

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

OMB No. 1545-0047

**2016**

Open to Public Inspection

**A** For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <div style="border: 1px solid black; padding: 2px;">ALLIANCE DEFENDING FREEDOM</div> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <div style="border: 1px solid black; padding: 2px;">15100 N 90TH ST</div> City or town, state or province, country, and ZIP or foreign postal code <div style="border: 1px solid black; padding: 2px;">SCOTTSDALE, AZ 85260</div> <b>F</b> Name and address of principal officer: <b>MICHAEL P. FARRIS</b> <div style="border: 1px solid black; padding: 2px;">SAME AS C ABOVE</div>	<b>D</b> Employer identification number <div style="border: 1px solid black; padding: 2px;">54-1660459</div> <b>E</b> Telephone number <div style="border: 1px solid black; padding: 2px;">480-444-0020</div> <b>G</b> Gross receipts \$ <b>55,669,426.</b> <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.ALLIANCEDEFENDINGFREEDOM.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1993</b> <b>M</b> State of legal domicile: <b>VA</b>

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>ADF IS COMMITTED TO TRANSFORMING LAW AND CULTURE SO TRUE FREEDOM CAN FLOURISH.</b>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>12</b>
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>12</b>
<b>5</b>	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	<b>5</b>	<b>293</b>
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>689</b>
<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>
<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>8</b>	<b>50,007,910.</b>
<b>9</b>	Program service revenue (Part VIII, line 2g)	<b>9</b>	<b>50,199,237.</b>
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>10</b>	<b>0.</b>
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>11</b>	<b>52,122.</b>
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>12</b>	<b>1,477,659.</b>
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>13</b>	<b>883,081.</b>
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>14</b>	<b>51,537,691.</b>
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>15</b>	<b>7,623,451.</b>
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>16a</b>	<b>3,350,128.</b>
<b>17</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>8,389,104.</b>	<b>17</b>	<b>0.</b>
<b>18</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>18</b>	<b>23,651,174.</b>
<b>19</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>19</b>	<b>23,917,255.</b>
<b>20</b>	Revenue less expenses. Subtract line 18 from line 12	<b>20</b>	<b>2,461,012.</b>
<b>21</b>		<b>21</b>	<b>23,910,768.</b>
<b>22</b>		<b>22</b>	<b>20,238,686.</b>
<b>23</b>		<b>23</b>	<b>57,646,405.</b>
<b>24</b>		<b>24</b>	<b>50,304,647.</b>
<b>25</b>		<b>25</b>	<b>-6,108,714.</b>
<b>26</b>		<b>26</b>	<b>869,305.</b>
<b>27</b>		<b>27</b>	<b>32,795,628.</b>
<b>28</b>		<b>28</b>	<b>34,851,845.</b>
<b>29</b>		<b>29</b>	<b>4,638,805.</b>
<b>30</b>		<b>30</b>	<b>5,255,737.</b>
<b>31</b>		<b>31</b>	<b>28,156,823.</b>
<b>32</b>		<b>32</b>	<b>29,596,108.</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <div style="border: 1px solid black; padding: 2px;">WAYNE SWINDLER, EXEC VP OF FINANCE &amp; ADMIN</div> Type or print name and title	Date	
<b>Paid</b>	Print/Type preparer's name <b>JACQUELINE ECKMAN</b>	Preparer's signature 	Date <b>5/15/18</b>
<b>Preparer</b>	Firm's name ▶ <b>CLIFTONLARSONALLEN LLP</b>	Firm's EIN ▶ <b>41-0746749</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P01300648</b>
<b>Use Only</b>	Firm's address ▶ <b>20 E. THOMAS RD, STE. 2300 PHOENIX, AZ 85012</b>	Phone no. <b>602-266-2248</b>	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:

TO KEEP THE DOORS OPEN FOR THE GOSPEL BY ADVOCATING FOR RELIGIOUS  
FREEDOM, SANCTITY OF LIFE, AND MARRIAGE AND THE FAMILY.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 15,151,719. including grants of \$ 0. ) (Revenue \$ 0. )

