		** PUBLIC DISCLOSURE COPY	ζ**		
F	Q	Q Return of Organization Exempt Fro			OMB No. 1545-0047
Forr (Rev		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Codurary 2020) Do not enter social security numbers on this form as it			
Depa	rtment	Do not enter social security numbers on this form as in mue Service Go to www.irs.gov/Form990 for instructions and the	-	Open to Public Inspection	
_				UN 30, 2020	mepeetien
	heck if oplicab		<u> </u>	D Employer identifica	ation number
	Addre	INTERFAITH PEACE BUILDERS			
	Name Chang			03-059818	4
	Initial return		n/suite	E Telephone number	
	Final		n, ouno	202-244-0	821
	termin	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	415,745.
	Amer returr	ded WASHINGTON, DC 20056-3798		H(a) Is this a group ret	um
	Appli tion			for subordinates?	Yes X No
	pend	SAME AS C ABOVE		H(b) Are all subordinates inc	luded? Yes No
		empt status: 🗴 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1) or	527	If "No," attach a li	st. (see instructions)
		te: WWW.EYEWITNESSPALESTINE.ORG		H(c) Group exemption	
			L Year	of formation: 2008 M	State of legal domicile: DC
Ра	rt I	Summary	. T m T		
e	1	Briefly describe the organization's mission or most significant activities: INTERFA BUSINESS AS EYEWITNESS PALESTINE, IS A TRAN	AT J.H	DMARTONAL FL	MICATION
Activities & Governance	•				
veri		Check this box I if the organization discontinued its operations or disposed of			sets. 13
Ğ	3	Number of voting members of the governing body (Part VI, line 1a)	13		
8	4	Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2019 (Part V, line 2a)			4
itie	5 6	Total number of volunteers (estimate if necessary)			20
ctiv		Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ă		Net unrelated business taxable income from Form 990-T, line 39			0.
	~		<u> </u>	Prior Year	Current Year
ð	8	Contributions and grants (Part VIII, line 1h)		303,218.	248,372.
Revenue	9	Program service revenue (Part VIII, line 2g)		314,084.	150,930.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		189.	139.
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	16,304.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		617,491.	415,745.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	厂	28,150.	27,450.
		Benefits paid to or for members (Part IX, column (A), line 4)	🖵	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		298,710.	227,229.
ens		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	🖵	0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25)		212 200	100 000
-		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		313,280. 640,140.	180,208.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-22,649.	<u>434,887.</u> -19,142.
- S	19	Revenue less expenses. Subtract line 18 from line 12			-
ets o ance	20	Tatel assats (Dart V. line 16)		ginning of Current Year 93,137.	End of Year 139,555.
Asse Bali	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		51,086.	116,646.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		42,051.	22,909.
	rt II	Signature Block		,0010	
		alties of perjury, I declare that I have examined this return, including accompanying schedules and	statem	ents, and to the best of mv	knowledge and belief. it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which p			J,,,
,					

Sign Here	Signature of officer NADA EL-ERYAN, MANAGIN Type or print name and title	IG DIRECTOR	Date						
	Print/Type preparer's name	Preparer's Signature Millen							
Paid	GLENN MILLER, CPA	/ Jem Mitten							
Preparer	Firm's name 🕨 WEGNER CPAS, LLP		Firm's EIN ▶ 39-0974031						
Use Only	Firm's address 💊 419 N LEE ST								
	ALEXANDRIA, VA 2	2314-2301	Phone no. 703-519-0990						
May the IF	May the IRS discuss this return with the preparer shown above? (see instructions)								
932001 01-2	932001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2019)								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	1990 (2019) INTERFAITH PEACE BUILDERS	03-0598184	Page 2
Pa	rt III Statement of Program Service Accomplishments		0
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly describe the organization's mission: INTERFAITH PEACE BUILDERS, DOING BUSINESS AS EYEWITNES A TRANSFORMATIONAL EDUCATION PROGRAM THAT INSPIRES AND PARTICIPANTS TO BE ACCOUNTABLE LIFELONG SOCIAL JUSTICE	TRAINS	
	THE PALESTINE SOLIDARITY MOVEMENT AND WITHIN THEIR OWN	COMMUNITIES.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	Yes	XNo
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services If "Yes," describe these changes on Schedule O.	s? Yes	XNo
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by expense:	s.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to or revenue, if any, for each program service reported.		
4a	(Code:)(Expenses \$ 158,044. including grants of \$ 27,450.) (Rev DELEGATION PROGRAM - ORGANIZED 2 DELEGATIONS ON TWO-WE TRIPS TO PALESTINE AND ISRAEL. DELEGATIONS EMPHASIZED ISRAELI AND PALESTINIAN GRASSROOTS AND ADVOCATES WHO L	EK EDUCATIONA MEETINGS WITH	
	ISKALLI AND FALLSTINIAN GRASSROOIS AND ADVOCATES WHO I		
4b	(Code:) (Expenses \$ 127,404. including grants of \$ 0.) (Rev EDUCATION AND ADVOCACY PROGRAM - EMPHASIZED CONTINUED AND EDUCATIONAL ACTIVITIES TO ENSURE THE DELEGATION EX A BUILDING BLOCK TOWARDS GREATER COMMUNITY INVOLVEMENT	CIVIC ENGAGEM PERIENCE BECO	MES
	THIS PROGRAM RESULTED IN HUNDREDS OF MEDIA ACTIVITIES		
	DELEGATES, INCLUDING ARTICLES, RADIO AND TELEVISION BR MORE. HUNDREDS OF PUBLIC PRESENTATIONS WERE ALSO MADE		
	AUDIENCES.		
4c	(Code:) (Expenses \$ including grants of \$) (Rev	/enue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 285,448.		
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Form	990	(2019)	

