efile	e GR	RAPHIC	print - DO NOT PROCESS	As Filed Data -			DLN	I: 93493178008187
Form	00	20	Return of Or	ganization E	xempt From	Income	Tax	OMB No 1545-0047
	フこ	0	Under section 501(c), 52	-	-			2016
<u>م</u>			foundations)					2010
-		of the Trea	surv Information about the survey of the survey	icial security numbers o out Form 990 and its ir				Open to Public
Interna	l Reve	enue Servio	ce					Inspection
A Fe	or th	e 2016	calendar year, or tax year beg	inning 01-01-2016	, and ending 12-3	1-2016		
		applicable change	C Name of organization DRUM CORPS INTERNATIONAL IN	с			D Employer in	dentification number
		-					36-275448	0
🗖 Inr	tial re	-	Doing business as					
Fin Detur		minated	Number and street (or P O box if	mail is not delivered to str	eet address) Room/su	ito	E Telephone nu	umber
		d return	110 W WASHINGTON STREET RM/			ite	(317) 275-	1212
	olicati	ion pendin	City or town, state or province, co	untry, and ZIP or foreign p	postal code		()	
			INDIANAPOLIS, IN 46204				G Gross receip	ts \$ 12,978,102
			F Name and address of princip	pal officer		H(a) Is this	a group returr	ו for
			DANIEL ACHESON 110 W WASHINGTON ST STE (2			dinates?	🗌 Yes 🗹 No
			INDIANAPOLIS, IN 46204			H(b) Are al includ	l subordinates ed?	🗌 Yes 🔲 No
I Tax	(-exe	mpt status	5 🗹 501(c)(3) 🗌 501(c)()	(Insert no) 🗌 4947	(a)(1) or 🛛 527			(see instructions)
J W	ebsi	te:► W	WW DCI ORG			H(c) Group	exemption nui	mber 🕨
						L Year of forma		
K Forn	n of o	organızatıo	n 🗹 Corporation 🗌 Trust 🗌 As	sociation 📙 Other 🕨			ition 1972	State of legal domicile IN
Pa	rt I	Sur	nmary					
	1	Briefly de	escribe the organization's mission					
a 1			ORPS INTERNATIONAL IS A NONP VIDES LEADERSHIP & GUIDANCE					
DC.	-		VIDES EEADERSHILL & GOIDARGE					
ma								
ove		Chock t	his box \blacktriangleright if the organization c	liscontinued its operati	one or disposed of m	ara than 75%	of its not asso	+-
5			r of voting members of the govern					3 9
20	4	Number	r of independent voting members	of the governing body	(Part VI, line 1b)			4 3
Щ.	5	Total nu	umber of individuals employed in o	alendar year 2016 (Pa	urt V, line 2a) . .			5 60
Activities & Governance	6	Total nu	umber of volunteers (estimate if n		•	6 345		
٩	7a	Total ur	nrelated business revenue from Pa	ırt VIII, column (C), lın	ne 12		•	7a 60,834
	b	Net unr	elated business taxable income fro	om Form 990-T, line 34	4		•	7b -24,885
						Prie	or Year	Current Year
ej.			utions and grants (Part VIII, line 1				384,069	,
enneven		-	n service revenue (Part VIII, line 2				10,193,724	· · · ·
Ъ,			nent income (Part VIII, column (A)				2,239	· · · · · ·
			evenue (Part VIII, column (A), line		-		106,090	,
			venue—add lines 8 through 11 (m	•			10,000,122	0
			and similar amounts paid (Part IX s paid to or for members (Part IX,					0
~			, other compensation, employee I				1,594,679	
Sec			ional fundraising fees (Part IX, col				1,354,075	0
Expenses			draising expenses (Part IX, column (D),					
Ξ			xpenses (Part IX, column (A), line				9,061,429	9,844,489
			penses Add lines 13–17 (must ed				10,656,108	· · ·
	19	Revenu	e less expenses Subtract line 18	from line 12			30,014	-24,331
Σŝ						Beginning	of Current Year	End of Year
anc								
Ass. Bal			sets (Part X, line 16)				4,434,473	· · · ·
Net Assets or Fund Balances			bilities (Part X, line 26)				3,509,331	· · · · ·
			ets or fund balances Subtract line	21 from line 20 .			925,142	902,182
Par Under			nature Block perjury, I declare that I have exa	mined this return, inclu	10			
knowl	edge	e and bel	ief, it is true, correct, and complet					
any k	nowl	edge			-			
		* * * *	**					
Sign		Signa	ature of officer					
Here		DANI	EL ACHESON CEO					
			or print name and title					
		<u> </u>	Print/Type preparer's name	Preparer's signature				
Paic			EDWARD M HAYES	EDWARD M HAYES				
Pre	bar	er	Firm's name KLESMAN & COMPAN					
Use	On	nly	Firm's address ► 7110 W 127TH STRE					
		-	PALOS HEIGHTS, IL	60463				

