Form **990** 

OMB No. 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Α	For t	ne 2016 calen	dar year, or tax	year begi	inning 7/0	)1	, 201	16, an	d endir	ng (	5/30		,	2017	
В	Check	if applicable:	С								DE	Employe	er identifi	ication number	<u>.</u>
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			SAME AS C	ABOVE						H(b) Are	all subore	dinates n a list.	included? (see instr	? Yes	No
I	Tax-	exempt status	X 501(c)(3)	501(c) (	) <b>⋖</b> (ir	nsert no.)	4947(a)(1)	or	527		,			,	
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K	Forn	n of organization:	X Corporation	Trust	Association	Other ►		L Year	of format	tion: 20	009	M s	tate of led	gal domicile: CA	
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	8	Contributions	and grants (Pa	rt VIII lin	e 1h)							50,5	12	1,381	
ne	9		rice revenue (Pa								30	2,0			,454.
e	10	-	ncome (Part VIII									2,0	00.	14	,454.
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Ø	15		er compensatior		· ·				•		57	70,7	78.	650	<u>,057.</u>
Expenses	16 a	Professional	fundraising fees	(Part IX,	column (A), I	line 11e)									
- be	b	Total fundrais	sing expenses (F	Part IX, co	olumn (D), lin	e 25) ►		114.	493.						
Ш	17	Other expens	ses (Part IX, col	umn (A).	lines 11a-11d.						37	70,3	88	455	,468.
	18	•	es. Add lines 13	• • •		•						11,1		1,105	
	19		expenses. Sub	-	•							50,1			,772.
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ts o	20	Total accets	(Part X, line 16)							Begir	ning of (			End of Ye	
Net Assets	21		es (Part X, line 10)									58,1			<u>,599.</u>
et /	21		,	,								59,6			<u>,259.</u>
			fund balances.	Subtract	line 21 from I	ine 20					19	98,5	68.	522	<u>,340.</u>
Pa	art II	Signatur	e Block												
Und	er penal	ties of perjury, I de	eclare that I have exa	mined this re	eturn, including acc	companying sch	nedules and st	atemen	ts, and to	the best of	of my know	wledge a	and belief	f, it is true, correct	t, and
COIII	piete. D	eciaration of prepa	arer (other than office	i) is based of	II all lillorifiation o	i wilicii prepare	i ilas aliy kilo	wieuge.			1				
											<u> </u>				
Sig	gn	Signatu	ire of officer								Date				
He	re	► ANN	E MOSES, P	H.D.						PRE	SIDE	NT			
		Type or	print name and title												
-		Print/Type p	oreparer's name		Preparer's sign	nature		Da	ate		Chec	k	if P	PTIN	
Pa	id	JAMES H	. FRITZSCHE,	CPA							self-e	employe	d P	00423351	
	epare				TATES			1				. ,	12		
	Use Only Firm's ac		FRITZSCHE ASSOCIATES  1511 CORPORATE WAY STE 220					Firm	s FINI •	> 2202	212216				
	Firm's ad		SACRAMENTO, CA 95831-3890					Firm's EIN 320343346  Phone no. 916-422-2111							
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ivia	y me l	iko aiscuss th	nis return with th	e prepare	er shown abov	rer (see ins	structioΠS) .							X Yes	No

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Par	t III				Accomplishments				_
		Chec	k if Schedule O co	ontains a respons	se or note to any line in this	s Part III			🔲
1	Briefl	y desci	ribe the organizati	on's mission:					
	IGN	ITE :	IS BUILDING	A NATIONAL	MOVEMENT OF WOME	EN WHO ARE REA	ADY AND EAGER TO	D BECOME	THE
			NERATION OF						
2	Did th	ne organ	nization undertake a	any significant pro	gram services during the year	which were not listed	on the prior		
_		-					· —	Yes X	No
			cribe these new se					les V	NO
2					e significant changes in ho	wit conducts on on	ogram continue?	] V [7]	NI.
3		_		-	-	w it conducts, any pr	ogram services:	Yes X	No
_			cribe these change						
4	Descri	ribe the	e organization's pr	ogram service au	ecomplishments for each of are required to report the a	its three largest property and	gram services, as measi	ured by exper	nses.
	and r	evenue	e, if any, for each	program service	reported.	mount of grants and	anocations to others, th	c total experi	303,
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1:	(Code	۵٠	) (Expense	25 960	9,293. including grants	of \$	) (Revenue \$	14,4	51)
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	(Ехре	enses	\$	includ	ding grants of \$	) (Rev	venue \$	)	
4 6	Total	progra	m service expens	es ►	869,293.				

# Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete \$2 \text{ X}\$ 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 X 4 Section 501(cX) organizations. Did the organization engage in lobbying activities on have a section 501(n) election in effect during the last year? If 'Yes,' complete Schedule C, Part I. 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 98-197 if 'Yes,' complete Schedule C, Part III. 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide device on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts (and the organization receive or hold a conservation essement, including essements to preserve open space, the revivrement, including essements to preserve open space, the representation of the regional properties of the regional space of th		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Yes	No
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(fit) election in effect during the tax year? If "Yes," complete Schedule C, Part III.  5 Is the organization assection 501(c)(4), 5011(c)(5), or 5	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		
for public office? If "res," complete Schedule C, Part II.  Section 501(KS) arganizations. Did the organization engage in lobbying activities, or have a section 501(ft) election in effect during the tax year? If "res," complete Schedule C, Part III.  Is is the organization a section 501(CM), 501(CS), 501(CS), or 501(CY)(S) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.  5	2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
in effect during the fax 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.  5 X  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such funds or accounts? If 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 III.  8 Did the organization in epont an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If Yes, complete Schedule D, Part IV.  9 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 report an amount for land, buildings, and equipment in Part X, line 102 If Yes, complete Schedule D, Part VVI.  11 Debt the organization report an amount for investments – other securities in Part X, line 102 If Yes, complete Schedule D, Part VVII.  11 Debt 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 VVIII.  12 Did 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 IVIII.  13 Did the organizat	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
assessments, or similar amounts as defined in Revenue Procedure 98-197 If Yes, complete Schedule C, Part III. 5 X 6 Did the organization maintain any donor advised funds or any similar funds or accounts? If 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. 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 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 crotic conselling, debt management, credit repair, or debt nepoliation services? If Yes, complete Schedule D, Part IV. 10 Did the organization report an amount for Part IV. 10 Did the organization or developed to P, Part IV. 10 If the organization or survey of the following questions is Yes, then complete Schedule D, Part V. 11 If the transplant or sport an amount for land, buildings, and equipment in Part X, line 107 If Yes, complete Schedule D, Part VIII. 11 Did the organization report an amount for investments — other securities in Part X, line 107 If Yes, complete Schedule D, Part VIII. 11 Did the organization report an amount for investments — other securities in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 161 If Yes, complete Schedule D, Part VIII. 11 Did the organization report an amount for other securities in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 161 If Yes, complete Schedule D, Part VIII. 11 Did the organization report an amount for other seasests in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 161 If Yes, complete Schedule D, Part VIII. 11 Did the organization report and amou	4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4		Х
Part I.  Part II.  Part III.  Par	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.  9 Did the organization report an amount in Part X, line 21, for escrew 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.  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's answer to any of the following questions is 'Yes', then complete Schedule D, Part V.  12 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.  13 b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.  14 c 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 VIII.  15 d Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.  16 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? If 'Yes,' complete Schedule D, Part X.  17 D Jartis XI and XII.  18 b Was the organization as school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.  18 D Jid the organization maintain an office, employees, or agents outside of the United States?  18 D Jid the organization as school described in section	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	9	for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation	9		Х
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.  b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.  c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part XIII.  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X III.  d Did the organization amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X III.  The part X is a fine organization amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X III.  The part X is a fine organization and part X, line 16? If 'Yes,' complete Schedule D, Part X III.  The part X is a fine organization and part X, line 16? If 'Yes,' complete Schedule D, Part X III.  The part X is a fine organization and part X, line 16? If 'Yes,' complete Schedule D, Part X III.  The part X is a fine organization and part X is a fine organization and part X is a fine organization and X is a fine organization X is a fine organiza	10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
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assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's ilability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.  116 X  12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII.  b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts X and XII is optional.  12b X  13 Is the organization answered "No" to line 12a, then completing Schedule D, Parts X and XII is optional.  12b X  b Did the organization maintain an office, employees, or agents outside of the United States?  13 X  b Did the organization maintain an office, employees, or agents outside of the United States?  14a X  b Did the organization report on Part IX, column (A), line 3, 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 III and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.  16	;		11 a	X	
assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX  e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.  f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.  11f X  12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Part X X and XII.  b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.  14 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 II 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 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), 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 In the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3 in the organization report m	١	<b>b</b> Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i>	11 b		Х
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.  f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.  11a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Part X I and XII.  b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.  12b X  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.  13 X  14a Did the organization maintain an office, employees, or agents outside of the United States?  14a X  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts II 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 II and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.  16 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, line \$1 and \$2 If 'Yes,' complete Schedule G, Part I (see instructions).  17 Did the organization report more than \$15,000 total of fundra	•	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.  12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII.  b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.  12b X  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.  13 X  14a Did the organization maintain an office, employees, or agents outside of the United States?  14a 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? If 'Yes,' complete Schedule F, Parts III and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.  16 X  17 Did the organization report a total of more than \$15,000 for expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, line 9a? If 'Yes.'	•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
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b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.  12b X  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.  13 X  14a Did the organization maintain an office, employees, or agents outside of the United States?  14a X  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or other assistance to or for any 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 (see instructions).  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.'	1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12		12a	Х	
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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? 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 (see instructions).  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.'					
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foreign organization? If 'Yes,' complete Schedule F, Parts II and IV		b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		X
or for foreign individuals? If 'Yes,' complete Schedule F, Parts III 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	15		Х
column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	Х	
	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х

# Form 990 (2016) IGNITE Part IV Checklist of Required Schedules (continued)

			Yes	No
<b>20</b> a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		X
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ŀ	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part l</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŀ	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

**BAA** Form **990** (2016)

#### Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V..... Yes No 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable..... 49 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . . . . . . 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?..... Χ 1 c 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return..... Χ b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?...... 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?...... Χ 3 a **b** If 'Yes,' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule 0*..... 3 b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Χ financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a **b** If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 a Χ 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? ......... X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?..... 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?..... 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Χ solicit any contributions that were not tax deductible as charitable contributions?..... 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.... 6 h 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and Χ 7 a services provided to the payor?..... **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided?..... 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c Χ X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. 7 e X 7 f 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 7 g as required?.....as required?.... h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?..... 7 h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?..... 8 9 Sponsoring organizations maintaining donor advised funds. 9 a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?...... 9 h 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12...... **b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities..... 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders..... 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?...... 12 a **b** If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. . . . . . 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans...... c Enter the amount of reserves on hand ..... Χ **14a** Did the organization receive any payments for indoor tanning services during the tax year?.....