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	-		v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		x	
-	during the tax year? If "Yes," complete Schedule C, Part II	4	~	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		x
e	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
U	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	•		
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-		x
h	Schedule D, Parts XI and XII	12a		
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
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	. 14		<u> </u>
~	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	
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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			- v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	000	
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Form 990 (
Part IV	Ch	ecklist of Required Schedule	es (continue	d)

	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		v	[
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	-
	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 Schodula</i> , <i>I</i>	23		x
24a	Schedule J 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> "Yes," <i>answer lines 24b through 24d and complete</i>	23		
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
	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? <i>If "Yes," complete Schedule L, Part I</i>	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
	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, key employee, creator or founder, or substantial contributor? If	280		x
h	"Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?/f "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</i> "Yes," <i>complete Schedule M</i>	30		x
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		x
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		x
	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		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 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		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	x	
Par				
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	5		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

Form 990	(2019)	INTERFAITH PEACE BUILDERS
Part V	Stat	ements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return 2a 4					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X		
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X		
	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	•		v		
	any contributions that were not tax deductible as charitable contributions?	6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	C 1-				
-	were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section $170(c)$.	7-		x		
a h	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 7b				
u o	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70				
С	to file Form 8282?	7c		x		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10				
u o	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76 7f		x		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h						
8						
	sponsoring organization have excess business holdings at any time during the year?					
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12 10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b					
11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders 11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10				
а	Is the organization licensed to issue qualified health plans in more than one state?	13a				
h	Note: See the instructions for additional information the organization must report on Schedule O.					
D	Enter the amount of reserves the organization is required to maintain by the states in which the					
~	organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 13c					
		14a		Х		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or					
	excess parachute payment(s) during the year?	15		x		
	If "Yes," see instructions and file Form 4720, Schedule N.			_		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х		
	If "Yes," complete Form 4720, Schedule O.	-				

Form **990** (2019)

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Form	990	(2019))
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INTERFAITH PEACE BUILDERS

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 on Schedule O. See instructions.

Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body are independent in the governing body are independent in the governing body are governing documents since the prior Form 500 was filed? 2 3 3 3 4 4 5		Check if Schedule O contains a response or note to any line in this Part VI						
a Enter the number of voting members of the governing body at the end of the tax year	Sec	tion A. Governing Body and Management					т	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad suthority to an executive committee, esplain on Schedule 0. Image: Ima			1.1	1 2		Yes	┥	
bit delegated based autority to an executive committle or similar committle, explain on Subduile 0. 13 b Enter the number of volting members included on time 1a, above, who are independent! 13 b Enter the number of volting members included on time 1a, above, who are independent! 13 b Enter the number of volting members included on time 1a, above, who are independent! 2 b Enter the numbers of volting members included on time 1a, above, who are independent? 2 b Enter the numbers of volting members included on time 1a, above, who are independent? 3 b Enter the numbers of the governing body? 4 b Enter the numbers of the governing body? 7a b Are any other numbers of the governing body? 7a b Each committee with authority to act on behalf of the governing body? 8a b Each committee with authority to act on behalf of the governing body? 8a b Each committee with authority to act on behalf of the governing body? 8a b Each committee with authority to act on behalf of the governing body? 8a b Each committee with authority to act on behalf of the governing body? 8a b Each committee with authority to act on behalf of the governing body? 8a b Each committee with authority to act on behalf of the governing body? 8a c Each commit	1a		1a					
b Energy diffect, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management during the granization and the direct supervision of officer, directors, trustees, or key employees to a management during new percent of a significant diversion of the organization assests? Did the organization base members or stockholders? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members, stockholders? Did the organization have members, stockholders? Did the organization have members, stockholders? Did the organization assests? So Did the organization and the organization reserved to (or subject to approval by) members, stockholders, or Ta parsons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Did the organization assests? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Did the organization status written policies and procedures governing body? 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 to review this form 900. 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 to review and approval by independent parsons of the growing to doy? 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 torganized more during the activities of s								
Did ary officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustees, or key employees to a management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management duties customarily performed by or under the direct supervision of directs, directors, trustees, or key employees to the governing documents since the pror Form 90 was filed? 3 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 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 D Are any governance duciations of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8a Did the organization to componeneesly document the meetings held or written actions underlaten during the year by the tollowing: a the governing body? 8a Did the organization have boal on the neares and adversess on Schedule 0 9 Out no organization have local chapters, branches, or affiliates? 10 D Id the organization have victary on the construction and provide to ensure their operations are consistent with the organization reserve the policy? 14a D Id the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization reserve the policy? 14a D Id the organization have a written conflict of interest policy? 1				1 2				
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Part VII	Compensation of Officers,	Directors,	Trustees,	Key E	Employees,	Highest	Compensate	ec
	Employees, and Independe	ent Contra	ctors					

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

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.