		,	
1av the IRS discus	e this return M	with the preparer	shown above? (se

 Firm's address ► 7110 W 127TH STREET SUITE 230

 PALOS HEIGHTS, IL 60463

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

 For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (20	16)				Page 2
Par	: IIII	Statement of Program Service Accon	plis	shments		
		Check if Schedule O contains a response or no	e to	any line in this Part III		🗆
1	Briefly	describe the organization's mission		· ·		
		INTERNATIONAL IS A NONPROFIT YOUTH OR ADERSHIP & GUIDANCE TO THESE CORPS, AS				HE WORLD DCI
2	Did the	organization undertake any significant program	n se	rvices during the year wh	ich were not listed on	
		or Form 990 or 990-EZ?		- /		🗌 Yes 🗹 No
	If "Yes	" describe these new services on Schedule O				
3		organization cease conducting, or make signif	cant	changes in how it conduc	cts, any program	
	service	s ⁷				🗌 Yes 🗹 No
	If "Yes	" describe these changes on Schedule O				
4	Section	e the organization's program service accomplie 501(c)(3) and 501(c)(4) organizations are rec es, and revenue, if any, for each program serv	luire	d to report the amount of		
4a	(Code) (Expenses \$ 6,796	.413	including grants of \$) (Revenue \$)
	•	ORP SHOWS TO PROVIDE DRUM CORPS COMPETITION				
4b	(Code) (Expenses \$ 78	,025	including grants of \$) (Revenue \$)
	VIDEO	PROJECTS,AUDIO RECORDINGS,PROGRAMS/YEARBOO	(S AN	ID SOUVENIRS SOLD TO PRO	MOTE DRUM CORPS ACTIVITIES	
4c	(Code		2,273) (Revenue \$)
	CONGR	ESS/SEMINAR EDUCATION DIVISION, JUDGES TRAINI	IG TO) PROVIDE EDUCATIONAL CLI	NICS AND WORKSHOPS FOR DRUM CORP	JUDGES
4d	Other	program services (Describe in Schedule O)				
	(Exper	ses \$ including gram	ts of	f \$) (Revenue \$)
4e	Total	orogram service expenses > 8,	255,	711		

Form	990 (2016)			Page 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 😏	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		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 I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 🛸	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?If "Yes," complete Schedule D, Part IV 🛸	9		No
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 \mathfrak{B}	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 🛸	11a	Yes	
	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> 🕏	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😒	11c		No
	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? <i>If "Yes," complete Schedule D, Part IX</i> 😒	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🛸	11e		No
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 \mathfrak{B}	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 😒	12a	Yes	
	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		No
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		No
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		No
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 ² If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		No
		F	orm 99	0 (2016)

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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		No
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		No
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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> " <i>Yes," answer lines 24b through 24d and complete Schedule K If</i> " <i>No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \ldots .	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I \cdot .	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
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	Yes	
		F	orm 99	0 (2016)

Form	990 (2016)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 205			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year?If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
11	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13a		
r	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments 2 <i>If "No," provide an explanation in Schedule O</i> .			
D	In res, has it lieu a form /20 to report these payments/Ir <i>ivo, provide an explanation in Schedule O</i> .	14b		

Form **990** (2016)

Form	990 (2016)			Page 6						
Par	t VI Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions		nse to li							
	Check if Schedule O contains a response or note to any line in this Part VI	• •		\checkmark						
Se	ction A. Governing Body and Management		Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 1a		res	NO						
	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 1b 3									
2	2		No							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No						
6	Did the organization have members or stockholders?	6		No						
-	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	-								
	members of the governing body?	7a 7b		No No						
8	persons other than the governing body?									
-	the following									
	The governing body?	8a 8b	Yes Yes							
	b Each committee with authority to act on behalf of the governing body?									
	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No						
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code								
		10	Yes	No						
	Did the organization have local chapters, branches, or affiliates?	10a		No						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes							
с	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done									
13										
14	Did the organization have a written whistleblower policy?	12c 13	Yes Yes							
	Did the organization have a written whistleblower policy? . <td></td> <td></td> <td></td>									
15		13	Yes							
	Did the organization have a written document retention and destruction policy?	13	Yes	No						
а	Did the organization have a written document retention and destruction policy? 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?	13 14	Yes	No						
а	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	13 14 15a	Yes							
a b	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	13 14 15a	Yes							
a b 16a	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	13 14 15a 15b	Yes	No						
a b 16a b Se	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	13 14 15a 15b 16a	Yes	No						
a b 16a b	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	13 14 15a 15b 16a	Yes	No						
a b 16a b Se	Did the organization have a written document retention and destruction policy?	13 14 15a 15b 16a	Yes	No						
a b 16a b <u>Se</u> 17	Did the organization have a written document retention and destruction policy?	13 14 15a 15b 16a	Yes	No						

State the name, address, and telephone number of the person who possesses the organization's books and records DRUM CORPS INTERNATIONAL INC 110 W WASHINGTON STREET SUITE C INDIANAPOLIS, IN 46204 (317) 275-1212 20

 \square

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or 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

