CHANGE IN TAX YEAR, SHORT-PERIOD RETURN

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Intern	al Reve	enue Service	▶ Information about F	Form 990 and its instructions	is at www	.irs.gov/form990	o. 1 1 🗸 🗀	Inspection	
A F	or th	e 2016 calen	dar year, or tax year beginning	JUL 1, 2017 and	dending	SEP 30, 201	7		
B c	heck if pplicab	C Name	of organization			D Employe	r identifica	ation number	
	Addre chan	ess ge SOCLA	L VENTURE PARTNERS			j			
	Name	,	business as SOCIAL VENTURE I	PARTNERS SEATTLE		$\dashv$	91-1894	124	
	Initial		er and street (or P.O. box if mail is not d	lelivered to street address)	Room/sur	te E Telephon	e number		
	Final	220 8	ECOND AVENUE S	,	300	- 10.00	206-374	-8757	
	term	n-	town, state or province, country, and	d ZIP or foreign postal code		G Gross receip	ots \$	800,637.	
	Amer	nded anama	LE, WA 98104-2617	a and a second of the second o		H(a) Is this a			
	Appli	r F Name	and address of principal officer SOL	YNN MCCURDY		_	ordinates?	Yes X No	
	pend	ing i	S C ABOVE			H(b) Are all su		uded? Yes No	
T	ax-ex	empt status:	x 501(c)(3) 501(c)(	) (insert no.) 4947(a)(1)	or 5	<del></del>		st. (see instructions)	
			VPSEATTLE ORG		n	H(c) Group			
K F	orm o	f organization:	x Corporation Trust	Association Other	L Ye	ar of formation: 1		State of legal domicile: WA	
Pa	rt I	Summar	у						
9	1	Briefly descr	be the organization's mission or mos	st significant activities: SOCIAL	. VENTUR	E PARTNERS (	SVP)		
auc	}	CULTIVATES	S EFFECTIVE PHILANTHROPISTS	AND STRENGTHENS ORGANIZ	RATIONS				
Governance	2	Check this b	ox 🕨 📖 if the organization disc	ontinued its operations or dispo	osed of mo	ore than 25% of	its net ass	ets.	
Š	3	Number of v	oting members of the governing bod	ly (Part VI, line 1a)			3	18	
8	4	Number of in	dependent voting members of the g	overning body (Part VI, line 1b)			4	18	
ies	5	Total numbe	r of individuals employed in calendar	r year 2016 (Part V, line 2a)			. 5	0	
Activities &	6	Total numbe	r of volunteers (estimate if necessary	<i>(</i> )		-	6	33	
Act	7 a	Total unrelat	7a	0.					
	ь	Net unrelated	d business taxable income from Forr	_ <del></del>	7b	0.			
					L	Prior Yea		Current Year	
e	8		s and grants (Part VIII, line 1h)				59,928.	756,945.	
Revenue	9	•	vice revenue (Part VIII, line 2g)	\		73,901.	18,862.		
Re	10		ncome (Part VIII, column (A), lines 3,	\		<1,091.>	286.		
	11		ue (Part VIII, column (A), lines 5, 6d, 8		<4,458.>	<1,307.			
_	12		e - add lines 8 through 11 (must equa	10	<del>}\</del> +	<del></del>	28,280.	774,786.	
	13	Grants and s	similar amounts paid (Part IX, column	(A), lines 1-3) 12018	<b>∌</b> ∤· · ⊦	1,0:	99,100.	25,000. 0.	
	14	Benefits paid	to or for members (Part IX, column	My, line and it	Œ.\  -	<del></del>			
Expenses	15		er compensation, employee benefits, fundraising fees (Part IX, column (A),		, <u> </u>		35,287.	215,359. 0.	
oe u			rundraising lees (Part IX, column (A), sing expenses (Part IX, column (D), it		,647.		<del></del>		
X	17		sing expenses (Fart IA, column (D), i ses (Part IX, column (A), lines 11a-11		<del>,°=,.</del>	81	38,568.	165,833.	
	18		es. Add lines 13-17 (must equal Part	•	<u> </u>		22,955.	406,192.	
	19	•	s expenses. Subtract line 18 from line	• • • • • • • • • • • • • • • • • • • •	·  -	<del> </del>	94 675	368,594.	
288		Tievende les	o expenses. Cabitaet inte 10 from inte	<u> </u>	<del></del>	Beginning of Curr		End of Year	
Net Assets or Fund Balances	20	Total assets	(Part X, line 16)		F	<del></del>	17,565.	1,335,107.	
Ass	21		s (Part X, line 26)		·		6,550.	175,498.	
E SE	22		r fund balances. Subtract line 21 from	 m line 20	-		1,015.	1,159,609.	
Pa	rt II	Signatur						<del></del>	
Unde	er pena	alties of perju	I declare that I have examined this return	n, including accompanying schedule	es and state	ments, and to the	best of my k	nowledge and belief, it is	
		1	e. Declaration of pregage (other than office			•	•	,	
		10	11111111111111111111111111111111111111		: <u>`</u>		8/15/	18	
Sigr	3	Signatu	rest officer		······································	Date		· · · · · · · · · · · · · · · · · · ·	
Here		SOLYN	N MCCURDY, CE						
	Type or print name and title								
		Print/Type pro	eparer's name	Preparer's signature		Date	Check	PTIN	
Paid		JANE M. SE	ARING	JANE M. SEARING		08/13/18	if self-employed	P00000565	
Prep	arer	Firm's name	CLARK NUBER, PS			Firm'		91-1194016	
Use	Only	Firm's addres	10900 NE 4TH STREET, SU	ITE 1400				<del></del>	
		1	RELLEVITE WA 98004			Dhon	a sa 425-4	54-4919	

632001 11-11-16 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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

Form **990** (2016)

X Yes



Form	990 (2016) SOCIAL VENTURE PARTNERS	91-1894424	Page 2
Pai	t III   Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		[x]
1	Briefly describe the organization's mission	<del></del>	
•	SOCIAL VENTURE PARTNERS (SVP) CULTIVATES EFFECTIVE PHILANTHROPISTS AND		
	STRENGTHENS ORGANIZATIONS DRIVING COMMUNITY CHANGE - BUILDING POWERFUL	<del> </del>	
	RELATIONSHIPS THAT ADVANCE SHARED COMMUNITY GOALS. SVP EDUCATES		
	INDIVIDUALS TO BE WELL INFORMED, EFFECTIVE, AND ENGAGED		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	_	Yes X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	?	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	e massured by	avoancee
7		•	•
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	iers, the total ex	cpenses, and
	revenue, if any, for each program service reported.		<del></del>
4a	(Code) (Expenses \$) (Reve	nue \$	)
	PHILANTHROPY DEVELOPMENT: PROVIDE WORKSHOPS, SEMINARS AND EXPERIENTIAL		
	LEARNING OPPORTUNITIES FOR INDIVIDUALS IN ORDER TO: A) INCREASE THEIR		
	USE OF STRATEGIC GIVING STRATEGIES; B) INCREASE ENGAGEMENT IN THEIR		
	COMMUNITIES; C) INCREASE THEIR AMOUNT OF GIVING. LEARNING AREAS INCLUDE		
	GRANTMAKING, VOLUNTEERING, CULTURAL COMPETENCY, ISSUES, VALUES AND		
	INTEGRATION, NONPROFIT SECTOR, AND FINANCIAL PLANNING AND GIVING		
	VEHICLES.		·
		<del></del>	<del></del>
		<del></del>	
	62.655		<del></del>
4b	· · · · · · · · · · · · · · · · · · ·	nue \$	·······························
	CAPACITY BUILDING: HELP NON-PROFITS TO BE AS EFFECTIVE AS POSSIBLE IN		
	DELIVERING THEIR PROGRAMS AND SERVICES BY HELPING TO BUILD THEIR		
	ORGANIZATIONAL CAPACITY, SOCIAL VENTURE PARTNERS DEFINES ORGANIZATION		
	CAPACITY BUILDING AS THE DEVELOPMENT OF CORE SKILLS, MANAGEMENT		
	PRACTICES, STRATEGIES AND SYSTEMS TO ENHANCE AN ORGANIZATION'S		<del></del>
	EFFECTIVENESS, SUSTAINABILITY, AND ABILITY TO FULFILL ITS MISSION.	<del>-</del>	
	SOCIAL VENTURE PARTNERS SUPPORTS CAPACITY BUILDING FOR ITS INVESTEES BY		
	PROVIDING CASH GRANTS, SKILLED VOLUNTEERS, PROFESSIONAL CONSULTANTS,		
	LEADERSHIP DEVELOPMENT AND MANAGEMENT TRAINING OPPORTUNITIES.		
			<del></del>
4c	(Code) (Expenses \$ 58,306. including grants of \$ 25,000.) (Rever		16,862.)
	STATEWIDE CAPACITY COLLABORATIVE: SVP ACTS AS THE CONVENER AND		
	FACILITATOR OF A GROUP OF GRANT MAKERS THAT WORK TO ALIGN, COLLABORATE,		<del></del>
	STRATEGIZE, AND POOL FUNDS TO SUPPORT AND STRENGTHEN THE CAPACITY OF		<del></del>
	NONPROFITS AND THE STATEWIDE SYSTEM THAT SUPPORTS NONPROFITS.		
	NONFROFITS AND THE STATEWIDE SISTEM THAT SUFFORTS NONFROFITS,		
			<del></del>
	<del></del>		<del></del>
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 30,994. including grants of \$ ) (Revenue \$	2,000	-)
4e	Total program service expenses ▶ 258,521.		<del></del>