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• 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.

See instructions for the order in which to list the persons above.

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

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(12) TOM HIER3.00X0.0.0.MEMBER AT LARGEX0.0.0.0.0.(13) CECILIE SURASKY3.00X0.0.0.0.MEMBER AT LARGEX0.0.0.0.0.(14) NADA EL-ERYAN40.000000.	(11) KATIE HUERTER	3.00									
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(13) CECILIE SURASKY 3.00 X 0.0.0.0. MEMBER AT LARGE X 0.0.0.0. 0.0.0. (14) NADA EL-ERYAN 40.00 0.0.0. 0.0.0.	(12) TOM HIER	3.00									
MEMBER AT LARGE X 0.	MEMBER AT LARGE		Х						0.	0.	0.
(14) NADA EL-ERYAN 40.00	(13) CECILIE SURASKY	3.00									
	MEMBER AT LARGE		Х						0.	0.	0.
MANAGING DIRETOR X 68,000. 0. 6,889.	(14) NADA EL-ERYAN	40.00									
	MANAGING DIRETOR				Х				68,000.	0.	6,889.

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2019.05094 INTERFAITH PEACE BUILDERS

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	990 (2019) INTERFAIT									03-0	598	184	Pa	age 8
Par	t VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C						
	(A) Name and title	(B) Average hours per week (list any	box offic	not c , unle	(C Posi heck r ss per id a di	ition ^{more} rson i	than (is botl	h an	(D) Reportable compensation from	(E) Reportable compensatio from related	on d	an	(F) stimate nount other	of
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Offlicer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fr org and	pensa rom the anizat d relat anizatie	e ion ed
1b	Subtotal								68,000.		0.		6,8	89.
d	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A			· · · · · · · ·		 		0.68,000.		0.		6,8	0. 89.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed an		e) wr	10 r	eceived more than \$100	1,000 of reportab			Yes	0 No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>	uch individual										3		X
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	0,000? If "Yes,	" со	mple	ete S	Sche	edule	ə J f	for such individual		1	4		X
<u> </u>	rendered to the organization? If "Yes," com	plete Schedule	e J f	or su	uch p	pers	son .					5		Х
1	tion B. Independent Contractors Complete this table for your five highest co the organization. Report compensation for										npens	ation f	from	
	(A) Name and business			ONE					(B) Description of s		С	(C compe	C) nsatio	n
								_						
								-						
2	Total number of independent contractors (in \$100,000 of compensation from the organiz	-	ot lii	nite	d to	tho: (se lís)	stec	a above) who received m	nore than		Form	990 (2	2019)

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			Check if Schedule O	conta	ains a respo	nse	or note to any lir				
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts nts	1	а	Federated campaigns		1a						
contributions, Gitts, Grants and Other Similar Amounts			Membership dues								
Αn.		С	Fundraising events								
ilar			Related organizations								
Sing			Government grants (contr								
			All other contributions, gifts,				240 272				
5 5 5			similar amounts not included				248,372.				
n pu		•	Noncash contributions included in					248,372.			
<u>ه ر</u>		n	Total. Add lines 1a-1f				Business Code	240,372.			
D	2	а	EDUCATIONAL D	ET.	EGATTO	N	611710	150,930.	150,930.		
	_	a b					011/10	100,000	1007000		
nue		c									
eve		d									
Program Service Revenue		e									
Ē			All other program service	reve	nue						
			Total. Add lines 2a-2f				►	150,930.			
	3		Investment income (includ								
			other similar amounts)				►	139.			139.
	4		Income from investment of	of tax	k-exempt bo	nd p	roceeds				
	5		Royalties				►				
					(i) Real		(ii) Personal				
	6	а	Gross rents	6a							
			Less: rental expenses	6b							
			Rental income or (loss)	6c							
	_		Net rental income or (loss)							
	7		Gross amount from sales of	L	(i) Securiti	es	(ii) Other				
			assets other than inventory	7a							
ē			Less: cost or other basis	76							
Revenue				7b 7c							
Sev.			Gain or (loss)								
ъ	8		Gross income from fundraisi			<u> </u>					
Ğ	0		including \$	ig ov	of of						
			contributions reported on	line							
			Part IV, line 18		-	8a					
			Less: direct expenses			8b					
			Net income or (loss) from			ts	►				
	9	а	Gross income from gamin	g ac	tivities. See						
			Part IV, line 19			9a					
		b	Less: direct expenses			9b					
		с	Net income or (loss) from	gam	ing activities	<u> </u>	>				
	10		Gross sales of inventory,								
			and allowances			10a					
			Less: cost of goods sold			10b					
		С	Net income or (loss) from	sales	s of inventor	у					
sn			OBUED THOONE				Business Code	16 204			16 004
miscellaneous Revenue	11		OTHER INCOME				900099	16,284.			16,284.
Ven		b									
Be		C					900099	20.			20.
ž			All other revenue					16,304.			20.
			Total. Add lines 11a-11d Total revenue. See instruction					415,745.	150,930.	0.	16,443.
	12										