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Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . . 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 12 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ..... 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Χ a The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. O. ..... 15a **b** Other officers or key employees of the organization ... SEE .SCHEDULE .O. ..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Χ 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records: BOOKKEEPER 510 16TH STREET OAKLAND CA 94612 415-730-4582

Form 990 (2016) IGNITE

# Form 990 (2016) IGNITE 38-3819049 Page 7 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (do not check more than one box, unless person is both an officer and a (B) (F) Name and Title Reportable Reportable Estimated Average hours director/trustee) compensation from compensation from amount of other compensation from the organization the organization (W-2/1099-MISC) Officer (W-2/1099-MISC) ndividual nstitutional lighest compensated ormer (list any employee hours for and related related organizations organiza tions l trustee helow dotted line) (1) NANCY WILTSEK 3 BOARD CHAIR 0 Χ Χ 0 0 0. (2) JULIA TAYLOR 2 TREASURER 0 Χ Χ 0 0 0. (3) MARCELLA MEDINA 2 0. **SECRETARY** 0 Χ Χ 0 0 (4) KATIE BOUTON 1 DIRECTOR 0 Χ 0 0 0. (5) RAY CASAS 1 DIRECTOR 0 Χ 0 0 0. (6) EDIE LYCKE 1 DIRECTOR 0 Χ 0 0 0. (7) ANNE MACDONALD 1 0 Χ 0. DIRECTOR 0. 0. (8) MEGAN MCTIERNAN 1 0 DIRECTOR Χ 0 0 0. (9) RINI SAMPATH 1 DIRECTOR 0 Χ 0 0 0. (10) CHRIS E. WALLACE 1 0 DIRECTOR Χ 0 0. 0 (11) ASHLEY WILEY 1 DIRECTOR 0 Χ 0 0 0. (12) ANN MARIE PAINTER 1 DIRECTOR 0 Χ 0 0 0.

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(13) ANNE MOSES, PH.D.

PRESIDENT/CEO

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Form 990 (2016) IGNITE 38-3819049 Page **8** 

(a)  Native and title  Appropriate to the continuation sheets to Part VII, Section A	Par	t VII   Section A.	Officers, Directors, Tru		Key	En			es,	and	d Highest Com	pensated Em	ployees	<b>5</b> (conti	inued)
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# Form 990 (2016) IGNITE Part VIII Statement of Revenue

		Check if Schedule O contains a resp	onse or note to any	, line in this Part V	III		
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b d e f	Federated campaigns	1,381,777. 15,000.	1 201 777			
<u>ပ ၈</u>	- ''	Total: Add lilles Ta-Ti	Business Code	1,381,777.			
Program Service Revenue	2a b c		900099	14,454.	14,454.		
Ş.	d						
Ë	е						
ğ		All other program service revenue					
ğ	g	Total. Add lines 2a-2f		14,454.			
	3	Investment income (including dividends other similar amounts)	bond proceeds►				
	5	Royalties					
	b	Gross rents	(ii) Personal				
		Rental income or (loss)					
	a	Net rental income or (loss)					
		Gross amount from sales of assets other than inventory  Less: cost or other basis	(ii) Other				
	-	and sales expenses					
		Gain or (loss)					
	d	Net gain or (loss)					
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c).					
Ē		See Part IV, line 18					
‡		Less: direct expenses	10/000:	0.600			0.600
0		Gross income from gaming activities. See Part IV, line 19		8,638.			8,638.
	b	Less: direct expenses	o				
	С	Net income or (loss) from gaming activ	ities▶				
		Gross sales of inventory, less returns and allowances					
		Net income or (loss) from sales of inve					
	_	Miscellaneous Revenue	Business Code				
	11 a	OTHER INCOME	900099	24,428.	24,428.		
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d		24,428.			
	12	Total revenue. See instructions	▶	1,429,297.	38,882.	0.	8,638.

# Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a r	esponse or note to any	line in this Part IX		
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	102,509.	61,505.	20,502.	20,502.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	483,126.	347,741.	54,884.	80,501.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	·			
9	Other employee benefits	19,662.	14,153.	2,233.	3,276.
10	Payroll taxes	44,760.	31,309.	5,740.	7,711.
	Fees for services (non-employees):				
	Management				
	Legal	00 155		00.155	
	: Accounting	20,155.		20,155.	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column	П 401	T 401		
	(A) amount, list line 11g expenses on Schedule O.)	7,481.	7,481.		
13	Advertising and promotion  Office expenses	23,776.	23,776.	FFO	106
14	Information technology	7,454.	6,709.	559.	186.
15	Royalties				
16	Occupancy	15,590.	14,031.	1,169.	390.
17	Travel	17,249.	15,524.	1,294.	431.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	-, -	,	
19	Conferences, conventions, and meetings	26,537.	26,537.		
20	Interest	6,881.	4,814.	882.	1,185.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,043.	1,839.	153.	51.
23 24	Insurance	1,494.	1,345.	112.	37.
a	PROGRAM EXPENSES	265,170.	265,170.		
	DUES AND SUBSCRIPTIONS	18,655.	18,655.		
	IN-KIND EXPENSES	15,000.	15,000.		
	BOARD OF DIRECTORS EXPENSE	7,362.		7,362.	
	All other expenses	20,621.	13,704.	6,694.	223.
25	<b>Total functional expenses.</b> Add lines 1 through 24e	1,105,525.	869,293.	121,739.	114,493.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720).				
BAA		TEE A01101 11	4.5.4.5	•	Form <b>990</b> (2016)