# Form 990 (2016) SOCIAL VENTURE PAR Part IV Checklist of Required Schedules

foreign organization? If "Yes," complete Schedule F, Parts II and IV  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  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  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  18 X		•		Yes	No
2 Is the organization required to complete Schedule 6, Schedule of Contibutions?  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 II and the Organization of the organization of the organization of the organization of the organization that receives membership dues, assessments, or similar amounts as defined in Neenue Procedure 95.197 If "Yes," complete Schedule C, Part III be organization that receives membership dues, assessments, or similar amounts as defined in Neenue Procedure 95.197 If "Yes," complete Schedule C, Part III be organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts If "Yes, complete Schedule D, Part II or brovide advised on the distribution or investment of amounts in such funds or accounts If "Yes," complete Schedule D, Part II old the organization maintain and produce and assessment, including assessments to preserve open space, the environment, historical relates, or institutions II is such that organization maintain collections of works of art, historical treasures, or other similar assessits? If "Yes," complete Schedule D, Part II old the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodial 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 V ii II the organization report an amount for lend, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part V ii II the organization report an amount for lend, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part V ii	1			x	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  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  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  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts of which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts of which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts of which donors have the right to provide advise on the distribution or investment or amounts in cluding accounts (all the organization report an amount in Part X, line 21, for escribing the second or amounts in clied in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VII  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  2 Did the organization report an amount for investments of the securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  2 Did the organization report an amount for investments in program related in Part X, line 19 If "Yes," complete Schedule D, Part VIII  2 Did the organization report an amount for investments in Part X, line 19 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," comple	2				
section 501(\$3) organizations. Did the organization engage in lobbying activities, or have a section 501(\$1) election in effect during the tax year? If "Yes," complete Schedule C, Part II    Is the organization a section 501(\$1)(\$1, 501(\$16)), or 501(\$16)(\$1) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III    Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II    Did the organization receive or hold a conservation easement, including easements to pressive open space, the environment, historic land areas, or historic structures II "Yes," complete Schedule D, Part II    Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III    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 imanagement, credit repair, or debt negotiations servees? If "Yes," complete Schedule D, Part IV    Did the organization developed the part X in provide credit counseling, debt imanagement, or detire reports, or debt negotiations servees? If "Yes," complete Schedule D, Part IV    Did the organization report an amount for liability or provide credit counseling, debt imanagement, credit repair, or debt negotiations servees? If "Yes," complete Schedule D, Part IV    Did the organization report an amount for liabilities or "Yes," then complete Schedule D, Part IV    Did the organization report an amount for liabilities or "Yes," then complete Schedule D, Part X    Did the organization report an amount for investments - program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16?					
dumq the tax year? If "Yes," complete Schedule C, Part II    is the organization a section Schlog(s), 501(c)(s), or 501(c)(s), or 501(c)(s), or 501(c)(s), or 501(c)(s), or 501(c)(s), or 501(c)(s) or 5			3		x
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6 Did the organization maintain any donor advised funds or any similar funds or accounts? fir "Yes," complete Schedule D, Part II  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  8 Did the organization maintain collections of vorks of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization maintain collections of vorks of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  10 Did the organization propria 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  10 Did the organization or snawer to any of the following questions is "Yes," then complete Schedule D, Part V II the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V III II the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V III  11 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  2 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 VIII  3 Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III  4 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 X III  5 Did the organization separate or consolidated financial statem	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I I D to the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic and areas, or historic structures? If "Yes," complete Schedule D, Part II I D to the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II D lid 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 V I D lid 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 I If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V I D Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V I D Did the organization report an amount for other assets 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 V I D D D D D D D D D D D D D D D D D D		similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
The different program of the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III  Did the organization manufant collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization 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  Did the organization report an amount of pression of the following questions is "Yes," then complete Schedule D, Part V if the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V is 10 bid the organization report an amount of investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V is 11 bid the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V is 11 bid the organization report an amount for investments - other securities 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 V is 11 bid the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X is 11 bid the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X is 2 bid the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X is 2 bid the organization report and amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X is 2 bid the organization report and part X, line 16 financial statements for the tax year? If "Yes,"	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III  7		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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Schedule D, Part III  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  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  11 If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Part VI, IVI, VIII, IX, or X as applicable.  12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D, Part VII  13 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VIII  14 Did the organization report an amount for other liabilities 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 X III  15 Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X III  16 Did the organization or separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII  17 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? "Yes," complete Schedule F, Parts I and IV  18 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 II and IV  19 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggreg		• • • • •	7		X
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b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  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 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 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I  17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 12 and 8a? If "Yes," complete Schedule G, Part II  18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		•			
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or more? If "Yes," complete Schedule F, Parts I and IV  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  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  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  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  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"				i	
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  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  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  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  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			14b		x
foreign organization? If "Yes," complete Schedule F, Parts II and IV  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  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  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  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	15		***		
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  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  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  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		· ·	15	l	x
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  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  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I  17 X  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		or for forming industrials? If "Voc." complete Schodule E. Porte III and IV	16	{	X
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  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	17				
1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		Ţ		
1.04.44.00.48			18		Х
complete Schedule G, Part III	19		1		
		complete Schedule G, Part III	19	لـــــا	Х

Form 990 (2016) SOCIAL VENTURE PARTNERS

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
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	1	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? If "Yes," complete	)	}	1
	Schedule J	23	)	x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	)	}	)
	Schedule K. If "No", go to line 25a	24a	ĺ	x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<del></del>	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
С		045	Ì	1
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del> </del>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		Ì	
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<b></b>	x
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1	1	1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		1	l
	Schedule L, Part I	25b	<b>-</b>	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		1	ì
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			1
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		1
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			Ì
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	<u>                                     </u>		
•	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	25.		
36	• • •	35b		
30	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	ا ہر ا		v
27	If "Yes," complete Schedule R, Part V, line 2	36		<u>x</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	ا ۔ ا		v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_ <u>x</u>
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	_ X	

Statements Regarding Other IRS Fillings and Tax Compliance   Cred K Schedule O contains a response on role to any into in this Part V   Test   No.		990 (2016) SOCIAL VENTURE PARTNERS 91-1894424		Р	age 5
The Enter the number reported in Box 3 of Form 1096, Enter-0- if not applicable  □ Did the organization comply with backup withholding rules for reportable payments to vendom and reportable gaming (gambning) withmost pot zero withmost 2 of the organization comply with backup withholding rules for reportable payments to vendom and reportable gaming (gambning) witnings to praze withmost?  □ Did the organization comply with backup withholding rules for reportable payments to vendom and reportable gaming (gambning) witnings to praze withmost?  □ Did the complexes reported on Form W.3, Transmittal of Wage and Tax Statements, field of the celendar year endowly with or within the year covered by this return  □ Did I at least one is reported on Iner 2a, did the organization file all required feederal employment tax returns?  Note, if the sum of lares 1 and 2a is greater than 250, you may be required to e-file (see instructions)  □ Did the organization have unrelated business gross income of \$1,000 or more during the year?  □ Did the organization have unrelated business gross income of \$1,000 or more during the year.  □ I 'Yes, 's all is filed a form 990 Trom by year? I 'No. 10 in et all, provided an explanation and scoounty.  □ Did the organization is filed a form 990 Trom by year. I 'No. 10 in et all, provided an explanation and scoounts (FBAR).  □ Did any taxable party rothly the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  □ Did any taxable party rothly the organization that it was or is a party to a prohibited tax shelter transaction any contributions in that we not organization that was or is a party to a prohibited tax shelter transaction any contributions hat were not tax deductibles or mortifications.  □ Did the organization state that organization that it was or is a party to a prohibited tax shelter transaction organization state that organization in the organization that was required to the form 800 the organization state where that eductib	Pai				_
tal Effect the number of forms Wolfs included in in ear. Enter 0-ft not applicable  Defect the number of forms Wolfs included in in ear. Enter 0-ft not applicable  Defect the number of forms Wolfs included in in ear. Enter 0-ft not applicable  Defect the number of forms Wolfs included in in ear. Enter 0-ft not applicable  Defect of the called on the wolfs of the second of the s		Check if Schedule O contains a response or note to any line in this Part V			لا
b Enter the number of Forms W-26 included in line 1a. Enter 0 f not applicable				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gamining) wiminings to prace wimners?  25 Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return.  26 If all tests core is reported on the 28, did the organization file all required federal employment tax returns?  26 Note. If the sum of Ines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  27 Did the organization have unrelated business gross scrone of \$1 Li00 or more dump the year?  28 Did the organization have unrelated business gross scrone of \$1 Li00 or more dump the year?  38 Z X  39 Did the organization have unrelated business gross scrone of \$1 Li00 or more dump the year?  39 Did the organization have unrelatively the year?  30 Did the organization along varyar, dut the organization have interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  30 Did any tax ability of the organization than the variation of the organization and the foreign country (such as a bank account, securities account, or other financial Accounts (FBAR).  30 Did any tax ability the organization that it was or is a party to a prohibited tax shelter transaction?  31 Did any tax ability the organization that it was or is a party to a prohibited tax shelter transaction?  32 Did the organization and party or prohibited tax shelter transaction?  33 Did the organization include with every solicitation are represses statement that such contributions or grits were not tax deductible?  34 Did the organization that may receive deductible contributions under section 170(c).  35 Did the organization that may receive deductible contributions under section 170(c).  36 Did the organization and the party or otherwise dispose of tangible personal property for which it was	1a	Enter the number reported in Box 3 of Form 1096, Enter -0- if not applicable			l
gambing) winnings to prize winners?  2a Either the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by the return  b If at least one is reported on line 22, did the organization file all required federal employment tax returns?  2b Mote. If the sum of lines 1s and 2s is greater than 250, you may be required to e-fife (see instructions)  3a Do the organization have unrelated business gross income of \$1,000 or more dump the year?  3b If 1'Yes', has if filed a Form 950-1 for this year? If 70, 7 for line 3p, 7 more damp the year?  3c All at any time dump the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, sourcines account, or other financial account)?  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization as party to a prohibited fax shelter transaction at any time during the tax year?  5d Dod any taxable party notify the organization that it was or is a party to a prohibited at shelter transaction?  5d Dod any taxable party notify the organization fail it was or is a party to a prohibited at shelter transaction?  5d Dod any taxable party notify the organization from 8898 17?  5d Dod see that were not tax deductable as charitable contributions and party for goods and services provided?  7d Organizations that may receive deductable contributions under section 170(c).  6d Did the organization receive an applied in excess of 576 made party set contributions and party for goods and services provided to the payor?  7d If Yes, and the organization received and service services provided?  7d Did the organization received a contribution of organization property for which it was required to life form 8202?  7d Did the organization rece	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			l
2a Eiter the number of employees reported on Form WS, Transmittal of Wage and Tax Statements, filled for the calendary year ending with or within the year covered by this return  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sun of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have uncertised business gross income of \$1 ALDO or more dump the year?  5a Did the organization have uncertised business gross income of \$1 ALDO or more dump the year?  5a At any time dumpit the calendary year, of the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5b If "Yes," there the naine of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c Was the organization aparty to a prohibed tax shefter transaction at any time during the tax year?  5c If "Yes, to line 5a or 5b, did the organization file Form 88861"?  6c If "Yes, to line 5a or 5b, did the organization file Form 88861"?  6d If Yes, and the organization aparty or other was a party to a prohibited tax shelter transaction?  6d If Yes, to line 5a or 5b, did the organization file Form 88861" in If Yes, and the organization receive deductible as charitable contributions and party for goods and services provided to the payor?  6d If Yes, indicate the number of Forms 8282 filed during the year  6d If Yes, indicate the number of Forms 8282 filed during the year  7d Did the organization receive a primertin excess of \$55 made parity as a contribution and party for goods and services provided to the flag organization review and further services and property for which it was required?  7d Did the organization review and contribution of organization and party for goods and services provided to the flag organization review and profit which the organizatio	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
bit of the calendar year ending with or within the year covered by this return  bit of a least one is reported on line 2a, did the organization file all required feeded employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross is some of \$1,000 or more during the year?  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account)?  4b If "Yes," enter the name of the foreign country   ▶  5ce instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b If Yes," to line 5a or 55, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes," to line 5a or 55, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes," to line 5a or 55, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes," to the did the organization file Form 88861?  5c If Yes," to the organization neclude with every solicitation an express statement that such continutions or gifts were not tax deductible?  6c If Yes," and the organization state may receive deductible contributions under settlement 170(c).  6c If Yes," indicate the number of Form 88826 filed during the year  6c If Yes," indicate the number of Form 88282 filed during the year  6c If Yes," indicate the number of Form 88282 filed during the year  7c If If Yes," indicate the number of Form 88282 f		(gambling) winnings to prize winners?	1c		<u> </u>
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3b If "Yes," has filled a form 990-1 for this year? If "No," to line 3b, provide an explanation in Schedule O  3b If "Yes," has filled a form 990-1 for this year? If "No," to line 3b, provide an explanation in Schedule O  3c At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts?  4c At the organization are the foreign country   Ph    See instructions for filing requirements for FinCEN form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, to line 5a or 5b, did the organization noticult with every solicitation an express statement that such contributions or gifts were not tax deductable?  5c If Yes, to the solicitation that may receive deductable contributions under section 170(c).  5d If Yes, to the organization receive a payment in excess of \$75 made party as contribution and party for goods and services provided to the payor?  5d If Yes, to the organization receive any funds, directly or indirectly, to pay premiums on a personal	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3		filed for the calendar year ending with or within the year covered by this return . 2a0			Ì
3a Diff the organization have unrelated business gross income of \$1,000 or more during the year?  b if "Yes," this if filed a Form 990-T for this year? if "No." to fine 3b, provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country leuch as a bank account, securities account, or other financial accountly?  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR).  Sa Was the organization a party to a prohibeted tax shelter transaction at any time during the tax year?  5a Was the organization and the organization that it was or is a party to a prohibeted tax shelter transaction?  5b If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibeted tax shelter transaction?  5c If "Yes," to the 5a or 5b, did the organization that of the Form 8896-17?  5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions have arnual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions have very solicitation in a express statement that such contributions or gifts were not tax deductible?  6a X  5b If "Yes," did the organization shelf way receive deductible contributions under section 170(c).  a Did the organization shall may receive deductible contributions under section 170(c).  a Did the organization shall any receive deductible contributions under section 170(c).  b If "Yes," did the organization of the value of the goods or senices provided?  f If Yes, "did the organization of the value of the goods or senices provided?  If Yes, "did the organization in offity the donor of the value of the goods or senices provided?  If the organization received a contribution of qualified intellectual property, did the organization file form 8899 as required?  If the organization	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b if "Yes," has if field a Form 990-T for this year? if "No," to line 3b, provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5b if "Yes," enter the name of the foreign country. ►  5c sen instructions for filing requirements for FinCMF form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction of the variety of the organization that it was or is a party to a prohibited tax shelter transaction?  5b If "Yes," to line 5a or 5b, did the organization file Form 886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twen not tax deductible as chariable contributions?  6a X  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as chariable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 822?  7c If "Yes," addicate the number of Forms 8282 filed duming the year.  8 Did the organization or eceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 If the organization received a contribution of cash, boats, anjanese, or other vehicles, did the organization flore form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make a setabitubion to a donor, donor advisor, or related person?  9 Sponsoring org		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
4a A lany time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  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).  S Was the organization a pray to a prohibeted tax shelter transaction at any time during the tax year?  5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization should any contributions have annual gross receipts that are normally greater than \$100,000, and did the organization should any contributions have were not tax deductible as charitable contributions?  5b If Yes, "did the organization neture with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8d by the organization receive application of the value of the goods or services provided?  9 Uniform 8082?  10 If Yes," did the organization notify the donor of the value of the goods or services provided?  11 If Yes," did the organization notify the donor of the value of the goods or services provided?  12 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e X  7f Yes," If the organization during the year pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7e X  7f If the organization during the year, pay premiums, directly or indirectly, or a personal benefit contract?  7e X  7f If the organization during the year pay premiums, directly or indirectly, or a personal benefit contract?  7e X  7f If the organization make an application of qualified relievelual property, during the programization file organization and programization and programization and programization and progr	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organization included on Part VIII, line 12  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13b Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  14a Did the organization or		· · · · · · · · · · · · · · · · · · ·	7e		x
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SOCIAL VENTURE PARTNERS Form 990 (2016) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response Part VI to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Х Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes Νo 18 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 18 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: b Each committee with authority to act on behalf of the governing body? 8b x Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the х organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? х 10a 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? 10b x 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12¢ X Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? . . . 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a 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? Section C. Disclosure Let the states with which a copy of this Form COO is required to be filed MONTE