LEGAL ADVOCACY: ALLIANCE DEFENDING FREEDOM (ADF) IS AN ALLIANCE-BUILDING LEGAL ORGANIZATION THAT ADVOCATES FOR THE RIGHT OF PEOPLE TO FREELY LIVE OUT THEIR FAITH. ADF CHAMPIONS GOD-GIVEN FREEDOMS THAT ALLOW FOR HUMAN FLOURISHING WHILE AFFIRMING THE DIGNITY OF EVERY PERSON. ADF EXISTS TO FACILITATE AN ALLIANCE OF LIKE-MINDED INFLUENCERS FROM EVERY SPHERE OF THE PUBLIC SQUARE AFFECTING LAW AND CULTURE, AND TO MOBILIZE THIS ALLIANCE TO PROTECT THE CORE VALUES OF RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND MARRIAGE AND FAMILY. ADF OFFERS EXCEPTIONAL LEGAL ADVOCACY AND EXPERTISE THROUGH OUR 62 ATTORNEYS BASED OUT OF ADF HEADQUARTERS IN ARIZONA, AS WELL AS OFFICES IN GEORGIA, WASHINGTON D.C., AND AROUND THE WORLD. TOGETHER WITH A NETWORK OF 3,200-STRONG ALLIED ATTORNEYS, ADF HAS A NEARLY 80% SUCCESS RATE IN OUR

**4b** (Code: ) (Expenses \$ 11,407,438. including grants of \$ 0. ) (Revenue \$ 0. )

PUBLIC EDUCATION: ADF PROVIDES INFORMATION TO THE PUBLIC REGARDING THE IMPORTANCE OF GOVERNMENT RECOGNITION OF FREEDOM OF RELIGION, THE SANCTITY OF EVERY HUMAN LIFE, AND THE VALUES OF MARRIAGE AND FAMILY IN THE UNITED STATES AND THROUGHOUT THE WORLD. THIS IS DONE THROUGH THE USE OF PRINTED MATERIALS, MAILINGS, EMAIL ALERTS, WEBSITES, BLOGS, OP-EDS, SOCIAL MEDIA, WEBINARS, MEDIA AND PERSONAL APPEARANCES, AND EVENTS.

THE INTENT OF ADF PUBLIC EDUCATION IS TO INFORM AND RAISE AWARENESS OF THE FOLLOWING: THE INTENT OF THE FOUNDERS OF THE CONSTITUTION OF THE UNITED STATES AND THE BILL OF RIGHTS TO REFLECT NATURAL LAW; ENTITIES THAT SEEK TO DISTORT OR REPURPOSE THE CONSTITUTION'S ORIGINAL MEANING;

**4c** (Code: ) (Expenses \$ 7,585,466. including grants of \$ 1,221,839. ) (Revenue \$ 0. )

ALLIED SUPPORT AND TRAINING: AS AN ALLIANCE-BUILDING LEGAL ORGANIZATION THAT ADVOCATES FOR THE RIGHT OF PEOPLE TO FREELY LIVE OUT THEIR FAITH, ALLIANCE DEFENDING FREEDOM (ADF) IS COMMITTED TO EQUIPPING ALLIES TO DEFEND AND PROMOTE RELIGIOUS LIBERTY TO THE BEST OF THEIR ABILITY, AND TO TRANSFORM LAW AND CULTURE SO TRUE FREEDOM CAN FLOURISH. TO THIS END, ADF OFFERS WORLD-CLASS TRAINING FOR CHRISTIAN ATTORNEYS AND PROFESSIONALS, FOR LAW STUDENTS, AND FOR COLLEGE STUDENTS INTERESTED IN PURSUING A CAREER IN LAW, PUBLIC POLICY, GOVERNMENT, BUSINESS, AND OTHER CULTURE-SHAPING FIELDS.

THROUGH THE ADF SUMMIT ON RELIGIOUS LIBERTY, PRACTICING ATTORNEYS, LEGAL ADVOCATES, BUSINESS LEADERS, ENTREPRENEURS, CLERGY, POLICY

**4d** Other program services (Describe in Schedule O.)

(Expenses \$ 3,231,979. including grants of \$ 2,128,289. ) (Revenue \$ 0. )

**4e** Total program service expenses **37,376,602.**

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**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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		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	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
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	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	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	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	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	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		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		X

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**Part IV Checklist of Required Schedules** (continued)

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

Note. All Form 990 filers are required to complete Schedule O

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

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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