Part X	Bal	lance	S	heet
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2   Savings and temporary cash investments   2   2   3   Pledges and grants receivable, net   27,500, 3   255,06   4   Accounts receivable, net   27,500, 3   255,06   255,0		ILX	Check if Schedule O contains a response or note to	any line	in this Part X			
2 Savings and temporary cash investments. 3 Pledges and grants receivable, net. 4 Accounts 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 disqualified persons (as defined under section 4958(n)), persons described in section 4958(n), persons described in section 501 (k)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 7 Notes and loans receivable, net. 8 Prepaid expenses and deferred charges. 9 Prepaid expenses and deferred charges. 2 , 890. 9 5, 71  10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D. 11 Investments — publicly traded securities. 12 Investments — publicly traded securities. 12 Investments — publicly traded securities. 13 Investments — publicly traded securities. 14 Intangible assets. 15 Other assets. See Part IV, line 11. 16 Total assets. See Part IV, line 11. 17 Intendification in the securities of t						<b>(A)</b> Beginning of year		<b>(B)</b> End of year
3 Pledges and grants receivable, net		1	Cash – non-interest-bearing			220,509.	1	275,756.
4 Accounts receivable, net.  5 Loans and other receivables from current and former officers, directors, trustesse, 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(n)), persons described in section 4958(n)(s), and contributing employers and sponsoring organizations of section 501(o)(s) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L.  7 Notes and loans receivable, net.  8 Inventories for sale or use.  9 Prepaid expenses and deferred charges.  10a Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D.  10 Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D.  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.  16 Total assets. Add lines 1 through 15 (must equal line 34).  17 Accounts payable and accrued expenses.  18 Grants payable  19 Perred 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 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 II 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.  25 Complete Part IV of Schedule D.  26 Total liabilities (including federal income tax, payables to related third parties.  27 And other liabilit		2	Savings and temporary cash investments				2	
4 Accounts 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 disqualified persons (as defined under section 4958()(1)), persons described in section 4958()(3)(8), and contributing employers and sponsoring organizations of section 501()(9) outlinary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.  7 Notes and loans receivable, net. 7 Notes and loans receivable, net. 8 Inventories for sale or use. 9 Prepaid expenses and deferred charges. 2 , 890. 9 5, 71  10 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10 Less: accumulated depreciation. 10 Less: accumulated depreciation. 10 Less: accumulated depreciation. 10 Less: accumulated depreciation. 11 Investments – publicly traded securities. 12 Investments – program-related. See Part IV, line 11. 13 Investments – program-related. See Part IV, line 11. 14 Intangible assets. 15 Other assets. See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 34). 2 Less accumulated depreciation. 2 Seguitation of the security		3	Pledges and grants receivable, net			27,500.	3	255,064.
Part II of Schedule L		4	Accounts receivable, net			,	4	,
section 4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6  7 Notes and loans receivable, net. 7  8 Inventories for sale or use. 8  9 Prepaid expenses and deferred charges. 2,890. 9 5,71  10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D. 10b 9,627. 7,270. 10c 6,06  11 Investments – publicly traded securities. 11  12 Investments – other securities. See Part IV, line 11. 12  13 Investments – program-related. See Part IV, line 11. 13  14 Intangible assets. 14  15 Other assets. Add lines 1 through 15 (must equal line 34). 258,169. 16  16 Total assets. Add lines 1 through 15 (must equal line 34). 258,169. 16  17 Accounts payable and accrued expenses. 59,601. 17  20,25  18 Grants payable. 18  19 Deferred revenue. 19  21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22  23 Secured mortageas and notes payable to unrelated third parties. 22  24 Unsecured notes and loans payable to unrelated third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties,		5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	officers, mployees	directors, . Complete		5	
8 Inventories for sale or use. 9 Prepaid expenses and deferred charges. 2,890. 9 5,71  10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10b 9,627. 7,270. 10c 6,06  b Less: accumulated depreciation. 10b 9,627. 7,270. 10c 6,06  11 Investments – publicly traded securities. 11  12 Investments – other securities. See Part IV, line 11. 12  13 Investments – program-related. See Part IV, line 11. 13  14 Intangible assets. 14  15 Other assets. See Part IV, line 11. 15  16 Total assets. Add lines 1 through 15 (must equal line 34). 258,169. 16 542,59  17 Accounts payable and accrued expenses 59,601. 17 20,25  18 Grants payable. 18  19 Deferred revenue. 19  20 Tax-exempt bond liabilities 1 perfect of the payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D. 22  21 Loans and other payable to unrelated third parties 23  22 Unsecured notes and loans payable to unrelated third parties 23  23 Secured mortgages and notes payable to unrelated third parties 23  24 Unsecured notes and loans payable to unrelated third parties 23  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. 59,601. 26 20,25  Total liabilities. Add lines 17 through 25. 59,601. 26 20,25		6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	ersons (a 3)(B), and (9) volunt e Part II o	s defined under I contributing ary employees' f Schedule L		6	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	ts	7	Notes and loans receivable, net				7	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	Se	8	Inventories for sale or use				8	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.  b Less: accumulated depreciation.  11 Investments – publicity traded securities.  12 Investments – other securities. See Part IV, line 11.  13 Investments – program-related. See Part IV, line 11.  14 Intangible assets.  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.  18 Grants 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.  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 and included on lines 17-24). Complete Part X of Schedule D.  25 Total liabilities. Add lines 17 through 25.  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow SFAS 117 (ASC 958), check here ► XI and complete	As	9	Prepaid expenses and deferred charges			2,890.	9	5,711.
b Less: accumulated depreciation. 10b 9, 627. 7, 270. 10c 6, 06  11 Investments – publicly traded securities. 11  12 Investments – other securities. See Part IV, line 11. 12  13 Investments – program-related. See Part IV, line 11. 13  14 Intangible assets. 14  15 Other assets. See Part IV, line 11. 15  16 Total assets. Add lines 1 through 15 (must equal line 34). 258, 169. 16 542, 59  17 Accounts payable and accrued expenses. 59, 601. 17 20, 25  18 Grants payable . 18  19 Deferred revenue. 19  20 Tax-exempt bond liabilities. 20  21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22  23 Secured mortgages and notes payable to unrelated third parties. 23  24 Unsecured notes and loans payable to unrelated third parties, and 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  25 Total liabilities. Add lines 17 through 25. 59, 601. 26 20, 25  Organizations that follow SFAS 117 (ASC 958), check here X IX and complete		10 a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D	10 a	15,695.			·
11 Investments – publicly traded securities. 12 Investments – other securities. See Part IV, line 11. 13 Investments – program-related. See Part IV, line 11. 14 Intangible assets. 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. 18 Grants payable. 19 Deferred revenue. 19 Deferred revenue. 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. 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, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 Total liabilities. Add lines 17 through 25.  Corganizations that follow SFAS 117 (ASC 958). check here > X and complete		b	Less: accumulated depreciation	10 b	9,627.	7,270.	10 c	6,068.
13 Investments – program-related. See Part IV, line 11						,	11	,
14 Intangible assets.		12	Investments – other securities. See Part IV, line 11				12	
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.  18 Grants 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 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 X and complete		13	Investments – program-related. See Part IV, line 11.			13		
16 Total assets. Add lines 1 through 15 (must equal line 34)		14	Intangible assets				14	
16 Total assets. Add lines 1 through 15 (must equal line 34)		15	<del>-</del>		<u></u>		15	
17 Accounts payable and accrued expenses		16			<u> </u>	258.169.	16	542,599.
18 Grants payable		17				·		20,259.
20 Tax-exempt bond liabilities		18	Grants payable		,	18	· · · · · · · · · · · · · · · · · · ·	
21 Escrow or custodial account liability. Complete Part IV of Schedule D		19	Deferred revenue			19		
23 Secured mortgages and notes payable to unrelated third parties		20	Tax-exempt bond liabilities				20	
23 Secured mortgages and notes payable to unrelated third parties	es	21	Escrow or custodial account liability. Complete Part	V of Sch	edule D		21	
23 Secured mortgages and notes payable to unrelated third parties	abiliti	22	key employees, highest compensated employees, and	d disquali	fied persons.		22	
Unsecured notes and loans payable to unrelated third parties	ij	23	·		<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				•	<u></u>			
26 Total liabilities. Add lines 17 through 25			·					
Organizations that follow SFAS 117 (ASC 958), check here Y and complete		26	Total liabilities. Add lines 17 through 25			59,601.	26	20,259.
27 Unrestricted net assets.  28 Temporarily restricted net assets.  29 Permanently restricted net assets.  29 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 Tatal and acceptance fund hallman.	ses		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	ere ►	and complete	·		,
28 Temporarily restricted net assets.  29 Permanently restricted net assets.  29 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 Tatal and coache or fund halonese.	ğ	27	Unrestricted net assets			134,349.	27	22,840.
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.  32  Tatal not contact or fund helphone.	3al	28	Temporarily restricted net assets			64,219.	28	499,500.
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.  32  Tatal not coasts or fund belances.	P	29	Permanently restricted net assets				29	·
30 Capital stock or trust principal, or current funds	r Fun			neck here	· 🗆 [			
31 Paid-in or capital surplus, or land, building, or equipment fund	S	30					30	
32 Retained earnings, endowment, accumulated income, or other funds	é						-	
73. Tatal not constant on fund halances	Asi		, , ,		<u></u>			
<b>0   33</b> Total net assets of lund balances	et.	33	Total net assets or fund balances			198,568.	33	522,340.
<b>34</b> Total liabilities and net assets/fund balances. 258,169. <b>34</b> 542,59	Z							542,599.