• /	List the states with which a copy of this form 350 is required to be filed.
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 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)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: TANYA ANDERSON - 206-451-8122 220 2ND AVENUE S. SUITE 300, SEATTLE, WA 98104-2617

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SOCIAL VENTURE PARTNERS

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Page 7

Form 990 (2016)

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

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

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

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

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

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

(A)	(B)				<del></del>			(D)	(E)	(F)
Name and Title	Average hours per week	box	(do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MISC)	
(1) MIKE CADIGAN	10.00									
CHAIR		х	_	х	<u> </u>	ļ		0.	0.	0.
(2) KATJA SHAYE	10.00	1							_	_
VICE CHAIR	<u> </u>	Х	<u> </u>	Х	<u> </u>	<u> </u>		0.	0.	0.
(3) NORM BONTJE	10.00	Į		l					_	
TREASURER		Х	_	Х	_	_	<b>L</b>	0.	0.	0.
(4) KATHY O'DRISCOLL	10.00			١.	ļ					_
SECRETARY		X	<u> </u>	Х	<u> </u>	_		0.	0.	0.
(5) BOB WOODS	4.00	1					l		_	_
TRUSTEE		x		<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
(6) DAVE THOMPSON	4.00				l		l	_		_
TRUSTEE		X	<u> </u>	<u> </u>		_	<u> </u>	0.	0.	0.
(7) TIM SCHOTTMAN	4.00				l		Į			
TRUSTEE		х	<u> </u>		<u> </u>		<u> </u>	0.	0.	0.
(8) JULIE PHAM	4.00	<b>.</b>					]			
TRUSTEE	4 00	X	<u> </u> i	<u> </u>	<u> </u>	$\vdash$	<u> </u>	0.	0.	0.
(9) LISA MERRILL	4.00	l			ŀ		ļ			
TRUSTEE	1 00	X		<u> </u>	-	$\vdash$	<u> </u>	0.	0.	0.
(10) BRAD BRICKMAN	4.00	ļ.,		l	i		ļ		0	
TRUSTEE	4.00	Х	H		├	_	<u> </u>	0.	0.	0.
(11) JANE HARVEY TRUSTEE	4.00	x			İ	Ì	Ì		0.	
(12) CHRISTINE CHANG	4.00	1	-		├			0.	0,	0.
TRUSTEE	4.00	x						٥.	0.	•
(13) DEBBIE PIRIE-NEWELL	4.00	_	-		┝		<del> </del>	· · · · · · · · · · · · · · · · · · ·	0.	0.
TRUSTEE	1.00	x						0.	0.	0.
(14) JONEIL SAMPANA	4.00	^	H	Н	_				•	
TRUSTEE	1.00	x			Ì	<b>\</b>		0.	0.	0.
(15) TONY MESTRES	4.00	-	H	Н	<u> </u>	$\vdash$	-		0,	<del></del>
TRUSTEE		x						0.	0.	0.
(16) DAVE WOOLLEY-WILSON	4.00	_			$\vdash$	-				<del></del>
TRUSTEE		x				i		0.	0.	0.
(17) RACQUEL RUSSELL	4.00	-	$\vdash$		_	$\vdash$		<del></del>		<del></del>
TRUSTEE	<del></del>	x						0.	0.	0.
	<u> </u>				Ц		L		<u>_</u>	- 000

Part VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C			1	_	<b>(E)</b>	
Name and title	(B) Average			ر Pos	C) ition	1		(D) Reportable	(E) Reportable		Fe	(F) timate	d
Name and title	hours per	(do not check me box, unless perso officer and a dire			ck more than one person is both an a director/trustee)			compensation	compensation			ount	
	week						tee)	from	from related			other	
	(list any	rector	l					the .	organizations	ς,		pensa	
	hours for related	lb ro	_ <u></u>		1	sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	"		om the anızatı	
	organizations	truste	al fres	İ	E	шреп	ŀ	(***2 1033-141130)			_	relate	
	below	Individual trustee or director	Institutional trustee	 	Key employee	Highest compensated employee	절				orga	ınızatı	ons
	line)	盲	Inst	Officer	ě	돌음	Former						
(18) SHERRI WOLSON	4.00						ŀ						^
TRUSTEE	40.00	Х	<u> </u>	<u> </u>	┢	├	⊢	0.		0.			0.
(19) SOLYNN MCCURDY CEO FROM 08/17	40.00	ł	i	x	l			0.		0.			0.
(20) TANYA ANDERSON	40.00	┢	╁	<u> </u>	$\vdash$	-				<u> </u>			
DIRECTOR OF FINANCE		ł	ļ	x	1		1	0.	i	0.			0.
(21) DEBORAH JENSEN	40,00	╁	l		H								
INTERIM CEO THRU 08/17		1		x				0.		0.			0.
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		1		İ		ļ							
1b Sub-total		<u>.                                    </u>	<u> </u>	٠	_		<b></b>	0.		0.			0.
c Total from continuation sheets to Part V	II, Section A			-			<b>&gt;</b>	0.		0.			0.
d Total (add lines 1b and 1c)							<b>&gt;</b>	0.		0.	<u> </u>		0.
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 of reportable	;			,
compensation from the organization									<del></del>			Yes	No
3 Did the organization list any former officer			~ L		mala		~-	highout componented o	mployee on				
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for:			e, K	ey ei	при	уее	, Oi	nighest compensated e	inployee on		3		x
4 For any individual listed on line 1a, is the s			omp	ens:	atioi	n and	d ot	her compensation from	the organization		Ť		
and related organizations greater than \$15											4		х
5 Did any person listed on line 1a receive or									idual for services				
rendered to the organization? If "Yes," con	nplete Schedui	le J	for s	uch	per	son		<u> </u>	<u> </u>		5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co										oens	sation 1	rom	
the organization. Report compensation for	the calendar y	/ear	end	ing \	with	or w	/ithii		year.		((	<u> </u>	
(A) Name and busines:	address	NC	NE					(B) Description of s	services	C	ر ompe	<i>r)</i> nsatio	n
									<del></del>		<del></del>		
	<del></del>												
											<del></del> .		
									ļ				
<del></del>			-				$\dashv$						
									j				
2 Total number of independent contractors	fincluding but r	not I	mite	d to	the	ا مور	ster	d above) who received n	nore than				
\$100,000 of compensation from the organ	-					0	J.01						
								•	<del></del>		Form	990 r	2016

