describe in Part XIII.) 2d | | |
| e Add lines 2a through 2d. | 2 e | |
| 3 Subtract line 2e from line 1 . | 3 | 331,241. |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: | | 001/1111 |
| a Investment expenses not included on Form 990, Part VIII, line 7b | | |
| b Other (Describe in Part XIII.) | | |
| c Add lines 4a and 4b. | 4 c | |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). | 5 | 331,241. |

Part XIII Supplemental Information.

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

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION HAS ADOPTED ASC 740, PERTAINING TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. CURRENTLY, THE ORGANIZATION DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS.

BAA Schedule **D** (Form 990) 2016

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2016

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

TEACHING PEACE INC.
DBA LGMNT COMMUNITY JUSTICE PARTNERSHIP

Employer identification number 84-1291133

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

ALL BOARD MEMBERS ARE GIVEN A DRAFT OF FORM 990 BEFORE IT IS APPROVED FOR FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE BOARD OF DIRECTORS IS REQUIRED TO SIGN AN ANNUAL DISCLOSURE FORM, LISTING ANY POTENTIAL CONFLICTS OF INTEREST WITH THE ORGANIZATION.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE ANNUAL COMPENSATION FOR THE EXECUTIVE DIRECTOR AND OTHER STAFF IS REVIEWED ANNUALLY BY THE BOARD OF DIRECTORS. THIS INFORMATION IS ALSO REVIEWED AGAINST THE COMMENSURATE COMPENSATION OF EXECUTIVE DIRECTORS AND EMPLOYEES IN SIMILAR NONPROFIT ORGANIZATIONS.

FORM 990, PART VI. LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

A COPY OF THE ORGANIZATION'S FORM 990 IS AVAILABLE TO THE PUBLIC AT WWW.GUIDESTAR.ORG. A COPY OF THE ORGANIZATION'S GOVERNING DOCUMENTS IS AVAILABLE UPON REQUEST.