☒**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	12													
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.														
b Enter the number of voting members included in line 1a, above, who are independent		12												
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2											X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?				3										X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?					4									X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						5								X
6 Did the organization have members or stockholders?							6							X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								7a						X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?									7b					X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										8a			X	
b Each committee with authority to act on behalf of the governing body?											8b			X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O												9		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	10a	10b	11a	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?														X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?														
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			11a	X										
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.														
12a Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	X									
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?					12b	X								
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done						12c	X							
13 Did the organization have a written whistleblower policy?							13	X						
14 Did the organization have a written document retention and destruction policy?								14	X					
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?														
a The organization's CEO, Executive Director, or top management official									15a	X				
b Other officers or key employees of the organization										15b	X			
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).														
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?											16a			X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?												16b		

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed **AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MI**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **WAYNE SWINDLER - 480-444-0020**  
**15100 N. 90TH STREET, SCOTTSDALE, AZ 85260**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TERRY SCHLOSSBERG BOARD CHAIRMAN	8.00 0.00	X		X				0.	0.	0.
(2) TOM MINNERY BOARD VICE CHAIRMAN	2.00 0.00	X		X				0.	0.	0.
(3) RICHARD KORPAN BOARD TREASURER	5.00 1.00	X		X				0.	0.	0.
(4) MARK MADDOUX BOARD SECRETARY	5.00 0.00	X		X				0.	0.	0.
(5) ALFONSO AGUILAR BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(6) MARJORIE DANNENFELSER BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(7) DONNA ECTON BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(8) ALLEN M GINSBORG BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(9) SETH MORGAN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(10) CHARLES W. PICKERING, SR. BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(11) JOHN ROGERS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(12) RUTH ROSS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(13) MICHAEL FARRIS PRESIDENT, CEO, GENERAL COUNSEL	60.00 1.00			X				11,538.	0.	0.
(14) ALAN SEARS PRESIDENT, CEO, GEN. COUNSEL/FOUNDER	60.00 1.00			X				405,080.	0.	33,499.
(15) WAYNE SWINDLER EVP FINANCE & ADMINISTRATION	55.00 0.00			X				227,177.	0.	31,176.
(16) TONY JOHNSON CHIEF OPERATING OFFICER	50.00 0.00			X				132,050.	0.	24,825.
(17) BENJAMIN BULL CHIEF COUNSEL, EXEC. DIR. OF ADF INT	50.00 0.00				X			285,492.	0.	33,499.

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MARK CROZET SVP DEVELOPMENT	55.00 0.00				X			227,712.	0.	26,016.
(19) JEFFERY VENTRELLA SR COUNSEL, SVP OF TRAINING	50.00 0.00				X			200,886.	0.	29,491.
(20) KRISTEN WAGGONER SR COUNSEL, SVP U.S. LEGAL DIVISION	50.00 0.00				X			199,720.	0.	28,892.
(21) AMY SHEPERD SVP OF MARKETING & COMMUNICATION	50.00 0.00				X			187,475.	0.	25,494.
(22) TIM CHANDLER SR CNSL SVP OF ALLIANCE ADVANCEMENT	50.00 0.00				X			184,291.	0.	27,946.
(23) DOUG NAPIER SVP OF ALLIANCE RELATIONS	55.00 0.00				X			205,717.	0.	30,406.
(24) GLEN LAVY CORPORATE COUNSEL	50.00 0.00				X			173,947.	0.	30,175.
(25) DAVID CORTMAN SR COUNSEL, VP U.S. LITIGATION	50.00 0.00					X		193,496.	0.	29,857.
(26) DONALD FOSTER CHIEF INFORMATION OFFICER	50.00 0.00					X		186,306.	0.	24,620.
<b>1b Sub-total</b>								2,820,887.	0.	375,896.
<b>c Total from continuation sheets to Part VII, Section A</b>								548,879.	0.	80,539.
<b>d Total (add lines 1b and 1c)</b>								3,369,766.	0.	456,435.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **57**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3** **X**
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4** **X**
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5** **X**