Form 990 (2016) SOCIAL VENT
Part VIII Statement of Revenue

		Check if Schedule O cont	ans a respons	e of note to any line	(A) Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
इ छ	1 2	Federated campaigns	1a	31,750.		revende	Tevende	312-314
E E	b		1b					
اغ ي	c	· · ·	1c					
ar is	d	· ·	1d					
g≝]		Government grants (contribut	<u> </u>					
ë ë	f	All other contributions, gifts, gran				į į		
돌	•	similar amounts not included above		725,195.		1		
풀티	g		ــــــــــــــــــــــــــــــــــــــ	3,157.		]		
a č	_	Total. Add lines 1a-1f			756,945.	]		
		Total / tad III co Ta Ti		Business Code	, -			
<b>a</b>	2 a	EVENT REGISTRATION FEE		541610	16,862.	16,862.		
ا <u>ک</u>	b	Diam pimer mierom elia		900099	2,000.	2,000.	· · ·	<del></del>
Sel	c				, ,	, 1		
E š	d							<del>                                     </del>
ğά	٠							<del></del>
풉	f	All other program service reve	enue					
ŀ	a	<b>7</b> · · · · · · · · · · · · · · · · · · ·	uc		18,862.			
$\dashv$	3	Investment income (including	dividends inte	<del> · · · · · · · · · · · · · · · · · ·</del>	, -			
ľ	Ū	other similar amounts)	dividende, inte	Lost, und	460.			460.
- 1	4	Income from investment of tax	x-exempt bond	nroceeds				<del>                                     </del>
	5	Royalties .	x exempt bond	proceeds		·	·	
]	•	noyanico .	(i) Real	(ii) Personal				<del></del>
]	6 a	Gross rents	24,370	<del></del>				ļ
	b		25,677					
	c	D	<1,307					
ĺ	d			7	<1,307.			<1,307.:
		Gross amount from sales of	(i) Securities	(ii) Other				
	, ,	assets other than inventory	(y occurries	(ii) Other				
	h	Less: cost or other basis						
		and sales expenses	174					
		Gain or (loss)	<174	1				
		Net gain or (loss)			<174.			<174.:
		Gross income from fundraising	a events (not					
풀		including \$	of					İ
š		contributions reported on line						
-		Part IV, line 18	-	a				
	b	Less: direct expenses						
		Net income or (loss) from fund	draising events	<b></b>				
		Gross income from garning ac						1
		Part IV, line 19		a				
	b	Less: direct expenses		b				
		Net income or (loss) from gam	•	<b>•</b>				
		Gross sales of inventory, less				· · · · · · · · · · · · · · · · · · ·	-	
		and allowances		a				
	b	Less. cost of goods sold	-	<b>b</b>				
		Net income or (loss) from sale						Ì
Ì		Miscellaneous Revenu		Business Code		- ::-		<del></del>
ł	11 a			paomeo ocus				
ļ	b							
	C	·		<del>  </del>				<del>                                     </del>
	d	All other revenue					<del></del>	<del> </del>
		Total. Add lines 11a-11d				+	··········	<del>                                     </del>
ĺ	12	Total revenue. See instructions.	-		774,786.	18,862.	0	<1,021.

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). x Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising expenses (B) Program service (A) Total expenses (C) Do not include amounts reported on lines 6b. Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 25,000 25,000 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 49,983 29,990 16,994 2,999. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 8,597. 130,271 80,564 41,110. 7 Other salanes and wages Pension plan accruals and contributions (include 4,424 2,358 1,582 484 section 401(k) and 403(b) employer contributions) 6,120 7,377 14,043 546. Other employee benefits 1,074. 5,357. 10,207 16,638. Payroll taxes 10 Fees for services (non-employees) 25,780 25,780 Management Legal b 847. 847. C Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 16,973. 71,226 54,253 column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 4,152 2 515. 17,291 10 624 13 Office expenses 659. 5,230, 3,561. 1,010. Information technology 14 Royalties 15 12,630 2,219. 16,273 1,424 16 Occupancy 1,338. 1,338. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 10,490 7.874 2,386. 230. 19 Conferences, conventions, and meetings 20 21 Payments to affiliates 576. 4,148 2,685 887 22 Depreciation, depletion, and amortization 5,375. 3,482 1,145 748. 23 insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 4,835 PARTNER EDUCATION 4,835 BAD DEBT 3,000, 3,000. h C d All other expenses 127,024 258,521. 20,647. Total functional expenses. Add lines 1 through 24e 406,192, 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2016)
Part X Balance Sheet