INTERFAITH PEACE BUILDERS

Form 990 (2019)

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03-0598184 Page 9

INTERFAITH PEACE BUILDERS Part IX Statement of Functional Expenses

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

Do r	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
7b, 8	3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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	27,450.	27,450.		
2	individuals. See Part IV, line 22	27,430.	27,430.		
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,				
Ū	trustees, and key employees	74,770.	33,647.	11,215.	29,908
6	Compensation not included above to disqualified				
-	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	120,658.	88,080.	9,351.	23,227
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	14,956.	10,918.	1,159.	2,879
10	Payroll taxes	16,845.	12,297.	1,305.	3,243
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	7,017.		7,017.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	04 700	17 000	C 000	
	column (A) amount, list line 11g expenses on Sch 0.)	24,728.	17,928.	6,800.	100
12	Advertising and promotion	1,190.	1,045. 382.	9,902.	120
13	Office expenses	22,952. 10,210.	367.	-	12,668
14	Information technology	10,210.	507.	9,843.	
15	Royalties	18,018.	1,546.	16,472.	
16	Occupancy	80,107.	79,522.	585.	
17 10	Travel Payments of travel or entertainment expenses	00,107.	15,522.	505.	
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,939.	12,236.	1,403.	300
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,850.		1,850.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	, , ,, , ,, , , , , , , , , , , , , , , , , , , ,				
b					
с					
d					
е	All other expenses	197.	30.	167.	
25	Total functional expenses. Add lines 1 through 24e	434,887.	285,448.	77,094.	72,345
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (201

932010 01-20-20

10480510 788028 13455.3TX01 2019.05094 INTERFAITH PEACE BUILDERS

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Form **990** (2019)

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Form 990 (2019)

Assets

_iabilities

Net Assets or Fund Balances

Part X Balance Sheet

10480510 788028 13455.3TX01 2019.05094 INTERFAITH PEACE BUILDERS

Total liabilities and net assets/fund balances ...

INTERFAITH PEACE BUILDERS

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

(A) (B) End of year Beginning of year 65,852. 67,656. Cash - non-interest-bearing 1 1 23,892. 73,465. 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 4 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 6 Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 7 8 Inventories for sale or use 8 238. 1,589. Prepaid expenses and deferred charges 9 9 **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D _____ 10a b Less: accumulated depreciation _____ 10b 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 93,137. 139,555. 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 1,974. 4,931. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 49,112. 63,627. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 23 48,088. 0. 24 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 25 of Schedule D 51,086. 116,646. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🔀 and complete lines 27, 28, 32, and 33. 42,051. 22,909. Net assets without donor restrictions 27 27 Net assets with donor restrictions 28 28 Organizations that do not follow FASB ASC 958, check here 🕨 🗌 and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 42,051. 22,909. Total net assets or fund balances 32 32 93,137. 139,555. 33

Form 990 (2019)

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Form	1990 (2019) INTERFAITH PEACE BUILDERS	03-059	8184	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			45.
2	Total expenses (must equal Part IX, column (A), line 25)	2			87.
3	Revenue less expenses. Subtract line 2 from line 1	3			42.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	42	2,0	51.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	22	2,9	09.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			37
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	200	L

Form **990** (2019)

932012 01-20-20

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form	990	or	990-	EZ)
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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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Employer identification number