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MASTERWORKS, 19462 POWDER HILL PLACE NE, POULSBO, WA 98370	CONSULTING/MARKETING	1,928,480.
ALANIZ METRO GROUP, 1805 E WASHINGTON STREET, MT PLEASANT, IA 52641	LASERING/MAILING	1,545,414.
NAHAN PRINTING INC 7000 SAUKVIEW DRIVE, ST CLOUD, MN 56303	PRINTING/DIRECT MAIL	166,849.
CARTERBALDWINEXECUTIVESEARCH, 200 MANSSELL COURT EAST, SUITE 450, ROSWELL, GA 30076	CONSULTING/MANAGEMENT	156,391.
GEORGE WISLAR 1915 N CREEK DRIVE, AUSTELL, GA 30106	CONSULTING/MANAGEMENT	150,000.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **10**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2016)

[illegible]

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d	40,000.			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	50,159,237.			
	g	Noncash contributions included in lines 1a-1f: \$		1,365,498.			
	h	<b>Total.</b> Add lines 1a-1f		50,199,237.			
<b>Program Service Revenue</b>	Business Code						
	2 a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	<b>Total.</b> Add lines 2a-2f					
<b>Other Revenue</b>	3	Investment income (including dividends, interest, and other similar amounts)		17,697.			17,697.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real	6,921.			
		b	Less: rental expenses		0.		
		c	Rental income or (loss)		6,921.		
		d	Net rental income or (loss)		6,921.		6,921.
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	4,569,411.			
		b	Less: cost or other basis and sales expenses		4,495,474.		
		c	Gain or (loss)		73,937.		
		d	Net gain or (loss)		73,937.		73,937.
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b	Less: direct expenses	b			
		c	Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
		b	Less: direct expenses	b			
		c	Net income or (loss) from gaming activities				
	10 a	Gross sales of inventory, less returns and allowances	a				
		b	Less: cost of goods sold	b			
		c	Net income or (loss) from sales of inventory				
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
11 a	COURT AWARDED FEES	900099	434,166.			434,166.	
b	MISCELLANEOUS	900099	285,155.			285,155.	
c	HONORARIA	900099	156,839.			156,839.	
d	All other revenue						
e	<b>Total.</b> Add lines 11a-11d		876,160.				
12	<b>Total revenue.</b> See instructions.		51,173,952.	0.	0.	974,715.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,221,839.	1,221,839.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	958,537.	958,537.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,169,752.	1,169,752.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,038,572.	1,769,741.	701,436.	567,395.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	143,608.	71,455.	72,153.	
7 Other salaries and wages	16,569,024.	13,741,505.	1,286,060.	1,541,459.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	443,129.	374,451.	35,914.	32,764.
9 Other employee benefits	2,082,511.	1,627,678.	230,712.	224,121.
10 Payroll taxes	1,640,411.	1,353,796.	138,622.	147,993.
11 Fees for services (non-employees):				
a Management	844,245.	481,835.	103,768.	258,642.
b Legal	230,885.	209,356.	20,161.	1,368.
c Accounting	49,848.	-309.	50,261.	-104.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	2,798,578.			2,798,578.
f Investment management fees	74,654.	9,351.	64,893.	410.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	672,779.	595,442.	10,132.	67,205.
12 Advertising and promotion	7,826,197.	5,736,873.	597,257.	1,492,067.
13 Office expenses	1,344,385.	1,084,240.	105,179.	154,966.
14 Information technology	952,874.	642,533.	204,099.	106,242.
15 Royalties				
16 Occupancy	2,060,232.	1,471,249.	315,761.	273,222.
17 Travel	3,128,460.	2,688,535.	93,179.	346,746.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,335,117.	1,744,644.	272,289.	318,184.
23 Insurance	177,264.	132,692.	19,026.	25,546.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FINANCIAL SERVICES	196,687.	8,454.	186,878.	1,355.
b RESOURCE MATERIALS	195,204.	177,118.	12,876.	5,210.
c PROFESSIONAL DUES	111,289.	84,206.	16,423.	10,660.
d				
e All other expenses	38,566.	21,629.	1,862.	15,075.
25 Total functional expenses. Add lines 1 through 24e	50,304,647.	37,376,602.	4,538,941.	8,389,104.
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	7,082,438.	5,195,612.	468,940.	1,417,886.