(A) Name and Title	(B) Average hours per week (list any hours		ne bo	ox, ι n of	t ch unle: ficei	ss per r and a	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
(1) DANIEL ACHESON CEO	40 00	х		x				114,458	0	18,762	
(2) WAYNE LEIDE CFO	40 00	х		x				101,846	0	9,546	
(3) CHRIS KOMNICK VICE-CHAIRMA		х						0	0	0	
(4) FRED MORRISON CHAIRMAN-B O		х						0	0	0	
(5) KATHY BLACK AT-LARGE DIR		х						0	0	0	
(6) RICK VALENZUELA SECRETARY-B		х						0	0	0	
(7) DAVID GLASGOW REP-B O D		х						0	0	0	
(8) JOHN MASTERSON REP-B O D		х						0	0	0	
(9) FRAN KICK AT-LARGE DIR		х						0	0	0	
(10) JIM DOYLE TREASURER, A		х						0	0	0	
					-						
										Form 990 (2016)	

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Part VII Section A. Officers, Dire	ctors, Trustee	s, Key l	Empl	loye	es,	and I	High	nest Co	mpensate	ed Employees	(cont	inued)	
(A) Name and Title	(B) Average hours per week (list any hours	than c ıs b	one bo	ox, u n off	t che inles ficer	and a	on	Repo compo froi organiz	(D) (E) ortable ensation m the ration (W- organizations		on d (W-	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/109	9-MISC)	2/1099-MIS(organızatı relat organıza	ed
											\rightarrow		
1b Sub-Total	Part VII, Sectio	nA.	•	•		• •			216,304	L			28,308
2 Total number of individuals (includi of reportable compensation from th	ng but not limited	to thos			bove	∍) who	rece	eived mo	re than \$1	00,000			
												Yes	No
3 Did the organization list any forme line 1a? <i>If "Yes," complete Schedule</i>	e J for such indivi	dual .	•	•	•	• •	•	•••	• • •	• •	3		No
4 For any individual listed on line 1a, organization and related organization individual	ons greater than s									n the	4		No
5 Did any person listed on line 1a rec services rendered to the organization									tion or ind	vidual for	5		No
Section B. Independent Contra	ctors												
 Complete this table for your five high from the organization Report comp 											mpen	sation	
	(A) e and business addro									(B) ription of services		(C Comper	
DSM SPORTS MARKETING INC									MARKETING	•		·	160,158
3346 STONEBRIDGE TRAIL VALRICO, FL 33596													
THE ART DEPARTMENT INC									MARKETING				125,000
34 MILL STREET MOUNT HOLLY, NJ 08060													

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 2

Form	۵۵۸	(2016)
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Page 9	

	VIII Statement of Revenue	e									Page 9
	Check ıf Schedule O contaıı	ns a respo	onse or no	ote to any	(this Part VII (A) revenue	(Rela ex fur	(B) Inted or empt Inction renue	(C) Unrelated business revenue		(D) Revenue excluded from x under sections 512-514
	1a Federated campaigns	1a					100	cifue			512 514
ons, Gifts, Grants Similar Amounts	b Membership dues	1b									
0 20 0 0 0 0	c Fundraising events	1c									
fts.	d Related organizations	1d									
nila	e Government grants (contributions)	1e									
ıtions, er Sin	 f All other contributions, gifts, grant: and similar amounts not included above 	s, 1 f		387,902							
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contributions include in lines 1a-1f \$										
Contand	h Total.Add lines 1a-1f		<u> </u>	<u> </u>		387,902					
Яle			ļ	Business	Code						
Jeve	2a PROGRAM REVENUE				511120		850,906	10,850		60.924	
ب چ	b DCI 2016 YEARBOOK				511120		60,834			60,834	
rMC	c		F								
ъ З	d										
Iran	e f All other program service rever	nue									
Program Service Revenue	9Total. Add lines 2a-2f			10,9	911,740						
	3 Investment income (including di		interest a	and other	1						
	sımılar amounts)	• •		•		1,49	16				1,496
	4 Income from investment of tax-										
	5 Royalties		1	•							
	(I) R	lear	(11) P	ersonal	-						
	b Less rental expenses				-						
	c Rental income or				-						
	(loss)										
	d Net rental income or (loss) .	• •		►	ļ						
	(1) Sect 7a Gross amount from sales of assets other than inventory	urities	(11)	Other							
	b Less cost or other basis and sales expenses C Gain or (loss)				-						
	d Net gain or (loss)			•	1						
nue	8a Gross income from fundraising (not including \$ contributions reported on line 1	of .c)									
eve	See Part IV, line 18				-						
r R	b Less direct expenses c Net income or (loss) from fundi										
Other Revenue	9a Gross income from gaming acti See Part IV, line 19	-		• •	1						
		а			4						
	b Less direct expenses										
	c Net income or (loss) from gami 10aGross sales of inventory, less	ng activit	.ies	•	1						
	returns and allowances										
		а	Ĺ	1,676,964							
	b Less cost of goods sold	b		1,483,323		100.01					
	C Net income or (loss) from sales	of invent				193,64	.1				193,641
	Miscellaneous Revenue		Busine	ess Code	1						
	b										
					<u> </u>						
	c										
	d All other revenue	•									
	e Total. Add lines 11a–11d .		• •	•							
	12 Total revenue. See Instruction	ns		• •		11 404 77	· 0	10 950 000	60	934	105 107