Name of the	organization
-------------	--------------

			ACE BUILDERS					3-0598184		
Part I	Reason for Public (Charity Status	(All organizations must co	mplete th	is part.) S	ee instructions	š.			
The organ	nization is not a private found	lation because it is:	(For lines 1 through 12, c	heck only	one box.)					
1	A church, convention of ch	urches, or associat	ion of churches described	d in sectio	on 170(b)(1)(A)(i).				
2	A school described in section	ion 170(b)(1)(A)(ii).	(Attach Schedule E (Forn	n 990 or 9	90-EZ).)					
3 🛄	A hospital or a cooperative	hospital service or	ganization described in se	ction 170)(b)(1)(A)(i	ii).				
4	A medical research organiz	ation operated in co	onjunction with a hospital	describe	d in sectic	on 170(b)(1)(A)	(iii). Enter	the hospital's name,		
	city, and state:									
5 📖	An organization operated for		ollege or university owned	d or opera	ted by a g	jovernmental ι	init descrik	oed in		
-	section 170(b)(1)(A)(iv). (C									
6	A federal, state, or local gov									
7 📖	An organization that norma		antial part of its support f	rom a gov	rnmenta	l unit or from t	ne general	public described in		
•	section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8 📖 9 🛄	A community trust describe	-			od in coni	inction with a	land grant	collogo		
9 📖	or university or a non-land-				-		-	-		
	university:	grant college of agri			marne, cit	y, and state of	the coneg			
10 X	An organization that norma	Ilv receives: (1) mor	e than 33 1/3% of its sur	port from	contributi	ons members	hin fees	and gross receipts from		
	activities related to its exen									
	income and unrelated busir									
	See section 509(a)(2). (Cor		, , , , , , , , , , , , , , , , , , ,		•	,	0	,		
11 🗌	An organization organized a	and operated exclu	sively to test for public sa	fety. See	section 5	09(a)(4).				
12	An organization organized a	and operated exclu	sively for the benefit of, to	perform	the function	ons of, or to ca	arry out the	e purposes of one or		
	more publicly supported or	ganizations describ	ed in section 509(a)(1) o	r section	509(a)(2).	See section 5	5 09(a)(3). (Check the box in		
_	lines 12a through 12d that	describes the type	of supporting organizatio	n and con	nplete line	s 12e, 12f, and	։ 12g.			
a	Type I. A supporting orga	anization operated,	supervised, or controlled	by its sup	ported or	ganization(s), 1	ypically by	/ giving		
	the supported organization			a majority	of the dire	ectors or truste	es of the s	supporting		
	organization. You must o	-								
b 🗆	Type II. A supporting org	-				-		-		
	control or management o		-	ame perso	ons that c	ontrol or mana	ge the sup	oported		
a [organization(s). You mus Type III functionally inte	-		in connoc	tion with	and functions	lly intograt	od with		
ι∟	its supported organization		• •				iy integrat	eu with,		
d 🗌	Type III non-functionally						ted organ	ization(s)		
u	that is not functionally int	• •					•			
	requirement (see instruct			-		-				
e	Check this box if the orga						II, Type III			
	functionally integrated, or	r Type III non-functi	onally integrated support	ng organi	zation.					
f Ent	er the number of supported o	organizations								
	vide the following information							-		
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your govern	anization listed ing document?	(v) Amount of	,	(vi) Amount of other		
	organization		above (see instructions))	Yes	No	support (see in		support (see instructions)		
								1		
Total										
	Paperwork Reduction Act N	lotice, see the Inst	ructions for Form 990 o	r 990-EZ.	932021 09	-25-19 Sched	Jule A (For	rm 990 or 990-EZ) 2019		
			13	}						

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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 shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruct	ions)	•	•	12	
13	First five years. If the Form 990 is for	the organization'				on 501(c)(3)	
	organization, check this box and stop						
Se	ction C. Computation of Publi	ic Support Pe	ercentage				
14	Public support percentage for 2019 (li	ine 6, column (f) c	divided by line 11,	column (f))		14	%
15	Public support percentage from 2018	Schedule A, Part	t II, line 14			15	%
16 a	1 33 1/3% support test - 2019. If the o	organization did no	ot check the box o	on line 13, and line	e 14 is 33 1/3% or i	more, check this be	ox and
	stop here. The organization qualifies						
b	33 1/3% support test - 2018. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	% or more, check t	his box
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test	t - 2019. If the orc	ganization did not	check a box on lin	ne 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstar	nces" test, check t	this box and stop	here. Explain in Pa	art VI how the orga	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	a publicly supporte	ed organization		▶□
b	10% -facts-and-circumstances test	t - 2018. If the orç	ganization did not	check a box on lin	ne 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circu	umstances" test, o	check this box and	l stop here. Explai	n in Part VI how the	e
	organization meets the "facts-and-circ	umstances" test.	. The organization	qualifies as a pub	licly supported org	anization	▶□
18	Private foundation. If the organization	<u>n did not check a</u>	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box	and see instructior	ns ►
					Sch	edule A (Form 990) or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 INTERFAITH PEACE BUILDERS