Cash - non-interest-bearing   792,554, 1   794,053,			Check if Schedule O contains a response or not	te to any line in this Part X			
2 Savings and temporary cash investments 3 Pictiges and grants receivable, net 4 Account receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other dequalified persons (as defined under section 4958(0)(1)), persons described in section 4958(0)(3)(8), and contributing employees beneficiary organizations (see inst)l. Complete Part II of Sch. L 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part II of Sch. L 10b 10b 82,955. 11 Investments - public yladed securities 11 Investments - public yladed securities 12 Investments - public yladed securities 13 Investments - public yladed securities 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 19 Deferred revenue 19 Tescrivor or custodial account liability. Complete Part IV of Schedule D 20 Tax-exempt bond liabilities 21 Secured mortgages and notes payable to unrelated third parties 22 Organizations that follow SFAS 117 (ASC 958), check here   19 Total liabilities. Add lines 17 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Organizations that follow SFAS 117 (ASC 958), check here  30 Total liabilities. Add lines 31 through 29. 30 Capital stock or trust planes and complete lines 30 through 34. 30 Capital surplus, or land, building, or equipment fund 31 Pad-in or capital surplus, or land, building, or equipment fund 32 Pad-in or capital surplus, or land, building, or equipment fund 33 Total net assets or fund belances 34 Unsecured notes and basines 35 Total liabilities not not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital account liability. Complete part II of Scheck here and complete lines 30 through 34. 31 Pad-in or capital su		,	Ongon in Consocial Communic and Supported of Hot	a to any me m unov acco			
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustese, key employees, and highest compensated employees. Complete Part It of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4586(P(3)(B), and contributing employees and sponsoring organizations of section 501(c)(B) voluntary employees therefore) organizations of section 501(c)(B) voluntary employees depending organizations of section 501(c)(B) voluntary employees depending organizations (see instit). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepared expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D 10b 10c, 178. 1 Investments - publicity traded securities 1 Investments - publicity traded securities 1 Investments - publicity traded securities 1 Investments - publicity traded securities 1 Investments - publicity traded securities 2 Investments - publicity traded securities 3 Investments - publicity traded securities 1 Investments - publicity traded securities 2 Investments - publicity traded securities 3 Investments - publicity traded securities 3 Investments - publicity traded securities 4 Intragicle assets 5 Investments - publicity traded securities 5 Investments - publicity traded securities 5 Investments - publicity traded securities 5 Investments - publicity traded securities 5 Investments - publicity traded securities 5 Investments - publicity traded securities 5 Investments - publicity traded securities 5 Investments - publicity traded securities 5 Investments - publicity traded securities 6 Investments - publicity traded securities 7 Investments - publicity traded securities 7 Investments - publicity traded securities 7 Investments - publicity traded securities 7 Investments - publicity traded securities 7 Investments - publicity traded securities 7 Investments - publicity traded securities 7 Inves		1	Cash - non-interest-bearing		792,554.	1	794,053.
A Accounts receivable, net   14,701, 4   0.		2	Savings and temporary cash investments	· · · · · · · · · · · · · · · · · · ·		2	
1		3	Pledges and grants receivable, net		263,204.	3	472,449.
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L  6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(f)), persons described in section 4958(c)(5)(8), and contributing employees beneficiary organizations of sections 501 (c)(9) voluntary employees beneficiary organizations (see instr). Complete Part II of Sch L  7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b Less' accumulated depreciation 11 Investments - publicly traded securities 12 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - propriaties See Part IV, line 11 13 Investments - propriaties See Part IV, line 11 14 Intangèle assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grafts payable 19 Deferred revenue 20 Tax exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to urrelated third parties 24 Unsecured notes and loans payable to urrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Other liabilities (including federal income tax, payables to related third parties 27 Total liabilities. Add lines 17 through 25 28 Organizations that follow SFAS 117 (ASC 958), check here   29 Organizations that follow SFAS 117 (ASC 958), check here   20 Total liabilities. Add lines 17 through 25 30 Captal stock or trust principal, or current funds 31 Paul-in or capital surplus, or land, building, or equipment funds 32 Temporarily restricted net assets 31 Fall or fund balances 32 Total net assets or fund balances 33 Total net assets or fund balances 34 Total net assets or fund balances 35 Total liabilities or fund balances 36 Total liabilities or fund balances 37 Total net assets or fund ba		4	Accounts receivable, net		14,701.	4	0.
Part II of Schedule L  Cans and other receivables from other disqualified persons (as defined under section 4958(n)(n), persons described in section 4958(n)(n), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employers beneficiary organizations (see instit). Complete Part II of Sch L  7. Notes and loans receivable, net  8. Inventiones for sale or use  9. Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part II of Sch L  10b Less accumulated depreciation  11 Investments - publicy traded securities  11 Investments - publicy traded securities  12 Investments - program-related. See Part IV, line 11  13 Investments - publicy traded securities  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 34)  17 Accounts payable and accrued expenses  15 Other assets. See Part IV, line 11  17 Accounts payable and accrued expenses  15 Grants payable  16 Total assets. Add lines 1 through 15 (must equal line 34)  17 Accounts payable and accrued expenses  17 Accounts payable and accrued expenses  18 Crants payable and accrued expenses  19 Perender devenue  20 Tax-exempt bond labilities  21 Earon or custodial account liability. Complete Part IV of Schedule D  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D  21 Earon or custodial account liability. Complete Part IV of Schedule D  22 Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unscured notes and loans payable to unrelated third parties  25 Other liabilities not included on lines 17/24). Complete Part X of Schedule D  26 Total liabilitys. Add lines 17 through 25  27 Unsersticed net assets  29 Permanently restricted net assets  30 Capatal stock or trust payables or fund balances  30 Capatal stock or trust payable and complete lines 20 through 34.  30 Capatal		5	Loans and other receivables from current and for	ormer officers, directors,			
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employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instr). Complete Part II of Sch L		6	Loans and other receivables from other disquali	ified persons (as defined under			
employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b R2,955. 10 Less: accumulated depreciation 11 Investments or Dubley traded securities 11 Investments organized depreciation 12 Investments organized depreciation 13 Investments organized depreciation 14 Intargible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 156,550, 17 97,165. 18 Grants payable 19 Defender evenue 20 Tax-exempt bond labilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 25 Other liabilities (nation glederal income tax, payables to related third parties 26 Organizations that follow SFAS 117 (ASC 958), check here   27 Unrestricted net assets 28 Total liabilities. Add lines 17 through 25 30 Capital stock or frust pimcipal, or current funds 31 Capital stock or frust pimcipal, or current funds 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 Total net assets or fund balances 31 Total net assets or fund balances 32 Payable and assets or fund balances 33 Total net assets or fund balances 34 Total net assets 36 Capital stock or furst pimcipal, or current funds 37 Total net assets or fund balances 39 Capital stock or furst pimcipal, or current funds 30 Capital stock or furst pimci			section 4958(f)(1)), persons described in section	n 4958(c)(3)(B), and contributing			
7   Notes and loans recevable, net   8   8   Inventories for sale or use   8   8   Inventories for sale or use   9   Prepaid expenses and deferred charges   21,505. 9   25,722.     10a   Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D   10a   106,178.     10b   82,955.   27,371.   10c   23,223.     11   Investments - publicity traded securities   10b   82,955.   27,371.   10c   23,223.     12   Investments - publicity traded securities   7,456.   11   0.     13   Investments - program-related. See Part IV, line 11   13       14   Intangible assets   14       15   Investments - program-related. See Part IV, line 11   13       16   Total assets. See Part IV, line 11   20,774.   15   19,660.     17   Accounts payable and accrued expenses   156,550.   17   97,165.     18   Grints payable   150,000.   18   45,000.     19   Deferred revenue   20   Tax-exempt bond liabilities   20   Tax-exempt bond liabilities   21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   22     Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D   22   23   23   24   24   25   25   25   25   25   25			employers and sponsoring organizations of sect	tion 501(c)(9) voluntary			
9 Prepade expenses and deferred charges 9 Prepade expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b 106,178 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 15 Other assets. See Part IV, line 11 19 Deferred revenue 19 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 D 21 Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines 17.24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  7 Total liabilities. Add lines 17 through 25  7 Total liabilities. Add lines 17 through 25  7 Total liabilities not included on lines 17.24). Complete Part X of Schedule D 26 Total liabilities not included on lines 17.25, check here   7 Total liabilities and the parties or fund third parties 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 2	ş		employees' beneficiary organizations (see instr).	. Complete Part II of Sch L		6	
9 Prepade expenses and deferred charges 9 Prepade expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b 106,178 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 15 Other assets. See Part IV, line 11 19 Deferred revenue 19 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 D 21 Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines 17.24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  7 Total liabilities. Add lines 17 through 25  7 Total liabilities. Add lines 17 through 25  7 Total liabilities not included on lines 17.24). Complete Part X of Schedule D 26 Total liabilities not included on lines 17.25, check here   7 Total liabilities and the parties or fund third parties 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 2	SSe	7	Notes and loans receivable, net			7	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   10a   106,178   10b   82,955   27,371   10c   23,223   11   Investments - publicly traded securities   17,456   11   0   0   12   11   12   11   12   12	⋖	8	Inventories for sale or use			8_	
basis. Complete Part VI of Schedule D b Less' accumulated depreciation 11 Investments - publicity traded securities 12 Investments - publicity traded securities 13 Investments - program-related. See Part IV, line 11 14 Intangble assets 15 Other assets. See Part IV, line 11 15 Total assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Graints payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other labilities (including federal income tax, payables to related third parties 26 Total liabilities. Add lines 17 through 25 27 Total liabilities. Add lines 17 through 25 28 Temporarly restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Pad-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 32 Total net assets or fund balances 32 Total net assets or fund balances		9	Prepaid expenses and deferred charges	21,505.	9	25,722.	
b Less: accumulated depreciation   10b   82,955.   27,371.   10c   23,223.		10a	Land, buildings, and equipment: cost or other				
11   Investments - publicly traded securities   7,455, 11   0.     12   Investments - other securities. See Part IV, line 11   12   13     13   Investments - program-related. See Part IV, line 11   13   14     14   Intangible assets   14   15   19,650   14     15   Other assets. See Part IV, line 11   20,774, 15   19,650   15   17   17   18   19,650   17   17   18   19,650   17   17   18   19,650   17   17   18   19,650   17   19,71,65   16   1,335,107   18   15   15   15   10   10   18   15   19,650   19   15   19,650   17   17,165   16   1,335,107   18   15   19,650   17   17,165   16   1,335,107   18   15   19,650   17   17   15   19,650   17   17,165   16   1,335,107   18   15   15   10   10   18   10   10   18   13   10   13   10   13   10   10   10			basis. Complete Part VI of Schedule D	- +			
12   Investments - other securities. See Part IV, line 11   13   Investments - program-related. See Part IV, line 11   13   14   Intangible assets   14   15   15   19,660.     16   Total assets. See Part IV, line 11   20,774.   15   19,660.     17   Accounts payable and accrued expenses   156,550.   17   97,165.     18   Grants payable and accrued expenses   150,000.   18   45,000.     19   Deferred revenue   50,000.   19   33,333.     20   Tax-exempt bond liabilities   20   21   22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.   Complete Part IV of Schedule D   22   23   24   25   25   26   27   27   27   27   27   27   27		b	Less: accumulated depreciation	10b 82,955.	27,371.	10c	23,223.
13   Investments - program-related. See Part IV, line 11   14   Intangible assets   14   15   Other assets. See Part IV, line 11   15   19,660.   16   Total assets. Add lines 1 through 15 (must equal line 34)   1,147,565   16   1,335,107.   17   Accounts payable and accrued expenses   156,550   17   97,165.   18   Grants payable and accrued expenses   150,000   18   45,000.   19   0   0   0   19   33,333.   10   0   0   0   0   0   0   0   0		11	Investments - publicly traded securities		7,456.	11	0.
14   Intangible assets   14   14   20,774   15   19,660   16   Total assets. See Part IV, line 11   19,660   1,335,107   17   Accounts payable and accrued expenses   156,550   17   97,165   18   Grants payable and accrued expenses   150,000   18   45,000   19   0   0   0   0   0   0   0   0   0		12	Investments - other securities. See Part IV, line		12		
15 Other assets. See Part IV, line 11   20,774, 15   19,660.     16 Total assets. Add lines 1 through 15 (must equal line 34)   1,147,555, 16   1,335,107.     17 Accounts payable and accrued expenses   156,550, 17   97,165.     18 Grânts payable   150,000, 18   45,000.     19 Deferred revenue   50,000, 19   33,333.     20 Tax-exempt bond liabilities   21   Escrow or custodial account liability. Complete Part IV of Schedule D   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   24   24   24   25   24   25   25   26   27   27   27   27   27   27   27		13	Investments - program-related. See Part IV, line	11		13	
1		14	Intangible assets			14	
17		15	Other assets. See Part IV, line 11	<del></del>	15		
18   Graints payable   150,000. 18   45,000.   19   33,333.   20   20   20   20   20   21   21   21		16	Total assets. Add lines 1 through 15 (must equ	al line 34)		16	
19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  27 Organizations that follow SFAS 117 (ASC 958), check here   28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances  50,000, 19 33,333.  20 21  21  22 2  23 2  24 22  25 23  26 24  27 307,172.  28 356,550, 26 175,498.  3107,632, 27 307,172.  3107,632, 27 3		17	Accounts payable and accrued expenses			17	
20 Tax-exempt bond liabilities 20   21 Escrow or custodial account liability. Complete Part IV of Schedule D   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 Secured mortgages and notes payable to unrelated third parties   23 Unsecured notes and loans payable to unrelated third parties   24 Unsecured notes and loans payable to unrelated third parties   25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   25 Total liabilities. Add lines 17 through 25   25 Organizations that follow SFAS 117 (ASC 958), check here		18	Grants payable		•	18	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   27 Unrestricted net assets 28 Temporanly restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here   29 Organizations that do not follow SFAS 117 (ASC 958), check here   20 and complete lines 30 through 34. 21 Capital stock or trust principal, or current funds 22 Capital stock or trust principal, or current funds 23 Capital stock or trust principal, or current funds 34 Paid-in or capital surplus, or land, building, or equipment fund 35 Retained earnings, endowment, accumulated income, or other funds 36 Total net assets or fund balances 37 Total net assets or fund balances		19	Deferred revenue		50,000.	19	33,333.
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  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  27 Organizations that follow SFAS 117 (ASC 958), check here   28 Temporarily restricted net assets  29 Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here   and complete lines 30 through 34.  Capital stock or trust principal, or current funds  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  33 Total net assets or fund balances  791,015, 33 1,159,609.		20	Tax-exempt bond liabilities			20	
key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other labilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  27 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.  28 Temporanly restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ Dand complete lines 30 through 34.  Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances  29 Expense of the part II of Schedule Labelet third parties 23 22 23 24 24 24 24 24 24 24 24 24 24 24 24 24		21	• •	· h	<u> </u>	21	<del></del>
23 Secured mortagages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporanly restricted net assets 307,632. 27 307,172. 28 Temporanly restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.  29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 791,015, 33 1,159,609.	ies	22	• •				
23 Secured mortagages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporanly restricted net assets 307,632. 27 307,172. 28 Temporanly restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.  29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 791,015, 33 1,159,609.	Ħ			es, and disqualified persons.			
23 Secured mortagages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporanly restricted net assets 307,632. 27 307,172. 28 Temporanly restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.  29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 791,015, 33 1,159,609.	<u> </u>		•			-	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ x and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporanly restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.  29 Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  33 Total net assets or fund balances  791,015. 33 1,159,609.	_	23		` <u></u>			
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  25  26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   Complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets  Temporarily restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here  Organizations that do not follow SFAS 117 (ASC 958), check here  Organizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.  Capital stock or trust principal, or current funds  10 Capital stock or trust principal, or current funds  11 Paid-in or capital surplus, or land, building, or equipment fund  28 Retained earnings, endowment, accumulated income, or other funds  30 Total net assets or fund balances		l .	, ,	' ' '		24	
Schedule D  25  26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   27 Unrestricted net assets  28 Temporarily restricted net assets  29 Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here   307,632. 27  307,172.  3		25	· -	-			
Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 17 through 25  Total liabilities. Add lines 27 through 29, and lines 33 and 34.  Total liabilities add liabilities and complete lines 27 through 29, and lines 33 and 34.  Total liabilities add liabilities and complete lines 27 through 29, and lines 33 and 34.  Total liabilities add liabilities and l				s 17-24). Complete Part X of			
Organizations that follow SFAS 117 (ASC 958), check here   Through 29, and lines 33 and 34.  Unrestricted net assets  Temporanly restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances  Organizations that follow SFAS 117 (ASC 958), check here  A 307,632.  A 307,632.  A 483,383.  A 852,437.  A 90					256 550		175 400
complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances  29 Total net assets or fund balances  307,632.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.  307,172.		26			350,550.	26	175,450.
Temporarily restricted net assets  Temporarily restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances  27 307,172.  307,172.  307,632. 27 307,172.			•	"			
33 Total net assets or fund balances	Ses			nd 34.	207 622		207 172
33 Total net assets or fund balances	<u>a</u>	l .	•		•		
33 Total net assets or fund balances	æ	l .		•	403,303.		032,437.
33 Total net assets or fund balances	Ĕ	29	•			29	
33 Total net assets or fund balances	Æ			ISC 958), check here			
33 Total net assets or fund balances	S)	20	-			20	
33 Total net assets or fund balances	sei	l .	• • •			_	
33 Total net assets or fund balances	t As			· ·	· · · · · · · · · · · · · · · · · · ·	$\overline{}$	
1 225 400	Ž	l .		Come, or other fullus	791 015		1 159 609
		34	Total liabilities and net assets/fund balances	• • •	1,147,565.	34	1,335,107.