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 response or note to any line in this Part IX (B) (C) Do not include amounts reported on lines 6b, (D) (A) Program service Management and 7b, 8b, 9b, and 10b of Part VIII. Total expenses Fundraisingexpenses general expenses expenses 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, line 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees . . 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) . 1,395,582 1,395,582 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . 107,604 107,604 9 Other employee benefits . . 171,435 171,435 10 Payroll taxes 11 Fees for services (non-employees) a Management 17.084 17.084 **b**Legal 15,891 15,891 c Accounting . . . d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees . . g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion . 85,719 85,719 13 Office expenses . . 14 Information technology . 15 Royalties . 123,049 123,049 16 Occupancy . 20,636 20,636 17 Travel . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 296,662 296,662 19 Conferences, conventions, and meetings 13,503 13,503 20 Interest 21 Payments to affiliates . . . 40,765 19,794 60,559 22 Depreciation, depletion, and amortization . 100,644 100,644 23 Insurance . 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a DCI SHOW EXPENSE 6,055,272 6,055,272 b JUDGES & PROGRAM STAFF 672,273 672,273 605,116 605,116 c BROADCAST & PRODUCTION 587,008 d DONOR EXPENSES 587,008 e All other expenses 1,191,073 585,623 605,450 11,519,110 8,255,711 3,263,399 25 Total functional expenses. Add lines 1 through 24e 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)

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Part X Balance Sheet

		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			104,418	1	160,646
	2	Savings and temporary cash investments .			146,673	2	204,149
	3	Pledges and grants receivable, net		. [3	
	4	Accounts receivable, net		[2,085,963	4	2,090,990
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa II of Schedule L Loans and other receivables from other disquali	ated er	nployees Complete Part		5	
S		section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L	8(c)(3)(B), and of section 501(c)(9)		6		
et	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use	· _	1,079,462	8	904,223	
	9	Prepaid expenses and deferred charges	•••	L	250,561	9	315,509
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,249,304			
	b	Less accumulated depreciation	10 b	1,030,372	220,420	10 c	218,932
	11	Investments—publicly traded securities .			22,063	11	
	12	Investments—other securities See Part IV, line		18,886	12		
	13	Investments—program-related See Part IV, line		13			
	14	Intangible assets		1,955	14	1,816	
	15	Other assets See Part IV, line 11		504,072	15	509,072	
	16	Total assets.Add lines 1 through 15 (must equ			4,434,473	16	4,405,337
	17	Accounts payable and accrued expenses		740,658	17	806,069	
	18	Grants payable	-		18		
	19	Deferred revenue	2,334,285	19	2,697,086		
	20	Tax-exempt bond liabilities		_,,	20	_,,	
	21	Escrow or custodial account liability Complete F				21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee	office	rs, directors, trustees,		21	
ā		persons Complete Part II of Schedule L .	o, ana	aisquainea		22	
Ë	23	Secured mortgages and notes payable to unrela	ted th	rd parties		23	
	24	Unsecured notes and loans payable to unrelated		· –	434,388	23	
		. ,		· –			
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17-24) Complete Part X of Schedule D		s to related third parties,		25	
	26	Total liabilities.Add lines 17 through 25 .			3,509,331	26	3,503,155
Fund Balances	27	Organizations that follow SFAS 117 (ASC 9 complete lines 27 through 29, and lines 33 Unrestricted net assets			843,148	27	817,793
ta le	28	Temporarily restricted net assets			15,142	28	17,532
ЧE	29	Permanently restricted net assets			66,852	29	66,857
ū		Organizations that do not follow SFAS 117	(ASC)	958)			
or	30	check here ► □ and complete lines 30 th Capital stock or trust principal, or current funds	•		30		
ets	31	Paid-in or capital surplus, or land, building or ec		nt fund		31	
Assets	32	Retained earnings, endowment, accumulated in	• •			32	
	33	Total net assets or fund balances			925,142	33	902,182
Net	33 34				4,434,473	33	4,405,337
	54	Total liabilities and net assets/fund balances .	•		4,404,473	54	4,405,337

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Par	t XI Reconcilliation 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		11	,494,779
2	Total expenses (must equal Part IX, column (A), line 25)	2		11	,519,110
3	Revenue less expenses Subtract line 2 from line 1	3			-24,331
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $$. $$.	4			925,142
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			1,371
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			902,182
Par	t 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 🗹 Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If `Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule C)		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	Зa		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ıred	Зb		

Additional Data

Software ID: Software Version:

EIN: 36-2754480

Name: DRUM CORPS INTERNATIONAL INC



efil	e GR/	APHIC pri	nt - DO NC	T PROCESS	As Filed Data -			DLN: 9	3493178008187
	m 99	ULE A 0 or	Cor		Charity Statu rganization is a secti 4947(a)(1) nonexe ▶ Attach to Form S	ion 501(c)(3) o mpt charitable	organization or trust.		2016
		the Treasury	► Inf	ormation abou	It Schedule A (Form www.irs.ad	990 or 990-EZ ov/form990.) and its instru	ictions is at	Open to Public Inspection
Nam	e of th	he organiza			<u></u>			Employer identific	ation number
DICON	CORTS	INTERNATION						36-2754480	
	rt I				us (All organizations at is (For lines 1 thro			See instructions.	
1			•		sociation of churches			(A)(i)	
2									
3					1)(A)(ii). (Attach Sch				
					vice organization descr			-	a ha a hisa da a a a da Ula
4			esearch orga and state _		ed in conjunction with	a hospital descri	bed in section	170(B)(1)(A)(III). E	nter the hospital's
5			ation operate (iv). (Compl		t of a college or univer	sity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or loca	l government or	governmental unit de	scribed in sectic	on 170(b)(1)(A	A)(v).	
7				rmally receives ((vi). (Complete	a substantial part of its Part II)	s support from a	governmental u	unit or from the gener	al public described in
8				• • • •	170(b)(1)(A)(vi) (Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter t				ege or university or a
10	V	from activit	nes related to income and	o its exempt fun unrelated busin	(1) more than 331/3% ctions—subject to cert ess taxable income (le implete Part III)	ain exceptions, a	and (2) no more	than 331/3% of its su	
11					exclusively to test for	- public safety S	ee section 509	(a)(4).	
12		more public	ly supported	l organizations o	l exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(a	
а		organizatio	n(s) the pow		ated, supervised, or co appoint or elect a majo				
b		manageme	nt of the sup		ervised or controlled ir ation vested in the san and C.				
С					supporting organization ons) You must com				ted with, its
d		functionally	integrated	The organizatio	 d. A supporting organi n generally must satisf t IV, Sections A and 	fy a distribution i	requirement and		
е		Check this	box if the or	ganization receiv	ved a written determin	ation from the I		ире I, ⊤уре II, ⊤уре II	I functionally
f	Enter			non-functionally d organizations	integrated supporting	organization			
g				2	pported organization(s)			
(i)N		f supported o	-	(ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(in Is the organiz your governir	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		

Total

P	art II Support Schedule for (Drganizations	Described in S	ections 170(b)(1)(A)(iv) an	d 170(b)(1)(A)(vi)		
	(Complete only if you che						fy under Part		
	III. If the organization fails to qualify under the tests listed below, please complete Part III.)								
3	ection A. Public Support Calendar year								
	(or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total		
1	Gifts, grants, contributions, and								
	membership fees received (Do not include any "unusual grant ")								
2	Tax revenues levied for the								
-	organization's benefit and either paid								
-	to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to								
	the organization without charge								
	Total. Add lines 1 through 3								
5	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								
6	shown on line 11, column (f) Public support. Subtract line 5 from								
<u> </u>	line 4								
S	ection B. Total Support			-	-				
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total		
7	(or fiscal year beginning in) ► Amounts from line 4								
8	Gross income from interest,								
-	dividends, payments received on								
	securities loans, rents, royalties and								
9	income from similar sources Net income from unrelated business								
-	activities, whether or not the								
	business is regularly carried on								
10	Other income Do not include gain or loss from the sale of capital assets								
	(Explain in Part VI)								
11	Total support. Add lines 7 through								
12	10 Gross receipts from related activities, e	tc (see instructio	ns)			12			
	First five years. If the Form 990 is fo			urd fourth or fifth	tax year as a sec				
	check this box and stop here	-			•]		
	ection C. Computation of Public						J		
	Public support percentage for 2016 (lin			column (f))		14			
	Public support percentage for 2015 Sch					15			
	33 1/3% support test-2016. If the			on line 13 and lin	e 14 is 33 1/3% o		hox		
104	and stop here. The organization qualit					i more, eneer ene			
h	33 1/3% support test-2015. If the				and line 15 is 33 1	/3% or more, chec			
-	box and stop here. The organization								
17a	10%-facts-and-circumstances test	•		-	ne 13, 16a, or 16b	, and line 14			
	is 10% or more, and if the organization								
	In Part VI how the organization meets	the facts-and-cire	cumstances test	The organization (qualifies as a publi	iciy supported	• □		
	organization 10%-facts-and-circumstances tes	+	rearization did not	t chack a bay on l	no 12 165 166 /	ar 17a and line			
D	15 is 10% or more, and if the organiz								
	Explain in Part VI how the organizatio								
	supported organization								
18	Private foundation. If the organization	on did not check a	box on line 13, 1	6a, 16b, 17a, or 1	7b, check this box	and see			
	instructions								