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	1,596,947.	1	3,554,860.
	2 Savings and temporary cash investments	8,977,108.	2	9,650,174.
	3 Pledges and grants receivable, net	233,047.	3	279,501.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	23,240.	8	25,700.
	9 Prepaid expenses and deferred charges	1,165,151.	9	1,996,348.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 29,643,984.		
	b Less: accumulated depreciation	10b 13,939,922.		
		16,587,990.	10c	15,704,062.
	11 Investments - publicly traded securities	2,135,954.	11	2,127.
	12 Investments - other securities. See Part IV, line 11	1,771,983.	12	-140,209.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	304,208.	15	3,779,282.	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	32,795,628.	16	34,851,845.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	3,865,412.	17	4,111,558.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	773,393.	25	1,144,179.
	26 <b>Total liabilities.</b> Add lines 17 through 25	4,638,805.	26	5,255,737.
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>		
27 Unrestricted net assets		25,909,128.	27	27,418,939.
28 Temporarily restricted net assets		2,247,695.	28	2,177,169.
29 Permanently restricted net assets			29	
<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 <b>Total net assets or fund balances</b>		28,156,823.	33	29,596,108.
34 <b>Total liabilities and net assets/fund balances</b>	32,795,628.	34	34,851,845.	

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**Part 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	51,173,952.
2	Total expenses (must equal Part IX, column (A), line 25)	2	50,304,647.
3	Revenue less expenses. Subtract line 2 from line 1	3	869,305.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28,156,823.
5	Net unrealized gains (losses) on investments	5	-51,478.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	697,603.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-76,145.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	29,596,108.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed 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?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2016)

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

2016

**Open to Public Inspection**

Name of the organization

ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

<b>Part I</b>	<b>Reason for Public Charity Status</b> (All organizations must complete this part.) See instructions.
---------------	--

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

g. Provide the following information about the supported organization(s):						
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16 Schedule A (Form 990 or 990-EZ) 2016

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	38,913,749.	41,527,309.	46,258,198.	50,007,910.	50,199,237.	226,906,403.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 <b>Total.</b> Add lines 1 through 3 .....	38,913,749.	41,527,309.	46,258,198.	50,007,910.	50,199,237.	226,906,403.
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 <b>Public support.</b> Subtract line 5 from line 4.						226,906,403.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4 .....	38,913,749.	41,527,309.	46,258,198.	50,007,910.	50,199,237.	226,906,403.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	385,237.	312,971.	343,061.	238,782.	24,618.	1,304,669.
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.) .....	890,634.	1,059,666.	1,708,631.	1,290,999.	876,160.	5,826,090.
11 <b>Total support.</b> Add lines 7 through 10						234,037,162.
12 Gross receipts from related activities, etc. (see instructions) .....					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) .....	14	96.95 %
15 Public support percentage from 2015 Schedule A, Part II, line 14 .....	15	96.26 %
16a <b>33 1/3% support test - 2016.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
b <b>33 1/3% support test - 2015.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
17a <b>10% -facts-and-circumstances test - 2016.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
b <b>10% -facts-and-circumstances test - 2015.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2016

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
5 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
6 <b>Total.</b> Add lines 1 through 5 .....						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
c Add lines 7a and 7b .....						
8 <b>Public support.</b> (Subtract line 7c from line 6.) .....						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6 .....						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
c Add lines 10a and 10b .....						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
13 <b>Total support.</b> (Add lines 9, 10c, 11, and 12.) .....						
14 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) .....	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15 .....	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) .....	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17 .....	18	%

19a **33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization .....

b **33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization .....

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....

**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 (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.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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.		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> 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.			
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

**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.

Section 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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

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

Schedule A (Form 990 or 990-EZ) 2016

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

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b>	Amounts paid to acquire exempt-use assets	
<b>5</b>	Qualified set-aside amounts (prior IRS approval required)	
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions	
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6	
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
<b>9</b>	Distributable amount for 2016 from Section C, line 6	
<b>10</b>	Line 8 amount divided by Line 9 amount	

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

Schedule A (Form 990 or 990-EZ) 2016



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

**SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:****MISCELLANEOUS INCOME**

2012 AMOUNT: \$ 439,610.

2013 AMOUNT: \$ 3,860.

2014 AMOUNT: \$ 212,132.

2015 AMOUNT: \$ 65,806.

2016 AMOUNT: \$ 285,155.

**COURT AWARDED FEES**

2012 AMOUNT: \$ 451,024.

2013 AMOUNT: \$ 574,537.

2014 AMOUNT: \$ 1,194,381.

2015 AMOUNT: \$ 979,457.

2016 AMOUNT: \$ 434,166.

**HONORIA**

2013 AMOUNT: \$ 481,269.

2014 AMOUNT: \$ 302,118.

2015 AMOUNT: \$ 245,736.

2016 AMOUNT: \$ 156,839.

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and  
its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Name of the organization

ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 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

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**

☐ 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. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization	Employer identification number
ALLIANCE DEFENDING FREEDOM	54-1660459

**Part I** Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>12,021,900.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>2,956,486.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

54-1660459

## Part II

[illegible]

Employer identification number

54-1660459

## Part III

**E. DEFENDING FREEDOM** \$1,000.00

*Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once).* ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**SCHEDULE D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ .....

4 Number of states where property subject to conservation easement is located ▶ .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ .....

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ .....

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

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

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Schedule D (Form 990) 2016

632051 08-29-16

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

a ☐ Public exhibitiond ☐ Loan or exchange programsb ☐ Scholarly researche ☐ Other \_\_\_\_\_c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ Nob If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,327,294.	4,869,735.	4,285,545.	2,789,582.	1,441,460.
b Contributions	731,623.	1,636,049.	770,652.	1,530,503.	1,404,708.
c Net investment earnings, gains, and losses	510,977.	175,336.	57,995.	88,296.	5,414.
d Grants or scholarships	40,000.		180,484.	90,000.	62,000.
e Other expenditures for facilities and programs				2,015.	
f Administrative expenses	1,228,055.	353,826.	63,973.	30,821.	
g End of year balance	6,301,839.	6,327,294.	4,869,735.	4,285,545.	2,789,582.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☒ 87.26 %b Permanent endowment ☒ 2.00 %c Temporarily restricted endowment ☒ 10.74 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		X
3a(ii)	X	
3b	X	

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,000,000.		2,000,000.
b Buildings		15,313,911.	5,754,887.	9,559,024.
c Leasehold improvements		1,224,055.	287,833.	936,222.
d Equipment		11,106,018.	7,897,202.	3,208,816.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				15,704,062.

Schedule D (Form 990) 2016

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other .....		
(A) .....		
(B) .....		
(C) .....		
(D) .....		
(E) .....		
(F) .....		
(G) .....		
(H) .....		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) .....		
(2) .....		
(3) .....		
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Complete if the organization answered "Yes" on Form 990, Part IV, line 15c. See Form 990, Part IV, line 15c.	
(a) Description	(b) Book value
(1) SECURITY DEPOSITS	300,989.
(2) DUE TO/DUE FROM	3,478,293.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	3,779,282.

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability		(b) Book value
(1)	Federal income taxes	
(2)	DEFERRED RENT PAYABLE	1,144,179.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		1,144,179.

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

Schedule D (Form 990) 2016



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	56,439,303.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-51,478.
b	Donated services and use of facilities	2b	4,948,641.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	767,631.
e	Add lines 2a through 2d	2e	5,664,794.
3	Subtract line 2e from line 1	3	50,774,509.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	399,443.
c	Add lines 4a and 4b	4c	399,443.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	51,173,952.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	56,266,817.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	4,948,641.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,412,972.
e	Add lines 2a through 2d	2e	6,361,613.
3	Subtract line 2e from line 1	3	49,905,204.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	399,443.
c	Add lines 4a and 4b	4c	399,443.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	50,304,647.

**Part XIII Supplemental Information.**

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

**PART V, LINE 4:**

ADF FOUNDATION, A RELATED ORGANIZATION MAINTAINS THE ENDOWMENT TO SUPPORT  
ALLIANCE DEFENDING FREEDOM.

**PART X, LINE 2:**

THE COMPANY IS CLASSIFIED AS A PUBLIC CHARITY AND IS EXEMPT FROM INCOME  
TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 43 OF  
THE ARIZONA REVISED STATUTES. CONTRIBUTIONS TO THE COMPANY ARE TAX  
DEDUCTIBLE WITHIN THE LIMITATIONS DESCRIBED BY THE CODE.

THE COMPANY FOLLOWS THE INCOME TAX STANDARD FOR UNCERTAIN TAX POSITIONS.