BAA Form 990 (2016)

Form 990 (2016) IGNITE 38-3819049 Page **12** 

Par	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,4	29,2	297.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,1	05,5	525.
3	Revenue less expenses. Subtract line 2 from line 1	3	3	23,7	772.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		98,5	
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,				
<b>D</b>		10	5	22,3	<u> 340.</u>
Par	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
	in Schedule O.				
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis				
				v	
t	b Were the organization's financial statements audited by an independent accountant?		2b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:	е			
	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 audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain				
2 -	in Schedule O.  As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single				
36	As a result of a redefai award, was the organization required to undergo an addit of addits as set forth in the Single  Audit Act and OMB Circular A-133?		За		Χ
Ł	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u> .	3b		

**BAA** Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **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.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number IGNITE 38-3819049 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 Χ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. C **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations ..... **q** Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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

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

Sec	Section A. Public Support									
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	<b>(e)</b> 2016	<b>(f)</b> Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	498,934.	647,946.	1,065,694.	560,512.	1,381,777.	4,154,863.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.			
	<b>Total.</b> Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	498,934.	647,946.	1,065,694.	560,512.	1,381,777.	4,154,863. 905,205.			
6	<b>Public support.</b> Subtract line 5 from line 4						3,249,658.			
Sec	tion B. Total Support						3/213/0001			
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	<b>(e)</b> 2016	(f) Total			
7	Amounts from line 4	498,934.	647,946.	1,065,694.	560,512.	1,381,777.	4,154,863.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on					8,638.	8,638.			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI					24,428.	24,428.			
11	Total support. Add lines 7 through 10						4,187,929.			
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	0.			
	<b>First five years.</b> If the Form 990 is organization, check this box and	stop here		ird, fourth, or fifth t	tax year as a sectio	on 501(c)(3)	▶ □			
Sec	tion C. Computation of Pul Public support percentage for 20	olic Support P	ercentage							
							77.60 %			
	5 Public support percentage from 2015 Schedule A, Part II, line 14									
b	b 33-1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
17a	7a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization									
	b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization									

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	Section A. Public Support										
	lar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	<b>(e)</b> 2016	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(4) 2012	(3) 2313	(-, : :	(4) 2515	(6) 2010	<b>(7</b> ) o.c.				
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.										
3	Gross receipts from activities that are not an unrelated trade or business under section 513.										
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.										
5	The value of services or facilities furnished by a governmental unit to the organization without charge										
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons										
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.										
С	Add lines 7a and 7b										
8	Public support. (Subtract line 7c from line 6.)										
	ction B. Total Support										
	dar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	<b>(e)</b> 2016	<b>(f)</b> Total				
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources										
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975										
	Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on										
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)										
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)										
	First five years. If the Form 990 organization, check this box and	stop here									
	tion C. Computation of Pul					, ,					
	Public support percentage for 20	•	•				%				
	Public support percentage from 2					16	0/0				
	tion D. Computation of Inv					J I					
17		•	• • •	-			%				
	Investment income percentage for					<u> </u>	8				
	<b>33-1/3% support tests—2016.</b> If t is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organi	ization qualifies a	as a publicly supp	orted organization	▶ ∐				
	b 33-1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization										

# Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

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

Pa	rt IV	Supporting Organizations (continued)			
11	∐ac :	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		rson who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
		erning body of a supported organization?	11a		
	<b>b</b> A far	mily member of a person described in (a) above?	11b		
	<b>c</b> A 35	% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	ction	B. Type I Supporting Organizations			
	D: 1 11			Yes	No
1	or ele <b>Part</b> If the direc	he directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in 'VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. e organization had more than one supported organization, describe how the powers to appoint and/or remove ctors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, lied to such powers during the tax year.	1		
2	Did t that	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such efit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Sec	ction	C. Type II Supporting Organizations			
				Yes	No
1	of ea	e a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees each of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the porting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction	D. All Type III Supporting Organizations			
				Yes	No
1	orgai year,	the organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	orgai	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported inization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice all tir	eason of the relationship described in (2), did the organization's supported organizations have a significant e in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played his regard.	3		
Sec	ction	E. Type III Functionally Integrated Supporting Organizations			
1	Chec	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
		The organization satisfied the Activities Test. Complete line 2 below.			
	ᆷ	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	ᆷ	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see in	nstruc	tions).	
	• Ш	g			
2	Activ	vities Test. Answer (a) and (b) below.		Yes	No
i	suppo orga respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported anizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted stantially all of its activities.	2a		
	the c	the activities described in (a) constitute activities that, but for the organization's involvement, one or more of organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for organization's position that its supported organization(s) would have engaged in these activities but for the inization's involvement.	2b		
3	Pare	ent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
i	<b>a</b> Did t each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	<b>b</b> Did th supp	he organization exercise a substantial degree of direction over the policies, programs, and activities of each of its ported organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Page 6

Pa	rt v   Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anızat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on No	ov. 20, 1970 (explain in st complete Sections A	Part VI). <b>See</b> through E.
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
- 1	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte	egrated	Type III supporting or	ganization

(see instructions). BAA

Schedule A (Form 990 or 990-EZ) 2016

10 Line 8 amount divided by Line 9 amount

Sche	dule A (Form 990 or 990-EZ) 2016	38-3819049	Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (con	ntinued)	
Sec	tion D — Distributions	Curren	t Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in <b>Part VI</b> ). See instructions.		
7	<b>Total annual distributions.</b> Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.		
9	Distributable amount for 2016 from Section C, line 6		

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required — explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2016:			
a			
b			
<b>c</b> From 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2017. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
<b>b</b> Excess from 2013			
c Excess from 2014			
d Excess from 2015			
<b>e</b> Excess from 2016			
PAA		Schodulo A (Eo	rm 990 or 990 E7) 2016

BAA

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016

IGNITE

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

# PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE		2016	2015	201	4	2013	2012
OTHER INCOME TO	\$ FAL \$	24,428. 24,428.	\$ 0	. \$	0.	\$ 0.	. \$ 0.

#### SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

6

7

▶\$

conservation easements

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

IGNITE 38-3819049 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate value of contributions to (during year). . . . . . Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes 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 No impermissible private benefit?.... Yes **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..... 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► 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 violations, No

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

and enforcement of the conservation easements it holds?....

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?.....

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

1 a 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.

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

- **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.....

Part III Organizations Maintaining Colle	ections of Art, Histo	ricai i reasures, oi	r Otner Similar Ass	sets (continuea)
<b>3</b> Using the organization's acquisition, accession, a items (check all that apply):	and other records, check ar	ny of the following that a	re a significant use of its	collection
a Public exhibition	<b>d</b> Loan o	or exchange programs		
<b>b</b> Scholarly research	e Other			
c Preservation for future generations				
4 Provide a description of the organization's collect Part XIII.	tions and explain how they	further the organization'	s exempt purpose in	
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	intained as part of the o	rganization's collection	?	Yes No
Part IV Escrow and Custodial Arranger line 9, or reported an amount or	nents. Complete if to Form 990, Part X,	he organization an line 21.	swered 'Yes' on Fo	orm 990, Part IV,
1 a Is the organization an agent, trustee, custodia on Form 990, Part X?	an or other intermediary	for contributions or oth	er assets not included	Yes No
<b>b</b> If 'Yes,' explain the arrangement in Part XIII	and complete the following	ng table:		
				Amount
c Beginning balance			1с	
<b>d</b> Additions during the year			1 d	
e Distributions during the year			1e	
f Ending balance			1f	
2a Did the organization include an amount on Fo	orm 990, Part X, line 21,	for escrow or custodial	account liability?	Yes No
<b>b</b> If 'Yes,' explain the arrangement in Part XIII.	Check here if the explan	nation has been provide	ed on Part XIII	
Part V Endowment Funds. Complete if	the organization an	swered 'Yes' on Fo	orm 990, Part IV, li	ne 10.
(a) Curren				(e) Four years back
1 a Beginning of year balance	, , ,	, ,		, ,
<b>b</b> Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
· <u> </u>				
e Other expenditures for facilities and programs				
f Administrative expenses				
<b>g</b> End of year balance				
2 Provide the estimated percentage of the curre	ent year end balance (lin	e 1g, column (a)) held	as:	
a Board designated or quasi-endowment ►	<u> </u>			
<b>b</b> Permanent endowment ►	5			
c Temporarily restricted endowment ►	90			
The percentages on lines 2a, 2b, and 2c should e	equal 100%.			
<b>3</b> a Are there endowment funds not in the possession organization by:	n of the organization that a	re held and administered	d for the	Yes No
(i) unrelated organizations				3a(i)
(ii) related organizations				3a(ii)
b If 'Yes' on line 3a(ii), are the related organiza	tions listed as required of	on Schedule R?		. 3b
4 Describe in Part XIII the intended uses of the	organization's endowme	ent funds.		<u> </u>
Part VI Land, Buildings, and Equipmen	-			
Complete if the organization ans		n 990 Part IV line	11a See Form 99	0 Part X line 1
	1	· · · · · · · · · · · · · · · · · · ·		
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1 a</b> Land	(	2000 (00101)	20010010111	
<b>b</b> Buildings.				
c Leasehold improvements				
d Equipment		F 200	4 170	1 1 1 1
• •		5,309.	4,178.	1,131
e Other		10,386.	5,449.	4,937
Total. Add lines 1a through 1e. (Column (d) must e	quai Form 990, Part X, c	:oiumn (B), line 10c.)	· · · · · · · · · · · · · · · · · · ·	6,068