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 t	o qualify under t	ne tests listed b	elow, please co	mplete Part II.)			
5	ection A. Public Support Calendar year	T	T	T				
	(or fiscal year beginning in)	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 20	16	(f)Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual grants ")	357,499	502,574	366,960	384,069		387,902	1,999,004
2	Gross receipts from admissions,							
_	merchandise sold or services							
	performed, or facilities furnished in	8,668,435	8,821,292	9,142,157	10,092,525	10,	850,906	47,575,315
	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	1,490,216	1,608,146	1,581,998	987,958	1,	676,964	7,345,282
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							
6	Total. Add lines 1 through 5	10,516,150	10,932,012	11,091,115	11,464,552	12,	915,772	56,919,601
7a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
Ь	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							FC 010 C01
	from line 6)							56,919,601
S	ection B. Total Support							
	Calendar year (or fiscal year beginning in) ►	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 20	16	(f)Total
9		10,516,150	10,932,012	11,091,115	11,464,552	12,	915,772	56,919,601
10a								
	dividends, payments received on	2.052	5 4 4 5	50	2 220		1 105	12 705
	securities loans, rents, royalties and income from similar sources	3,853	5,145	52	2,239		1,496	12,785
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30,							
	1975							
с	Add lines 10a and 10b	3,853	5,145	52	2,239		1,496	12,785
11	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							
13	assets (Explain in Part VI) Total support. (Add lines 9, 10c,	10 500 005	10 007 15-		44.455.70			FC 000 005
10	11, and 12)	10,520,003	10,937,157	11,091,167	11,466,791		917,268	56,932,386
14	First five years. If the Form 990 is f	or the organization	's first, second, thi	rd, fourth, or fifth	n tax year as a sec	tion 501(c)(3) org	anızatıon,
	check this box and stop here							
-	ection C. Computation of Public Public support percentage for 2016 (I			olumn (f))		45		
15	Public support percentage for 2010 (if Public support percentage from 2015	, , ,	, ,			15		99 980 %
16	ection D. Computation of Invest		-			16		99 980 %
17	Investment income percentage for 20			ne 13. column (f))	17		0 %
18	Investment income percentage from 2					17		0 %
	331/3% support tests—2016. If the			n line 14 and line	e 15 is more than		and line	
	more than 33 1/3%, check this box and						ana me	
	33 1/3% support tests—2015. If the						n 33 1/39	
	not more than 33 1/3%, check this bo							
20	Private foundation. If the organizat	-	-					▶ □
	Finate foundation. If the organizat	ion did not check a	150X ON MIE 14, 15					990-EZ) 2016

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain			
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described	1		
	In section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5), or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the determination			
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	Зb		
Ľ	If "Yes," explain in Part VI what controls the organizations was used exclusively for section 170(c)(2)(B) purposes?	3c		
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			
Ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported	4a		
U	the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported nization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4			
с	Did the organization support any foreign supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support	10		
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (w) how the action was accomplished (such as by	5a		
Ь	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		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
Ь	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting	98		
2	organization had an interest? If "Yes," provide detail in Part VI.	9 b		
с	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.			
10~	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding	9c		
100	certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below	10-		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether	10a		
U	the organization had excess business holdings)	10b		

Schedule A (Form 990 or 990-EZ) 2016

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the а governing body of a supported organization?
- b A family member of a person described in (a) above?
- 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 С

Section B. Type I Supporting Organizations

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint o elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa **VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)</i>			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		

Section E. Type III Functionally-Integrated Supporting Organizations

Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) 1

The organization satisfied the Activities Test Complete line 2 below

3

- b The organization is the parent of each of its supported organizations Complete line 3 below
- The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions) С

2 Activities Test Answer (a) and (b) below. Yes No a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities 2a **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement 2b Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of 3a the supported organizations? Provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard

Schedule A (Form 990 or 990-EZ) 2016

3b

	Yes	No
11a		
11b		
11 c		

		Yes	No
or			
or art			
	1		
	2		

Yes

1

No

Т

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income

- 1 Net short-term capital gain
- 2 Recoveries of prior-year distributions
- з Other gross income (see instructions)
- Add lines 1 through 3 4
- 5 Depreciation and depletion
- 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)

7	Other	expenses	(see instructions)	
	Other	CAPCINGCO .	(See maduucions)	

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)

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	

- a Average monthly value of securities
- **b** Average monthly cash balances
- c Fair market value of other non-exempt-use assets

Section B - Minimum Asset Amount

- d Total (add lines 1a, 1b, and 1c)
- e Discount claimed for blockage or other factors (explain in detail in Part VI)
- 2 Acquisition indebtedness applicable to non-exempt use assets
- Subtract line 2 from line 1d 3
- Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions)
- 5 Net value of non-exempt-use assets (subtract line 4 from line 3)
- 6 Multiply line 5 by 035
- 7 Recoveries of prior-year distributions
- 8 Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

- 1 Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- з Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- Distributable Amount. Subtract line 5 from line 4, unless subject to emergency 6 temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

	(A) Prior Year	(B) Current Year (optional)
1		
2		
3		
4		
5		
6		
7		
8		

(B) Current Year

(optional)

(A) Prior Year

1a

1b

1c 1d

2

3

4

5

6

7 8

Schedule A (Form 990 or 990-EZ) 2016

			Fage 7	
Part V Type III Non-Functionally Integrate	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)			
Section D - Distributions			Current Year	
1 Amounts paid to supported organizations to accompli	sh exempt purposes			
 Amounts paid to perform activity that directly further excess of income from activity 	s exempt purposes of supported	organizations, in		
3 Administrative expenses paid to accomplish exempt p	ourposes of supported organizat	ions		
4 Amounts paid to acquire exempt-use assets				
5 Qualified set-aside amounts (prior IRS approval requi	red)			
6 Other distributions (describe in Part VI) See instructi	ons			
7 Total annual distributions. Add lines 1 through 6				
8 Distributions to attentive supported organizations to details in Part VI) See instructions	which the organization is respor	isive (provide		
9 Distributable amount for 2016 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount				
	1	1	1	
Section E - Distribution Allocations (see	(i)	(ii)	(iii)	

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 requiredsee instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7			
\$			
 Applied to underdistributions of prior years 			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Page **8**

Part VI 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).