THE COMPANY RECOGNIZED NO LIABILITY FOR UNCERTAIN TAX POSITIONS.

**Part XIII** Supplemental Information (continued)

AS OF JUNE 30, 2017, THE COMPANY'S 2014 THROUGH 2016 FISCAL YEAR TAX  
RETURNS ARE OPEN FOR EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES.

## PART XI, LINE 2D - OTHER ADJUSTMENTS:

FOREIGN CURRENCY TRANSLATION LOSS	-44,115.
REVENUE REPORTED ON SEPARATE RETURNS	811,746.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	767,631.

## PART XI, LINE 4B - OTHER ADJUSTMENTS:

INTERCOMPANY ELIMINATIONS	399,443.
---------------------------	----------

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

15100 SOLAR EXPENSES	144,917.
ADF FOUNDATION EXPENSES	1,268,055.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,412,972.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

INTERCOMPANY ELIMINATIONS	399,443.
---------------------------	----------

**SCHEDULE F**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**Open to Public  
Inspection

Name of the organization

Employer identification number

ALLIANCE DEFENDING FREEDOM

54-1660459

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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? ..... ☒ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 **Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		63,355.
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		36,180.
EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		120,612.
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		249,086.
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		86,754.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		27,918.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	HUMAN RIGHTS LEGAL WORK	140,900.
EUROPE	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	1,036,681.
<b>3 a</b> Sub-total .....	0	0			1,761,486.
<b>b</b> Total from continuation sheets to Part I .....	0	0			1,579,268.
<b>c</b> Totals (add lines 3a and 3b) .....	0	0			3,340,754.

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

Schedule F (Form 990) 2016



54-1660459

**ALLIANCE DEFENDING FREEDOM**

Schedule F (Form 990) 2016

**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)
		AFRICA	HUMAN RIGHTS LEGAL WORK	63,355.	WIRE TRANSFERS	0.	N/A	N/A
		AUSTRALIA	HUMAN RIGHTS LEGAL WORK	36,180.	WIRE TRANSFERS	0.	N/A	N/A
		EUROPE	HUMAN RIGHTS LEGAL WORK	112,612.	WIRE TRANSFERS	0.	N/A	N/A
		NORTH AMERICA	HUMAN RIGHTS LEGAL WORK	240,412.	WIRE TRANSFERS	0.	N/A	N/A
		SOUTH AMERICA	HUMAN RIGHTS LEGAL WORK	86,754.	WIRE TRANSFERS	0.	N/A	N/A
		SOUTH ASIA	HUMAN RIGHTS LEGAL WORK	20,000.	WIRE TRANSFERS	0.	N/A	N/A
		NORTH AMERICA	HUMAN RIGHTS LEGAL WORK	105,929.	WIRE TRANSFERS	0.	N/A	N/A
		SOUTH ASIA	HUMAN RIGHTS LEGAL WORK	140,900.	WIRE TRANSFERS	0.	N/A	N/A

**2** Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 0

**3** Enter total number of other organizations or entities 24

Schedule F (Form 990) 2016





**Part IV Foreign Forms**

- 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 ☒ 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; do not file with Form 990) ..... ☐ Yes ☒ 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 ☐ 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? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ..... ☐ Yes ☒ 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 ☒ 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; do not file with Form 990) ..... ☐ Yes ☒ No

Schedule F (Form 990) 2016



**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.

## PART I, LINE 2:

WHEN ALLIANCE DEFENDING FREEDOM APPROVES A GRANT, THE FUNDS ARE RETAINED BY ALLIANCE DEFENDING FREEDOM AND SET ASIDE TO BE USED EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST. DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED.

## PART I, LINE 3:

## ACCRUAL METHOD

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

**ALLIANCE DEFENDING FREEDOM**

Employer identification number

**54-1660459**

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations e ☒ Solicitation of non-government grants  
b ☒ Internet and email solicitations f ☐ Solicitation of government grants  
c ☒ Phone solicitations g ☐ Special fundraising events  
d ☒ In-person solicitations