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support ndar year (or fiscal year beginning in) ►	(2) 2015	(b) 2016	(a) 2017	(4) 2019	(a) 2010	
	Gifts, grants, contributions, and	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	membership fees received. (Do not						
		220,123.	345,846.	248,623.	303,218.	248,372.	1366182.
,	include any "unusual grants.") Gross receipts from admissions,	220,123.	545,040.	4-0,045.	505,210.		
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	318,651.	236,865.	231,825.	314 084.	150,930.	1252355.
	•	510,051.	230,003.	231,023.	514,004.	130,330.	1252555
5	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						1
~	the organization without charge	538,774.	582,711.	480,448.	617,302.	399,302.	2618537.
	Total. Add lines 1 through 5	550,114.	JUZ,/II.	400,440.	011,302.	555,302.	2010J3/.
r a	Amounts included on lines 1, 2, and	20,259.	22,155.	25,268.	58,489.	41,417.	167,588.
F	3 received from disqualified persons	40,409.	44,100.	43,400.	50,409.	<u>+</u> +,4+/•	<u> </u>
D	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the				66,231.		66,231.
	amount on line 13 for the year	20,259.	22,155.	25,268.	124,720.	41,417.	
	Add lines 7a and 7b	20,239.	22,133.	25,200.	124,720.	41,41/0	2384718.
	Public support. (Subtract line 7c from line 6.)						2304710.
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	538,774.	582,711.	480,448.	617,302.	399,302.	2618537.
	Gross income from interest,						
00	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources	758.	445.	369.	87.	139.	1,798.
h	Unrelated business taxable income	7301	113.		07.	135.	1,150.
L.	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
		758.	445.	369.	87.	139.	1,798.
	Add lines 10a and 10b Net income from unrelated business	, 50.			07.		<u> </u>
•	activities not included in line 10b,						
	whether or not the business is						1
2	regularly carried on Other income. Do not include gain						
-	or loss from the sale of capital					16,304.	16,304.
。	assets (Explain in Part VI.)	539,532.	583 156	480,817.	617 380		
	Total support. (Add lines 9, 10c, 11, and 12.)	-	-	-	-		
F	First five years. If the Form 990 is for	the organization's			-		zation, ⊾
	check this box and stop here	ic Support Po					
	Public support percentage for 2019 (I		-	colump (fl)		15	90.45 %
5 6	Public support percentage from 2018		-			16	91.58 %
	ction D. Computation of Invest					10	J1•50 %
	•			no 12 oclumn (f)		47	.07 %
-	Investment income percentage for 20					17	
8 0 -	Investment income percentage from 2						,-
чa	33 1/3% support tests - 2019. If the	-					
	more than 33 1/3%, check this box at						
b	33 1/3% support tests - 2018. If the	-					
~	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check th			
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Schedule A (Form 990 or 990-EZ) 2019 INTERFAITH PEACE BUILDERS

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2019

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

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Yes

No

Schedule A (Form 990 or 990 EZ) 2019 INTERFAITH PEACE BUILDERS Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	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		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations	-		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		100	110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	•		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	
•	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</i> Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	~		
5	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeafsee instructions).			
	The organization satisfied the Activities Test. Complete line 2 below.			
a b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
b	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	.)	
c 2		uctions	y. Yes	No
2	Activities Test. Answer (a) and (b) below.		162	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	0-		
h	· · · · · · · · · · · · · · · · · · ·	2a		
D	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	04		
~	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
a	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01-		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		0040
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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 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount	•	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	v integrate	d Type III supporting or	anization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
_1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
<u> i</u>	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
-	Excess from 2017			
	Excess from 2018			
e	Excess from 2019			(Fauna 000 au 000 FZ) 0040

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Part VI	Supplemental Information. Pro Part IV, Section A, lines 1, 2, 3b, 3c, 4b line 1; Part IV, Section D, lines 2 and 3; Section D, lines 5, 6, and 8; and Part V,	, 4c, 5a, 6, 9a, 9b, 9 Part IV, Section E, li	c, 11a, 11b, and 11c; Part nes 1c, 2a, 2b, 3a, and 3b	IV, Section B, lines 1 and 2; P ; Part V, line 1; Part V, Section	art IV, Section C, B, line 1e; Part V,
	(See instructions.)			-	
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Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Employer identification number

03-0598184

Organization type (check o	ne):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

INTERFAITH PEACE BUILDERS

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year **>** \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

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03-0598184

INTERFAITH PEACE BUILDERS

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$7,724.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$8,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
923452 11-06	⁵⁻¹⁹ 22	Schedule B (Form	990, 990-EZ, or 990-PF) (2019

2019.05094 INTERFAITH PEACE BUILDERS

10480510 788028 13455.3TX01

Employer identification number

03 - 0598184

INTERFAITH PEACE BUILDERS

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>NO.</u>	Name, address, and ZiP + 4		
8		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$7,700.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 12</u>		\$5,400.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
923452 11-06-	-19 • 2 3	Schedule B (Form	990, 990-EZ, or 990-PF) (2019)

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Page 2
Employer identification number

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INTERFAITH PEACE BUILDERS

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$5,150.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	i	\$5,062.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Payroll Payroll Payroll Part II for noncash contributions.)
923452 11-06	24	Schedule B (Form	990, 990-EZ, or 990-PF) (2019

2019.05094 INTERFAITH PEACE BUILDERS 13455_31

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Employer identification number

03 - 0598184

INTERFAITH PEACE BUILDERS

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
23453 11-06-19		\$	990, 990-EZ, or 990-PF