Facts And Circumstances Test

Schedule & (Form 000 or 000-E7) 2016

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data -				DL	N: 934931	
	HEDULE D m 990)	Supple	mental Fina	ncial State	ments				1545-0047
> 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. 2 Department of the Treasury > Attach to Form 990. Open						Open)16 to Public		
	al Revenue Service me of the organ	1	D (Form 990) and	its instructions i	s at <u>www.ii</u>			ntification n	Dection
	JM CORPS INTERNA								umber
Pa	rt I Organi	zations Maintaining Donor	Advised Funds	or Other Simila	ar Funds o		754480 ounts.		
		te if the organization answere	ed "Yes" on Form	990, Part IV, line					
1	Total number	at end of year	(a) Donor ad	lvised funds		(b)	Funds and	l other accour	nts
2		ue of contributions to (during							
	year)								
3		ue of grants from (during year)							
4		ue at end of year			<u> </u>				
5	Did the organiza funds are the or	ation inform all donors and donor rganization's property, subject to	advisors in writing the organization's ex	hat the assets held (clusive legal contr	l in donor ad ol?	vised		□ Ye	es 🗆 N
6	used only for ch	ation inform all grantees, donors, iaritable purposes and not for the rmissible private benefit?					rpose	□ Ye	_
Pa	rt III Conser	vation Easements. Comple	te if the organizati	ion answered "Y	es" on Forn	n 990	, Part IV,	, line 7.	
1		onservation easements held by th							
	_	on of land for public use (e g , red	creation or education	_				ortant land ar	ea
		of natural habitat		L Preser	vation of a c	ertified	1 historic :	structure	
2		on of open space	hold a gualified cone	onuction contribut	on in the fer			tion	
2		2a through 2d if the organization e last day of the tax year	neid a quaimed cons	ervation contribut	ion in the for	mora		t the End of	the Year
а		conservation easements				2a			
b	-	stricted by conservation easemer		-1		2b			
c d		ervation easements on a certified ervation easements included in (c			historic	2c 2d			
u	structure listed i	n the National Register	, ,		l				
3	Number of cons tax year ►	ervation easements modified, tra	nsferred, released, e	extinguished, or ter	minated by	the or <u>c</u>	anization	during the	
4	Number of state	es where property subject to cons	ervation easement is	s located ►					
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?								
6	Staff and volunt ▶	teer hours devoted to monitoring,	inspecting, handling	g of violations, and	enforcing co	onserva	ition ease	ments during	the year
7	▶\$	nses incurred in monitoring, insp			-			s during the y	/ear
8	Does each cons and section 170	ervation easement reported on lir i(h)(4)(B)(ii)?	ne 2(d) above satisfy	the requirements	of section 1	70(h)(4	∔)(B)(ı)	🗌 Yes	□ No
9	balance sheet, a	scribe how the organization repor and include, if applicable, the text n's accounting for conservation ea	of the footnote to th						
Par		zations Maintaining Collect te if the organization answere				er Sir	nilar As	sets.	
1a	art, historical tr provide, in Part	ion elected, as permitted under S easures, or other similar assets h XIII, the text of the footnote to il	eld for public exhibit ts financial statemen	ion, education, or ts that describes t	research in f hese items	urthera	ance of pu	iblic service,	
Ь	historical treasu	ion elected, as permitted under S ires, or other similar assets held f nts relating to these items							
(i) Revenue incluc	led on Form 990, Part VIII, line 1					▶\$		
(i	i)Assets included	ın Form 990, Part X					►\$		
2	following amour	ion received or held works of art, hts required to be reported under				ncıal g	ain, provid	de the	
а		ed on Form 990, Part VIII, line 1					►\$		
b	Assets included	ın Form 990, Part X					▶ \$		

For Paperwork Reduction	Act Notice, see th	ne Instructions for Form 990.