Form	990 (2016) SOCIAL VENTURE PARTNERS	91-1894424		Pag	ge 12
Pai	T XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1			786.
2	Total expenses (must equal Part IX, column (A), line 25)	2			192.
3	Revenue less expenses. Subtract line 2 from line 1	3		:	594.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		791,	015.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1	,159,	609.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			i	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			l
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	if "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				ł
b	Were the organization's financial statements audited by an independent accountant?		2b	х	<u></u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te 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	ne audrt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			ĺ
	Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (	(2016)

### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

**Public Charity Status and Public Support** 

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

▶ Attach to Form 990 or Form 990-EZ.

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

Employer identification number

2016

Open to Public Inspection

SOCIAL VENTURE PARTNERS 91~1894424 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12q. 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. 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. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing documer (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions)) Total

Schedule A (Form 990 or 990-EZ) 2016 SOCIAL VENTURE PARTNERS 91-1894424

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ľ		ł		l	
	include any "unusual grants.")	2,341,731.	2,410,505.	2,607,265.	2,359,928.	756,945.	10,476,374.
2	Tax revenues levied for the organ-			ı			
	ızatıon's benefit and either paid to			ł	i		
	or expended on its behalf						
3	The value of services or facilities	, I	<b>!</b>	· ·		1	
	furnished by a governmental unit to	1	İ		i	}	
	the organization without charge						
4	Total. Add lines 1 through 3	2,341,731.	2,410,505.	2,607,265.	2,359,928.	756,945.	10,476,374.
5	The portion of total contributions						
	by each person (other than a		1	<b>\</b>			
	governmental unit or publicly		ł	}			
	supported organization) included		j				
	on line 1 that exceeds 2% of the		· ·				
	amount shown on line 11,		1			1	
	column (f)					1	790,402.
6	Public support. Subtract line 5 from line 4						9,685,972.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	2,341,731.	2,410,505.	2,607,265.	2,359,928.	756,945.	10,476,374.
	Gross income from interest,				, , ,		<del></del>
_	dividends, payments received on		)				
	secunties loans, rents, royalties		}	ľ		i	
	and income from similar sources	79,476.	80,574.	82,029.	94,641.	24,830.	361,550.
۵	Net income from unrelated business						
J	activities, whether or not the		j	j		1	
				}			
40	business is regularly carried on				<del></del>		<del></del>
10	Other income. Do not include gain		Į	{	i	į	
	or loss from the sale of capital	83.	<6,615.	3,178.	į	Į	<3,354.
	assets (Explain in Part VI.)			3,170.	<del></del>	<del>  </del>	10,834,570.
	Total support. Add lines 7 through 10					401	381,902.
	Gross receipts from related activities,	•			. [	12	301,302.
13	First five years. If the Form 990 is for		tirst, secona, third	, tourth, or tifth tax	c year as a section	1 501(c)(3)	
500	organization, check this box and stop ction C. Computation of Publi		centage	<del></del>		<del></del>	
	<del></del>		_ <del></del>				90 40
	Public support percentage for 2016 (li			olumn (f))		14	89.40 %
	Public support percentage from 2015			•	{	15	91.26 %
16a	33 1/3% support test - 2016. If the o			line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies a		-			-	► X
b	33 1/3% support test - 2015. If the o				ine 15 is 33 1/3%	or more, check the	s box
	and stop here. The organization quali			•			. ▶∟
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact	ts-and-circumstanc	es" test, check th	s box and <b>stop he</b>	ere. Explain in Par	t VI how the organi	zation
	meets the "facts-and-circumstances"	test. The organizati	on qualifies as a p	oublicly supported	organization		▶∟
b	10% -facts-and-circumstances test	- <b>2015.</b> If the orga	nization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets th		-		•		
	organization meets the "facts-and-circ	umstances" test. T	he organization qu	ualifies as a publici	ly supported orga	nızatıon	▶□
18	Private foundation. If the organization	n did not check a b	ox on line 13, 16a	, 16b, 17a, or 17b,	check this box a	nd see instructions	
					A		

# Schedule A (Form 990 or 990-EZ) 2016 SOCIAL VENTURE PARTNERS 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	ction A. Public Support		"		<del></del>		,
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	/ (f) Total
1	Gifts, grants, contributions, and						1
	membership fees received. (Do not	į					
	include any "unusual grants.")	i	``\	<u> </u>	<u> </u>		
2	Gross receipts from admissions,			}			
	merchandise sold or services per- formed, or facilities furnished in			[			
	any activity that is related to the		1	Í			
	organization's tax-exempt purpose					/	
3	Gross receipts from activities that		1		,		
	are not an unrelated trade or bus-	İ	`		,		
	iness under section 513						
4	Tax revenues levied for the organ-	}			/		
	zation's benefit and either paid to				,	:	
	or expended on its behalf		<u> </u>	<u>"</u>			
5	The value of services or facilities	1					
	furnished by a governmental unit to		(	<b>\</b>		[	
	the organization without charge	L		//		<u> </u>	
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and		ł			[	
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received		[	"		Į	
	trom other than disqualified persons that exceed the greater of \$5,000 or 1% of the		,		1		
	amount on line 13 for the year						
	Add lines 7a and 7b					<u></u>	
8	Public support. (Subtract line 7c from line 6)		l	<u> </u>	`,	<u></u>	
Sec	ction B. Total Support			<b></b>			
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	( <b>d)</b> 2015	(e) 2016	(f) Total
	Amounts from line 6	ļ	,				
10a	Gross income from interest, dividends, payments received on						1
	securities loans, rents, royalties	/	1	İ			
	and income from similar sources	<u> </u>					L
b	Unrelated business taxable income		Ì			<i>"</i> ,	
	(less section 511 taxes) from businesses	<b>'</b>				<u>\</u>	
	acquired after June 30, 1975	<del></del>				<u> </u>	
	Add lines 10a and 10b	/				<u>`</u>	L
11	Net income from unrelated business, activities not included in line 10b.		1		•	\	:
	whether or not the business is			1		1/	1
40	regularly carned on					<del></del>	
12	Other income. Do not include gain or loss from the sale of capital	1					
	assets (Explain in Part VI,)						
	Total support. (Add lines 9, 10c, 11, and 12)					,	
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3) organız	ation,
<u> </u>	check this box and stop here	io Support Do	roontogo		<del></del>	<del></del>	<u> </u>
	ction C. Computation of Publ Public support percentage for 2016 (			akuma (f)		15	\ o <sub>4</sub>
	Public support percentage from 2015		= :	Olumn (I))		16	<u>%</u>
	ction D. Computation of Investigation			<del></del>	<del></del>	16	
	<del></del>		<del></del>	e 13 column (f)		17	<u> </u>
	· · · · · · · · · · · · · · · · · · ·						
	•	n <b>2015</b> Schedule A, Part III, line 17					
158							, is not
	more than 33 1/3%, check this box at 33 1/3% support tests a 2015. If the	=	-	•	• •		P
IC)	33 1/3% support tests - 2015. If the						and
20	line 18 is not more than 33 1/3%, che				_	-	· <b>\</b>
<u> </u>	Private foundation. If the organization	ii did not check a	DOX On line 14, 198	a, or 190, check th	iis dox and see ins	uctions	<u> </u>

## 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

and b. if you directed 120 of Fart 1, complete decitions A and C. If you directed 120 of Fart 1, complete
 Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)
All O