BAA

38-3819049

Part VII Investments — Other Securities.		N/A	
· · · · · · · · · · · · · · · · · · ·		, Part IV, line 11b. See Form 990, Part X, line	<u>e 12</u>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
<u>(I)</u>			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		27 (2	
Part VIII Investments – Program Related.	L'Yes' on Form 990	N/A , Part IV, line 11c. See Form 990, Part X, line	_ 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market va	
(1)	(0) = 0011 101100	(-)	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) •			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.	N/A	Port IV line 11d Con Forms 000 Port V line	- 15
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered	N/A I 'Yes' on Form 990	, Part IV, line 11d. See Form 990, Part X, line	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De	N/A	, Part IV, line 11d. See Form 990, Part X, line (b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1)	N/A I 'Yes' on Form 990		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1)	N/A I 'Yes' on Form 990		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1) (2) (3)	N/A I 'Yes' on Form 990		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5)	N/A I 'Yes' on Form 990		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)	N/A I 'Yes' on Form 990		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7)	N/A I 'Yes' on Form 990		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)	N/A I 'Yes' on Form 990		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)	N/A I 'Yes' on Form 990		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)	N/A I 'Yes' on Form 990 scription	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (c)	N/A I 'Yes' on Form 990 scription	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, Part X, column (b) Part X Other Liabilities.	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Figure (a) Description of liability  (1) Federal income taxes  (2)	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Final (complete in the organization of liability)  (1) Federal income taxes  (2)  (3)	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Final (column (b) Part X (column (c	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Final (column (b) Part X Other Liabilities)  (1) Federal income taxes  (2)  (3)  (4)  (5)	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Final (column (b) Part X)  (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX  Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X  Other Liabilities.  Complete if the organization answered 'Yes' on Factor (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX  Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b)  Part X  Other Liabilities.  Complete if the organization answered 'Yes' on Factor (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Factor (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Factor (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)	N/A I 'Yes' on Form 990 scription  B) line 15.)	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answered  (a) De  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.  Complete if the organization answered 'Yes' on Factor (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)	N/A I 'Yes' on Form 990 scription  B) line 15.)  form 990, Part IV, line 11  (b) Book value	(b) Book value	

tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. BAA

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	1,429,297.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	. 2e	
3 Subtract line 2e from line 1	. 3	1,429,297.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	. 4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	1,429,297.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	r Return	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	. 1	1,105,525.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		· · ·
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	. 2e	
3 Subtract line 2e from line 1		1,105,525.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	. 5	1,105,525.
Part XIII   Supplemental Information.		2/200/020:

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

# **PART X - FIN 48 FOOTNOTE**

MANAGEMENT OF IGNITE HAS EVALUATED THE TAX POSITIONS AND RELATED INCOME TAX CONTINGENCIES. MANAGEMENT DOES NOT BELIEVE THAT ANY MATERIAL UNCERTAIN TAX POSITIONS EXIST.

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

# SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

2016

Open to Public Inspection

Employer identification number

IGNITE					38-381904	9
Part I Fundraising Activities. Complet Form 990-EZ filers are not recommendations.	e if the organiza	ation answe lete this p	ered 'Yes' o art.	on Form 990, Part IV, line	e 17.	
<ul> <li>Indicate whether the organization ratio</li> <li>Mail solicitations</li> <li>Internet and email solicitations</li> <li>Phone solicitations</li> <li>In-person solicitations</li> <li>In-person solicitations</li> <li>Did the organization have a written or employees listed in Form 990, Part</li> <li>If 'Yes,' list the 10 highest paid ind compensated at least \$5,000 by the</li> </ul>	aised funds thr oral agreement t VII) or entity i ividuals or enti	rough any t with any i	of the folloge f g ndividual (ition with p	Solicitation of non- Solicitation of gove Special fundraising Including officers, directorofessional fundraising	government grants ernment grants g events rs, trustees, or key services?	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did have custo of contr	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
1		Yes	No			
2						
3						
4						
5						
6						
7						
8						
9						
10						
Гotal			<b>&gt;</b>			0.
3 List all states in which the organization or licensing.				ontributions or has been	notified it is exempt from	