Cat No 52283D Schedule D (Form 990) 2016

Schedule D (Form 990) 2016

e Other

Sche	dule D (Form 990) 2016								Page 2
Par	t IIII Organizations Maintaining	Collections of	of Art, Histori	cal Tr	easures	s, or Other	Similar A	ssets (cont	inued)
3	Using the organization's acquisition, acces items (check all that apply)	sion, and other	records, check	any of	the follow	ing that are a	sıgnıfıcant	use of its coll	ection
а	Public exhibition		d		Loan or e	exchange prog	grams		
b	Scholarly research		е		Other				
С	Preservation for future generations								
4	Provide a description of the organization's Part XIII	collections and	l explain how the	ey furth	ier the org	ganization's e:	xempt purp	ose in	
5	During the year, did the organization solic assets to be sold to raise funds rather tha						nılar	🗌 Yes	
Pa	TEAL Escrow and Custodial Arran Complete if the organization a X, line 21.		" on Form 990	, Part	IV, line s	9, or reporte	ed an amo	unt on Forn	ו 990, Part
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?	odian or other	intermediary for	contril	outions or	other assets	not	🗌 Yes	
b	If "Yes," explain the arrangement in Part	XIII and comple	ete the following	table				Amount	
с	Beginning balance		-			1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount of	n Form 990, Pa	rt X, line 21, for	escrow	or custoo	dial account lia	ability?	🗌 Yes	
b	If "Yes," explain the arrangement in Part								
Pa	rt V Endowment Funds. Complet								
1-	Perinning of your belance	(a)Currer	it year (b)Pi	rior yea	· (c)T	wo years back	(d)Three ye	ars back (e)	Four years back
	Beginning of year balance								
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
	Other expenditures for facilities and programs								
	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the c	urrent year end	l balance (line 1	g, colu	nn (a)) he	eld as			
а	Board designated or quasi-endowment 🕨								
b	Permanent endowment 🕨								
С	Temporarily restricted endowment >								
3a	The percentages on lines 2a, 2b, and 2c s Are there endowment funds not in the pos	•		t are h	eld and ac	lministered fo	r the		
	organization by (i) unrelated organizations							3a(i)	Yes No
	(ii) related organizations							3a(ii)	
b	If "Yes" on 3a(11), are the related organiza				· · ·			. 3b	
4	Describe in Part XIII the intended uses of		n's endowment f	unds					
Pa	rt VI Land, Buildings, and Equipe Complete if the organization a		on Form 990.	Part 1	V, line 1	1a. See For	m 990 <i>.</i> Pa	rt X, line 10).
	Description of property (a) Cost of	r other basis stment)	(b)Cost or other			:)Accumulated c			ook value
1a	Land								
	Buildings								
	Leasehold improvements			2	2,941		4,249		18,692
	Equipment			1,22	6,363		1,026,123		200,240
								<u></u>	

Schedule D (Form 990) 2016

218,932

	Form 990) 2016 Investments—Other Securities. Complete if the o	organization ans	wered 'Yes' on Fo	Page 3 rm 990, Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c)Method of valuation • end-of-year market value
		· · ·		end-ol-year market value
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII	Investments—Program Related. Complete if the See Form 990, Part X, line 13.	organization ar	iswered 'Yes' on F	orm 990, Part IV, line 11c.
	(a) Description of investment	(b) Book value) Method of valuation • end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX	Other Assets. Complete if the organization answered 'Ye (a) Description	s' on Form 990, P	art IV, line 11d See	(b) Book value
(1) COLLECT (2) COLLECT				400,000 53,110
(3) COLLECT (4) COLLECT				28,970 20,750
(5) TRADEM				6,242
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colui Part X	mn (b) must equal Form 990, Part X, col (B) line 15) . Other Liabilities. Complete if the organization answ	vered 'Yes' on F		. ► 509,072 line 11e or 11f.
1.	See Form 990, Part X, line 25. (a) Description of liability		Book value	
(1) Federal II				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

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

Sche	dule D (Form 990) 2016		Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, III		
1	Total revenue, gains, and other support per audited financial statements	1 1	11,494,779
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
Ь	Donated services and use of facilities	1	
с	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	11,494,779
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	1	
с	Add lines 4a and 4b	4 c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	11,494,779
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Expe Complete if the organization answered 'Yes' on Form 990, Part IV, III		
1	Total expenses and losses per audited financial statements	1	11,517,739
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
с	Other losses	1	
d	Other (Describe in Part XIII)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	11,517,739
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
с	Add lines 4a and 4b	4c	1,371
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	11,519,110

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Addıtıonal Data Table	

Schedule D (Form 990) 2015

Page **5**

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version: EIN: 36-2754480 Name: DRUM CORPS INTERNATIONAL INC

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XII, LINE 4B	BOOK / TAX DEPRECIATION DIFFERENCE 1,371

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 9349317				-N: 9349317800818
SCHEDULE O Form 990 or 990- EZ)	Complete to pro Form 990 ¢ ► Information abou	ovide information for resp or 990-EZ or to provide an ▶ Attach to Form 990	or 990-EZ. r 990-EZ) and its instructions is at	OMB No 1545-004 2016 Open to Public Inspection
ntemal Revenue Service I lame of the organization RUM CORPS INTERNATIONA			Employer ide	entification number
			36-2754480	
990 Schedule O, Su	oplemental Informatio	n		
Return		Evol	anation	

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	A PDF VERSION OF THE DRAFT OF FORM 990 IS PROVIDED TO ALL BOARD MEMBERS FOR THEIR REVIEW

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	EVERY OFFICER, DIRECTOR, AND ALL EMPLOYEES ARE REQUIRED TO FILL OUT AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE THAT IS MONITORED AND REVIEWED BY THE AUDIT COMMITTEE

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

Return Reference	Explanation
FORM 990, PART IX, LINE 24E	BANK & CREDIT CARD CHARGE 0 388,569 0 ADVERTISING & PROMOTION 364,348 0 0 FAN NETWORK EXPE NSES 181,909 0 0 TELEPHONE & INTERNET 39,366 118,099 0 SUPPLIES 0 49,830 0 POSTAGE 0 19,27 9 0 EQUIPMENT RENTAL & MAINT 0 11,282 0 BAD DEBT EXPENSE 0 10,000 0 DUES & SUBSCRIPTIONS 0 7,673 0 OTHER EXPENSES 0 718 0 TOTAL 585,623 605,450 0

Return Reference	Explanation
FORM 990, PART XI, LINE 9	BOOK / TAX DEPRECIATION DIFFERENCE 1,371