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ame of or	ganization		Employer identification numb
NTERF	FAITH PEACE BUILDERS		03-0598184
Part III		a) through (e) and the following line en charitable, etc., contributions of \$1,000 o	n section 501(c)(7), (8), or (10) that total more than \$1,000 for the
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F		(e) Transfer of gi	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
a) No.			
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—			
	Transferee's name, address, a	(e) Transfer of gi	lift Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
 _		(e) Transfer of gi	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-		(e) Transfer of gi	
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
3454 11-06-			Schedule B (Form 990, 990-EZ, or 990-PF) (2

SCHEDULE C	Po	olitical Campaign a	and Lobbyin	g Activities	OMB No. 1545-0047
(Form 990 or 990-EZ)		anizations Exempt From Incom	-	-	2019
		if the organization is described			
Department of the Treasury Internal Revenue Service	-	to www.irs.gov/Form990 for i			C. Open to Public Inspection
		Form 990, Part IV, line 3, or Fo			
-	-	plete Parts I-A and B. Do not con		ne 40 (Pontical Campaign /	activities), then
	-	01(c)(3)) organizations: Complete	•	/ Do not complete Part I-B	
 Section 527 organization 		· · · · · ·		. Do not complete r art r D.	
0		Form 990, Part IV, line 4, or Fo	rm 990-EZ, Part VI, li	ine 47 (Lobbying Activities), then
-		have filed Form 5768 (election un			
 Section 501(c)(3) or 	ganizations that	have NOT filed Form 5768 (election	on under section 501(h)): Complete Part II-B. Do n	ot complete Part II-A.
If the organization ans	wered "Yes," or	n Form 990, Part IV, line 5 (Proxy	7 Tax) (see separate i	instructions) or Form 990-	EZ, Part V, line 35c (Proxy
Tax) (see separate inst	ructions), then				
), or (6) organiza	tions: Complete Part III.			
Name of organization			~	Emplo	over identification number
Dort I A Compl		ITH PEACE BUILDER		or is a section 507 of	03-0598184
Part I-A Comple	ete if the org	anization is exempt unde	er section 501(c)	or is a section 527 of	ganization.
		ation's direct and indirect politica			
		ures			
3 Volunteer hours for	political campai	gn activities			
Part I-B Comple	ete if the orc	anization is exempt unde	er section 501(c)	(3).	
		incurred by the organization unde			
		incurred by organization manage			
		n 4955 tax, did it file Form 4720 f			Yes No
b If "Yes," describe in	n Part IV.				
Part I-C Comple	ete if the org	anization is exempt unde	er section 501(c)	, except section 501(c)(3).
		d by the filing organization for sec			
		ization's funds contributed to oth	er organizations for s		
exempt function ac					
•	•	. Add lines 1 and 2. Enter here ar			
		1120-POL for this year?			
		tion listed, enter the amount paid			
	-	omptly and directly delivered to a			
	•	additional space is needed, provi		· · · ·	5 5
(a) Name	9	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
()			(-) =	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization.
					If none, enter -0

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

932041 11-26-19

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Schedule C (Form 990 or 990-EZ) 2019

	t II-A Complete if the organization	on is exempt under section 501(c)(3) and file	ed Form 5768 (el	ection under
I U	section 501(h)).			
A C	neck 🕨 🛄 if the filing organization belong	gs to an affiliated group (and list in Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and share of exces	s lobbying expenditures).		
B C	neck 🕨 🔲 if the filing organization check	ed box A and "limited control" provisions apply.		
	Limits on Lobb	oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence pub	lic opinion (grassroots lobbying)	0.	
b	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	0.	
с	Total lobbying expenditures (add lines 1a and	d 1b)	0.	
d			434,887.	
е	Total exempt purpose expenditures (add line	s 1c and 1d)	434,887.	
f	Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.	86,977.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% o	f line 1f)	21,744.	
h	Subtract line 1g from line 1a. If zero or less, e	nter -0-	0.	
i	Subtract line 1f from line 1c. If zero or less, et	nter -0-	0.	
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720		

reporting section 4911 tax for this year?

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total					
2a Lobbying nontaxable amount	113,510.	104,244.	118,184.	86,977.	422,915.					
b Lobbying ceiling amount (150% of line 2a, column(e))					634,373.					
c Total lobbying expenditures	896.		1,500.		2,396.					
d Grassroots nontaxable amount	28,378.	26,061.	29,546.	21,744.	105,729.					
e Grassroots ceiling amount (150% of line 2d, column (e))					158,594.					
f Grassroots lobbying expenditures	896.		1,500.		2,396.					

Schedule C (Form 990 or 990-EZ) 2019

Yes

🗌 No

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Schedule C (Form 990 or 990-EZ) 2019 INTERFAITH PEACE BUILDERS

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Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)
of the	lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ection	
				Yes	Νο
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section	• •			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part	III-A, lin	e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total		-		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?				
5	Taxable amount of lobbying and political expenditures (see instructions)				
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	A, lines 1 a	and 2 (see	
instru	ctions); and Part II-B, line 1. Also, complete this part for any additional information.				