38-3819049

Page 2

Par	t II	Fundraising Events. Complete if the more than \$15,000 of fundraising List events with gross receipts great the more than \$15,000 of fundraising the more than \$150.00 of fundraising the more than \$	event contributions	nswered 'Yes' on Fo s and gross income	orm 990, Part IV, li on Form 990-EZ,	ne 18, or reported lines 1 and 6b.
R E			(a) Event #1  IGNITE HONORS (event type)	(b) Event #2	(c) Other events  NONE (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1	Gross receipts	19,254.			19,254.
Ĕ	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	19,254.			19,254.
	4	Cash prizes				
D	5	Noncash prizes				
D I R E C T	6	Rent/facility costs	8,500.			8,500.
	7	Food and beverages				
E X P	8	Entertainment	250.			250.
EXPENSES	9	Other direct expenses				
	10 11	Direct expense summary. Add lines 4 throws the income summary. Subtract line 10 from the company of the company	om line 3, column (d)		▶	10,504.
Par	t III	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Yes	s' on Form 990, Pai	t IV, line 19, or re	ported more than
R E V E N U E			<b>(a)</b> Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
U E	1	Gross revenue				
_	2	Cash prizes				
D I P E N C T S	3	Noncash prizes				
C S T E S	4	Rent/facility costs				
	5	Other direct expenses	Yes %	Yes %	\[\v\qquad \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	6	Volunteer labor	Yes%	Yes%	Yes 8	
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)			
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	nn (d)		
	a Is th	er the state(s) in which the organization cone organization licensed to conduct gaming lo,' explain:	g activities in each of th			Yes No
		re any of the organization's gaming license		or terminated during the		Yes No

	edule G (Form 990 or 990-EZ) 2016 IGNITE	38-3819049	Page 3
	Does the organization conduct gaming activities with nonmembers?		No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed administer charitable gaming?		No
13	Indicate the percentage of gaming activity conducted in:		
	a The organization's facility	13a	%
	<b>b</b> An outside facility.	13b	0,0
14	Enter the name and address of the person who prepares the organization's gaming/special events books and reco	ords:	
	Name •		
	Address ►		
	a Does the organization have a contract with a third party from whom the organization receives gaming rev b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ an of gaming revenue retained by the third party ▶ \$ c If 'Yes,' enter name and address of the third party:		s No
	Name ►		
	Address ►		i -
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ►		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	ne <b>Ye</b> s	
	<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent		s No
	organization's own exempt activities during the tax year > \$	iii uic	
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b,	columns (iii) and	(v):
	and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide	any additional	<b>\</b> /1
	information. See instructions		

### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

IGNITE

Employer identification number 38-3819049

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

FORM 990 IS PREPARED BY AN OUTSIDE TAX PROFESSIONAL. THE FORM IS THEN REVIEWED BY THE ORGANIZATION'S MANAGEMENT, A MEMBER OF THE BOARD OF DIRECTORS, AND THE PRESIDENT/CEO. THIS GROUP OF INDIVIDUALS THEN DISCUSSES THE CONTENTS OF THE RETURN WITH THE OUTSIDE TAX PROFESSIONAL. AFTER A FULL REVIEW, THE FINAL VERSION OF THE TAX RETURN IS PROVIDED TO ALL MEMBERS OF THE ORGANIZATION'S VOTING BODY. A REPRESENTATIVE OF MANAGEMENT AUTHORIZES THE FINAL FORM 990 WHICH IS THEN E-FILED WITH THE INTERNAL REVENUE SERVICE.

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

MEMBERS OF THE BOARD OF DIRECTORS REVIEW ALL POTENTIAL CONFLICTS OF INTEREST AT

LEAST ANNUALLY. THE PRESIDENT/CEO AND ALL BOARD MEMBERS ARE REQUIRED TO DISCLOSE

(IN WRITING) POTENTIAL CONFLICTS AND ANY RELATED PARTY AFFILIATIONS. LOANS BETWEEN

THE ORGANIZATION AND MEMBERS OF MANAGEMENT AND THE BOARD ARE STRICTLY PROHIBITED.

THE ORGANIZATION SEEKS FULL TRANSPARANCY ON ALL RELATIONSHIPS. ANY POTENTIAL

CONFLICTS (IN FACT OR APPEARANCE) ARE DISCUSSED OPENLY AND RESOLVED IN ACCORDANCE

WITH THE ORGANIZATION'S POLICIES AND PROCEDURES.

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

MEMBERS OF THE BOARD OF DIRECTORS REVIEW AND SET THE COMPENSATION FOR THE

PRESIDENT/CEO PERIODICALLY IN ACCORDANCE WITH IRS RULES AND REGULATIONS. EFFORTS

ARE MADE TO SECURE COMPENSATION DATA FROM INDUSTRY SOURCES IN ORDER TO DETERMINE

COMPETITIVENESS AND APPROPRIATENESS OF SALARIES. EVERY EFFORT IS MADE TO ENSURE

THAT THE PROCESS IS THOROUGH AND TRANSPARENT IN ACCORDANCE WITH IRS GUIDELINES AND

THE ORGANIZATION'S POLICIES AND PROCEDURES.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

COMPENSATION OF OTHER PERSONNEL AND HIGH LEVEL EMPLOYEES IS REVIEWED PERIODICALLY BY

MEMBERS OF MANAGEMENT. EFFORTS ARE MADE TO SECURE COMPENSATION DATA FROM INDUSTRY

Name of the organization

IGNITE

Employer identification number

38-3819049

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES (C

SOURCES IN ORDER TO DETERMINE COMPETITIVENESS AND APPROPRIATENESS OF SALARIES AND ALL RELATED BENEFITS. ALL DECISIONS ARE THEN DOCUMENTED IN PERSONNEL FILES.

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

ALL OF THE ORGANIZATION'S GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND OTHER LEGAL FILINGS ARE MAINTAINED IN A SECURE ENVIRONMENT AND HELD AVAILABLE FOR INSPECTION BY TAX AUTHORITIES AND THE GENERAL PUBLIC. TAX RETURNS ARE POSTED ANNUALLY TO WWW.GUIDESTAR.ORG (WHERE THEY ARE AVAILABLE FOR VIEWING AS ELECTRONIC COPIES) AND ARE ALSO AVAILABLE FOR A PHYSICAL INSPECTION AT THE ORGANIZATION'S OFFICE IN OAKLAND, CALIFORNIA.