			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			1
	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	ŀ		l
	organization was described in section 509(a)(1) or (2).	2	[ ,	l
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			$\vdash$
	(b) and (c) below.	3a	[ ]	Į
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	<u> </u> -		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	į.		Į
	organization made the determination.	3b	Ι,	[
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)		_	<del></del>
٠	purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c	(	
42	Was any supported organization not organized in the United States ("foreign supported organization")? If	30	<del>  -</del>	
<b>~</b> •a	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	1 40		ļ
<b>.</b>		4a	<del> </del>	├
b	grand to the constant and the constant a	ļ		ļ
	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	<del> </del>	<u> </u>
С	Did the organization support any foreign supported organization that does not have an IRS determination	ł		l
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	- [		l
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	į	ļ i	
_	purposes	4c		<u> </u>
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	ļ		1
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			ĺ
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;	ļ	1 1	
	(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_	$\vdash$	<u> </u>
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	1	1 1	ĺ
	designated in the organization's organizing document?	_5b		<u> </u>
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	<u>5c</u>		L
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 chantable class	1		}
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also	1	1	
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in		]	
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor		1 1	
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	In section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	]	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		1
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated		[ ]	
	supporting organizations)? If "Yes," answer 10b below	10a		
<b>h</b>	Did the organization have any excess business holdings in the tay year? // Ise Schedule C. Form 4720, to	100	-	

determine whether the organization had excess business holdings )

	edule A (Form 990 or 990-EZ) 2016 SOCIAL VENTURE PARTNERS	91-1894424	Р	age 5
Ра	rt IV   Supporting Organizations (continued)		1	Γ
11	Has the organization accepted a gift or contribution from any of the following persons?	F	Yes	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
-	below, the governing body of a supported organization?	11a		
<b>.</b>	•	11b	╅╾-	
	A family member of a person described in (a) above?	116	+	├
	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.  tion B. Type I Supporting Organizations		ــــــــــــــــــــــــــــــــــــــ	1
000	tion b. Type roupporting organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	1,40
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	}	1	ì
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or	}		ŀ
	controlled the organization's activities. If the organization had more than one supported organization,	<b>\</b>	}	1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	<b> </b>	1	1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		<b>├</b> ─-	+	<del>                                     </del>
2	Did the organization operate for the benefit of any supported organization other than the supported	į	1	l
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
800	supervised, or controlled the supporting organization	2	J	1
Sec	tion C. Type II Supporting Organizations		Tv	T
_	Managements of the company to the district of	<u> </u>	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	ŀ	1	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	<b>\</b>		
	or management of the supporting organization was vested in the same persons that controlled or managed		1	1
500	the supported organization(s).	<u></u>	Ь.	L
Sec	tion D. All Type III Supporting Organizations	<del></del>	14	T
_	Did the executation arounds to each of the commented arounds the body of the Efft.	Γ	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	ľ		l
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	<b>'</b>		Ì
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		l	
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	<u> </u>		├
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	<u> </u>	ì	1
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			1
	the organization maintained a close and continuous working relationship with the supported organization(s).	2_	<b>↓</b>	<b>├</b>
3	By reason of the relationship described in (2), did the organization's supported organizations have a		ł	1
	significant voice in the organization's investment policies and in directing the use of the organization's		[	1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	į	Į.	1
	supported organizations played in this regard.		<u></u>	L
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see ins	tructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government ent	ity (see instruction:	s)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1	1	1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	(	1	1
	those supported organizations and explain how these activities directly furthered their exempt purposes,	Į	1	1
	how the organization was responsive to those supported organizations, and how the organization determined	1	l	l
	that these activities constituted substantially all of its activities.	2a	<u>L</u>	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		1	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	ì	1	1
	reasons for the organization's position that its supported organization(s) would have engaged in these	ĺ	1	
	activities but for the organization's involvement	2b	1	

За

3 Parent of Supported Organizations. Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI.) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recovenes 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	1 1		
	maintenance of property held for production of income (see instructions)	6	<u> </u>	<u> </u>
_7_	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	T		
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
_ c	Fair market value of other non-exempt-use assets	1c		
đ	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	Ţ		
	factors (explain in detail in Part VI)	1		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
_	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally	, integra	ited Type III supporting org	anization (see
	instructions).	•	0	•

Schedule A (Form 990 or 990-EZ) 2016

Pai	1 V   Type III Non-Functionally Integrated 509	value) Supporting Organic	anizations (continued)	<del>,</del>
Sect	on D - Distributions		·	Current Year
_1_	Amounts paid to supported organizations to accomplish exe	empt purposes		ļ
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			<u> </u>
_3_	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	<u> </u>
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 ti	he organization is responsive	e	
	(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			
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions	<u></u>		
3	Excess distributions carryover, if any, to 2016			
а				
b				
С	From 2013			
d	From 2014			
e	From 2015		<del></del>	
f	Total of lines 3a through e			
	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. \$			1
a	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4		<del> </del>	
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				
	Excess from 2013		<del> </del>	
	Excess from 2014	<del></del>	<del></del>	
	Excess from 2015	<del></del>		<del> </del>
	Excess from 2016	<del> </del>		
	LACESS ITOTH ZUTU		<u></u>	<del> </del>

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 SOCIAL VENTURE PARTNERS	91-1894424	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a 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, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional section D.	i 1 and 2, Part IV, Sectior t V, Section B, line 1e; Pa	n C,
(See instructions.)		
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
SPEAKER FEES		
MISCELLANEOUS INCOME		
2012 AMOUNT: \$ 83.		
		<del></del>
SECTION 481(A) ADJUSTMENT		
2013 AMOUNT: \$ -6,615.	<del></del>	
REIMBURSEMENTS		
	····	
2014 AMOUNT: \$ 3,178.		
		<del></del>
FORM 990, SCHEDULE A, PART II:		
COLUMN E OF PART II REFLECTS DATA FROM THE CURRENT 3 MONTH FISCAL		
PERIOD 07/01 - 09/30. THE PRIOR FISCAL YEARS, COLUMNS A - D, REFLECT A		
12 MONTH FISCAL PERIOD OF 07/01 - 06/30.		
	<del></del>	

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

### 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.lrs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization **Employer identification number** SOCIAL VENTURE PARTNERS 91-1894424 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) No and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X

	00/0 D (r 0/1/1 000) 20 10	URE PARTNERS						91-1894		Page	<u>; 2</u>
Pai	t III   Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, o	r Othe	r Simil	ar Asse	<b>ts</b> (contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, checl	k any of the	following that	are a sig	nficant	use of its	collection	n rtems	
	(check all that apply)										
а	Public exhibition	c	الِيا ا	Loan or excl	hange prograi	ns					
b	Scholarly research	•		Other							
C	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	in how th	ney further ti	he organizatio	n's exem	npt pumpe	ose in Par	t XIII.		
5	During the year, did the organization solicit of	r receive donations	of art, hi	stoncal trea	sures, or othe	r sımılar a	assets		_		
	to be sold to raise funds rather than to be ma					<u></u>			Yes	<u> </u>	10
Pai	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		ete if the	organizatio	n answered "`	Yes" on F	Form 990	), Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custod	<del></del>	diary for	contribution	s or other ass	ets not u	ncluded				
	on Form 990, Part X?		J. J. J. J. J. J. J. J. J. J. J. J. J. J	oonan board.			1010000	[_	Yes		lo.
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowina t	table:							
-	, oo, oo, oo, oo anangonione ii a are yan	and complete the re	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ubio					Amount		
С	Beginning balance						1c				_
	Additions during the year		•		•	•	1d				_
e	Distributions during the year				•		1e				
f	Ending balance	•	•				1f				_
2a	Did the organization include an amount on F	orm 990. Part X. line		escrow or cu	ustodial accou	ınt lıabilit			Yes		lo.
	If "Yes," explain the arrangement in Part XIII.										
Pai							D.	<del></del>			
		(a) Current year		rior year	(c) Two years			ears back	(e) Four	years ba	ж
1a	Beginning of year balance										_
b	Contributions										_
С	Net investment earnings, gains, and losses										_
d	Grants or scholarships										_
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										_
g	End of year balance										
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1	g, column (a	ı)) held as		_				
а	Board designated or quasi-endowment		_%								
b	Permanent endowment ▶	%									
C	Temporarily restricted endowment ▶	%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	it are held a	nd administer	ed for the	e organiz	zation	_		
	by									Yes N	0
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the		owment t	funds.	<del></del>						
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answered			/, line 11a. S	see Form 990,	Part X, II	ne 10.				
	Description of property	(a) Cost or o		(b) Cost	. 1		cumulate	1	(d) Book	value	
		basis (investr	nent)	basis (	(other)	depr	eciation				
1a	Land			· · · · · · · · · · · · · · · · · · ·							
b	Buildings .	<b> </b>									
С	Leasehold improvements				59,732.		<del></del>	732.			0.
	Equipment .	ļ			46,446.		23,	223.		23,22	<u>³.</u>
	Other		]		<u></u> L			<del>_</del>		00.00	
Total	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X colun	nn (R) line 1	OC }					23,22	3.

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or er	nd-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)	<u> </u>		
(F)		<u> </u>	
(G)		<u> </u>	
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		_	
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	5.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)		<del></del>	
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25)		
2. Liability for uncertain tax positions. In Part XIII, provide		the organization's financial statements	that reports the
organization's liability for uncertain tax positions under			
direction and an address of the contraction and address			

Schedule D (Form 990) 2016 SOCIAL VENTURE PARTNERS				91-1894424	Page 4
Part XI Reconciliation of Revenue per Audited Fin	ancial Stateme	ents With F	Revenue per R	eturn.	
Complete if the organization answered "Yes" on Form 98	90, Part IV, line 12a				
1 Total revenue, gains, and other support per audited financial st	atements			1	3,327,267.
2 Amounts included on line 1 but not on Form 990, Part VIII, line	12.				
a Net unrealized gains (losses) on investments		2a			
b Donated services and use of facilities		2b		1 1	
c Recovenes of pnor year grants		2c	_	} }	
d Other (Describe in Part XIII.)		2d	2,526,804.		
e Add lines 2a through 2d				2e	2,526,804.
3 Subtract line 2e from line 1				3	800,463.
4 Amounts included on Form 990, Part VIII, line 12, but not on line	e 1:				
a Investment expenses not included on Form 990, Part VIII, line 7	7b	4a		<b>,</b> ,	
b Other (Describe in Part XIII.)		4b	<25,677.	<b>}</b> [	
c Add lines 4a and 4b	•			4c	<25,677.>
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, F				5	774,786.
Part XII Reconciliation of Expenses per Audited Fin	nancial Statem	ents With	Expenses per	Return.	
Complete if the organization answered "Yes" on Form 99	90, Part IV, line 12a				
1 Total expenses and losses per audited financial statements				1	3,253,305.
2 Amounts included on line 1 but not on Form 990, Part IX, line 29	5:				
a Donated services and use of facilities		2a		} }	
<b>b</b> Prior year adjustments		2b			
c Other losses	•	2c			
d Other (Describe in Part XIII.)		2d	2,847,113.	ìì	
e Add lines 2a through 2d				2e	2,847,113.
3 Subtract line 2e from line 1		-		3	406,192.
4 Amounts included on Form 990, Part IX, line 25, but not on line	1.				
a Investment expenses not included on Form 990, Part VIII, line 7	7b	4a			
b Other (Describe in Part XIII.)		4b			
c Add lines 4a and 4b		•		4c	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990,	, Part I, line 18.)			5	406,192.
Part XIII Supplemental Information.	<del> </del>				
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III,				4; Part X, Ime 2;	Part XI,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part	to provide any add	litional informa	ition.		
		·			
<del></del>					
PART XI, LINE 2D - OTHER ADJUSTMENTS:					
THE IT, DIED ID STREET IN THE ITE OF THE ITE	<del></del>	<del></del>			
REVENUE FROM FIRST 12 MONTHS OF 15 MONTH AUDIT PERIC	OD 2	,526,804.			
	<del></del>	,520,002.	<del></del>	<del></del> _	<del></del>
	<del></del>	<del></del>	·	<del></del>	
PART XI LINE 4B - OTHER ADJUSTMENTS:					
<del></del>					
RENTAL EXPENSE		-25,677.			
<del></del>			<del> </del>	<del></del>	<del></del>
	<del></del>		<del></del>		<del></del>
PART XII, LINE 2D - OTHER ADJUSTMENTS:					
EXPENSES FROM FIRST 12 MONTHS OF 15 MONTH AUDIT PERI	COD 2	,821,436.			
RENTAL EXPENSE		25,677.			
TOTAL TO SCHEDULE D, PART XII, LINE 2D	2	,847,113.			