Schedule C (Form 990 or 990-EZ) 2019

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			Attach to Form 990.								
Department of the Treasury Internal Revenue Service	► Go to	www.irs.gov/Fo	P Attach to Form 990.	t information.		Open Inspe	to Public ction				
Name of the organizatio		-				identifi	cation number				
						0010					
INTERFAITH P					03-05						
		Activities Ou	tside the United States. Compl	ete if the orgar	nization answ	vered "Y	'es" on				
	Part IV, line 14b.				! . 4						
-	1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?										
2 For grantmakers	. Describe in Part V the	e organization's	procedures for monitoring the use of it	ts grants and o	ther assista	nce outs	side the				
United States.											
	·		an be duplicated if additional space is			())	(0.7.1.1				
(a) Region	(b) Number of offices	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro-		vity listed in gram service		(f) Total expenditures				
	in the region	agents, and independent	gram services, investments, grants to		e specific ty		for and				
	and the segret	contractors in the region	recipients located in the region)		(s) in the reg		investments in the region				
MIDDLE EAST AND											
NORTH AFRICA -											
ALGERIA, BAHRAIN,											
DJIBOUTI, EGYPT	C	0	PROGRAM SERVICES	EDUCATIONAI	L TRIPS		84,622.				
				1							
	1										

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

2019

Schedule F (Form 990) 2019

3 a	Subtotal	0	0		84,622.
b	Total from continuation				
	sheets to Part I	0	0		٥.
с	Totals (add lines 3a				
	and 3b)	0	0		84 622.

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

932071 10-12-19

SCHEDULE F (Form 990)

10480510 788028 13455.3TX01 2019.05094 INTERFAITH PEACE BUILDERS 13455_31

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INTERFAITH PEACE BUILDERS

Page 2

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			I recognized as charities by the					
			tion 501(c)(3) equivalency lett			►		

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019

INTERFAITH PEACE BUILDERS

03-0598184

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2019

	Foreign Form	ne	_	
Schedule F	(Form 990) 2019	INTERFAITH	PEACE	BUILDERS

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund</i> (see <i>Instructions for Form 8621</i>)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2019

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

932075 10-12-19					Schoo	dule F (Form 990) 2019

SCHEDU (Form 99												
Internal Reve	enue Service		Go to www.ir	s.gov/Form990 fo	or the latest inform	nation.		Inspection				
Name of t	the organization	H PEACE E	UILDERS					Employer identification number $03 - 0598184$				
Part I	General Information on Grants a	nd Assistance										
	es the organization maintain records eria used to award the grants or assi		e amount of the grants					ction X Yes No				
-	cribe in Part IV the organization's pr	ocedures for moni	toring the use of grant	funds in the Unite	ed States.							
Part II	Grants and Other Assistance to	Domestic Organi	zations and Domesti	c Governments.	Complete if the org	anization answered "\	es" on Form 990, Par	t IV, line 21, for any				
	recipient that received more than	\$5,000. Part II can	be duplicated if addit	ional space is nee	ded.		1					
1 (a)	Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance				
	er total number of section 501(c)(3) a er total number of other organization							│ 				
	r Paperwork Reduction Act Notice							Schedule I (Form 990) (2019)				

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CHOLARSHIPS	24	27,450.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

DELEGATES SEEKING SCHOLARSHIPS MUST REQUEST AN APPLICATION FORM ON THEIR

DELEGATION APPLICATION, THEN COMPLETE THE ONLINE FORM. ONCE AN APPLICATION

IS RECEIVED, THE ORGANIZATION ASSESSES THE APPLICATION USING AN INTERNAL

CHECKLIST BASED ON MERIT AND NEED. DELEGATES WHO IDENTIFY AS PALESTINIAN

MAY APPLY FOR THE RETURN IS A RIGHT SCHOLARSHIP. THE ORGANIZATION TYPICALLY

AWARDS \$250-\$500 PER SCHOLARSHIP APPLICANT.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

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

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Employer identification number 03 - 0598184

INTERFAITH PEACE BUILDERS

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROGRAM THAT INSPIRES AND TRAINS PARTICIPANTS TO BE ACCOUNTABLE

LIFELONG SOCIAL JUSTICE ADVOCATES IN THE PALESTINE SOLIDARITY MOVEMENT

AND WITHIN THEIR OWN COMMUNITIES.

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

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

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

BOARD OF DIRECTORS.

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

EACH BOARD MEMBERS SIGNS A CONFLICT OF INTEREST STATEMENT ANNUALLY,

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

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

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

POTENTIAL CONFLICTS OF INTEREST.

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

COMPENSATION FOR ALL EMPLOYEES, INCLUDING THE MANAGING DIRECTOR, IS

REVIEWED BY THE PERSONNEL COMMITTEE AND IS BASED ON A REVIEW OF NON-PROFIT

SALARY SURVEYS AND PERFORMANCE.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2019)

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