Schedule	D (Form 990) 2016 SOCIAL VENTURE PARTNERS	91-1894424	Page 5
Part XII	C (Form 990) 2016 SOCIAL VENTURE PARTNERS  Supplemental Information (continued)		
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SCHEDULE (Form 990) Internal Revenue Service

Department of the Treasury

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22, ▼ Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Schedule I (Form 990) (2016) ž [ SENERAL OPERATING SUPPORT GENERAL OPERATING SUPPORT Employer Identification number GENERAL OPERATING SUPPORT (h) Purpose of grant or assistance 91-1894424 X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) ö 0 ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 10,000 7,500 7,500 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 3 Enter total number of other organizations listed in the line i table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) 501(C)(3) 501(C)(3) 26-1396970 52-1681375 91-2084105 General Information on Grants and Assistance (p) EIN SOCIAL VENTURE PARTNERS criteria used to award the grants or assistance? 720 E WASHINGTON STREET, SUITE 111 1 (a) Name and address of organization OLYMPIC VIEW COMMUNITY FOUNDATION WASHINGTON - 9414 NE FOURTH PLAIN 750 9TH STREET NW SUITE 650 NONPROFIT NEWTORK SOUTHWEST WASHINGTON, DC 20001-4793 or government - VANCOUVER, WA 98682 Name of the organization SEQUIM, WA 98382 BOARDSOURCE Parti Part

### **SCHEDULE O**

(Form 990 or 990-EZ)

Name of the organization

### 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.

OMB No 1545-0047

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

Inspection

**Employer identification number** 

SOCIAL VENTURE PARTNERS 91-1894424 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: DRIVING COMMUNITY CHANGE BY BUILDING POWERFUL RELATIONSHIPS THAT ADVANCE SHARED COMMUNITY GOALS. FORM 990, PART I, LINE 6: VOLUNTEERS FOR SOCIAL VENTURE PARTNERS HELP IN A VARIETY OF CAPACITIES THROUGHOUT THE YEAR. IN ADDITION TO THE 17 VOLUNTEER BOARD MEMBERS, 16 INDIVIDUALS SERVE ON VARIOUS COMMITTEES WITH THE ORGANIZATION. VOLUNTEERS ALSO ASSIST WITH THE GRANTEES BY UTILIZING THEIR VARIOUS SKILL AREAS, INCLUDING BUT NOT LIMITED TO: MARKETING, HUMAN RESOURCES LEGAL, STRATEGY, FUND DEVELOPMENT, INFORMATION TECHNOLOGY, AND BOARD DEVELOPMENT. ADDITIONALLY SOME VOLUNTEERS ASSIST WITH HANDS-ON PROJECTS WITH NONPROFIT ORGANIZATIONS IN A GROUP SETTING. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PHILANTHROPISTS - HELPING THEM MAKE THE GREATEST IMPACT WITH THEIR PHILANTHROPIC GIVING. IN ADDITION, SVP INVESTS TIME, EXPERTISE AND MONEY TO STRENGTHEN THE ORGANIZATIONAL CAPACITY OF LOCAL NONPROFIT ORGANIZATIONS TO MORE EFFECTIVELY ACHIEVE THEIR MISSIONS. PARTNERS ARE AT THE CORE OF SVP. THEY JOIN BY MAKING A MINIMUM CONTRIBUTION OF \$6000 (\$2500 FOR INDIVIDUALS UNDER 35 YEARS OF AGE). THESE FUNDS ARE USED TO MAKE GRANTS TO LOCAL NONPROFIT ORGANIZATIONS, AND TO SUPPORT CAPACITY BUILDING, COLLECTIVE ACTION, AND PHILANTHROPY DEVELOPMENT PROGRAMS. CURRENTLY, GRANTMAKING AND CAPACITY BUILDING PARTNERSHIPS ARE FOCUSED ON ACHIEVING BETTER OUTCOMES IN EARLY LEARNING. EDUCATION AND THE ENVIRONMENT.

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization SOCIAL VENTURE PARTNERS	Employer identification number 91-1894424
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
FAST PITCH: SVP PROVIDES A COMPETITIVE FAST-PITCH INVESTMENT FORUM	
HIGHLIGHTING "NEW IDEAS FOR SOCIAL IMPACT" FOR VARIOUS NONPROFITS AND	
FOR-PROFIT ORGANIZATIONS.	
EXPENSES \$ 21,560. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,000.	
FIELD BUILDING: SVP STAFF PARTICIPATES IN CONFERENCES AND ENGAGES IN	
COLLABORATIVE RELATIONSHIPS WITH OTHER KEY PLAYERS IN THE PHILANTHROPIC	
SECTOR WHICH HAS A POSITIVE EFFECT ON THE BROADER PHILANTHROPIC AND	
NONPROFIT SECTORS.	
EXPENSES \$ 5,788. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
DIRECT GRANTS AND CONSULTING FOR INVESTEES: SVP PROVIDES GRANTS TO	
INVESTEES (GRANTEES) AND CONSULTING FEES FOR PROFESSIONALS WORKING	
DIRECTLY WITH INVESTEES IN ONE OF THEIR CORE CAPACITY BUILDING AREAS.	
EXPENSES \$ 3,646. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
FORM 990, PART VI, SECTION A, LINE 3:	
DEBORAH JENSEN FROM JENSEN & ASSOCIATES SERVED AS INTERIM CFO THRU AUGUST	
2017. SOCIAL VENTURE PARTNERS PAID JENSEN & ASSOCIATES FOR THE SERVICES.	
DEBORAH JENSEN'S COMPENSATION FROM JENSEN & ASSOCIATES IS UNAVAILABLE.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE BOARD TREASURER ALONG WITH MEMBERS OF THE FINANCE/AUDIT COMMITTEE	
REVIEW THE DRAFT AND FINAL FORM 990 BEFORE THE FORM IS FILED WITH THE IRS.	
THE BOARD TREASURER THEN INCLUDES THE RETURN WITH THEIR REPORT TO THE BOARD	
632212 08-25-16	Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or 990-EZ) (2016)	Page 2	
Name of the organization SOCIAL VENTURE PARTNERS	Employer identification number 91~1894424	
BUT A COPY IS NOT PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING WITH THE		
IRS.		
FORM 990, PART VI, SECTION B, LINE 12C:		
THE BOARD HAS A CONFLICT OF INTEREST POLICY. EACH BOARD MEMBER AND KEY		
EMPLOYEE COMPLETES A POLICY FORM ANNUALLY. PER THE CONFLICT OF INTEREST		
POLICY, ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST MUST BE DISCLOSED TO		
THE BOARD OF DIRECTORS IN WRITING BY THE INTERESTED PERSON (ANY DIRECTOR OR		
PRINCIPAL OFFICER WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST IN A		
GIVEN TRANSACTION OR ARRANGEMENT). CONFLICTED PERSONS ARE RECUSED FROM		
VOTING ON THE MATTER.		
FORM 990, PART VI, SECTION B, LINE 15A:		
THE ORGANIZATION HIRED A NEW CEO IN AUGUST OF 2017. THE BOARD HIRED AN		
INDEPENDENT OUTSIDE FIRM TO ADVISE THE EXECUTIVE COMMITTEE ON THE HIRING		
AND COMPENSATION PROCESS. THE LAST COMPENSATION REVIEW WAS COMPLETED AT		
THIS TIME.		
FORM 990, PART VI, SECTION C, LINE 19:		
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS		
ARE AVAILABLE UPON REQUEST.		
FORM 990, PART IX, LINE 11G, OTHER FEES:		
PROGRAM CONSULTING:		
PROGRAM SERVICE EXPENSES 47,104.		
MANAGEMENT AND GENERAL EXPENSES 0.		
FUNDRAISING EXPENSES 0.		
TOTAL EXPENSES 47,104.		
632212 08-25-18	Schedule O (Form 990 or 990-EZ) (2016)	

edule O (Form 990 or 990-EZ) (2016)		Page 2	
Name of the organization SOCIAL VENTURE PARTNERS		Employer identification number 91-1894424	
EXECUTIVE RECRUITMENT FEES:			
PROGRAM SERVICE EXPENSES	0.		
MANAGEMENT AND GENERAL EXPENSES	16,848.		
Mario Mario Carallella Britanollo			
FUNDRAISING EXPENSES	0,		
TOTAL EXPENSES	16,848.		
OTHER PROFESSIONAL FEES:			
OTHER PROPERTY AND PARTY.			
PROGRAM SERVICE EXPENSES	3,646.		
MANAGEMENT AND GENERAL EXPENSES	125.		
FUNDRAISING EXPENSES	0.		
TOTAL EXPENSES	3,771.		
TOTAL BATEROES	3,771.		
COMMUNICATIONS:			
PROGRAM SERVICE EXPENSES	3,503.		
MANAGEMENT AND GENERAL EXPENSES	0.		
HEROMENT THE CHARACTER MICENCES			
FUNDRAISING EXPENSES	0.		
TOTAL EXPENSES	3,503.		
TOTAL OTHER PEES ON FORM 990, PART IX, LINE 11G, COL A	71,226.		
		<del></del>	