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
MASTERWORKS, INC. - 19265 POWDER HILL PLACE NE,	CONSULTING ON DIRECT MAIL PROGRAM		X	11,709,552.	2,224,136.	9,485,416.
NEXTAFTER - 6175 MAIN STREET, SUITE 385, FRISCO, TX 75034	FUNDRAISING CONSULTATION		X	380,355.	193,507.	186,848.
MDS - 545 WEST JUANITA AVE, MESA, AZ 85210	TELEMARKETING		X	148,621.	101,597.	47,024.
DUNHAM COMPANY - 6111 WEST PLANO PARKWAY, SUITE 2700,	FUNDRAISING CONSULTATION		X	108,413.	227,128.	0.
INFOCISION - PO BOX 932441, CLEVELAND, OH 44193	TELEMARKETING		X	39,022.	52,210.	0.
<b>Total</b>				12,385,963.	2,798,578.	9,719,288.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO  
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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

Schedule G (Form 990 or 990-EZ) 2016

SEE PART IV FOR CONTINUATIONS

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts .....				
	2 Less: Contributions .....				
	3 Gross income (line 1 minus line 2) .....				
Direct Expenses	4 Cash prizes .....				
	5 Noncash prizes .....				
	6 Rent/facility costs .....				
	7 Food and beverages .....				
	8 Entertainment .....				
	9 Other direct expenses .....				
	10 Direct expense summary. Add lines 4 through 9 in column (d) .....				
	11 Net income summary. Subtract line 10 from line 3, column (d) .....				

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue .....				
	2 Cash prizes .....				
Direct Expenses	3 Noncash prizes .....				
	4 Rent/facility costs .....				
	5 Other direct expenses .....				
	6 Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) .....				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) .....				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name Address 

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
- ☐
- Yes
- ☐
- No

b If "Yes," enter the amount of gaming revenue received by the organization  \$  and the amount of gaming revenue retained by the third party  \$

c If "Yes," enter name and address of the third party:

Name Address 

## 16 Gaming manager information:

Name Gaming manager compensation  \$ Description of services provided ☐ Director/officer☐ Employee☐ Independent contractor

## 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$

**Part IV** **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

**SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:**

(I) NAME OF FUNDRAISER: MASTERWORKS, INC.

(I) ADDRESS OF FUNDRAISER: 19265 POWDER HILL PLACE NE, POULSBO, WA 98370

(I) NAME OF FUNDRAISER: DUNHAM COMPANY

(I) ADDRESS OF FUNDRAISER:

6111 WEST PLANO PARKWAY, SUITE 2700, PLANO, TX 75093

<b>Part IV</b>	<b>Supplemental Information</b> (continued)
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SCHEDULE I  
(Form 990)Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United StatesComplete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.Department of the Treasury  
Internal Revenue Service▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

## ALLIANCE DEFENDING FREEDOM

Employer identification number  
54-1660459

## Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any

## Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
AMERICAN LIBERTIES INSTITUTE P.O. BOX 547503 ORLANDO, FL 32854	59-3309465	501(C)(3)	324,213.	0.	N/A	N/A	GENERAL OPERATING
FIDELIS CENTER FOR LAW AND POLICY P.O. BOX 2709 CHICAGO, IL 60690	20-2787890	501(C)(3)	200,000.	0.	N/A	N/A	GENERAL OPERATING
CENTER FOR RELIGIOUS EXPRESSION 699 OAKLEAF OFFICE LANE, SUITE 107 MEMPHIS, TN 38117	62-1873978	501(C)(3)	107,540.	0.	N/A	N/A	PUBLIC SQUARE
MAUCK & BAKER, LLC ONE N. LASALLE STREET SUITE 600 CHICAGO, IL 60602	36-4394768	N/A	98,100.	0.	N/A	N/A	FAMILY VALUES
WADLEIGH STARR & PETERS, PLLC 95 MARKET STREET MANCHESTER, NH 03101	02-0504984	N/A	92,110.	0.	N/A	N/A	CENTER FOR LIFE, PUBLIC SQUARE
FREEDOM OF CONSCIENCE DEFENSE FUND P.O. BOX 9520 RANCHO SANTA FE, CA 92067	30-0741605	501(C)(3)	87,342.	0.	N/A	N/A	RELIGIOUS LIBERTY, SANCTITY OF LIFE
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							11.
3 Enter total number of other organizations listed in the line 1 table							16.

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

Schedule I (Form 990) (2016)

## ALLIANCE DEFENDING FREEDOM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
THE JAMES OTIS LAW GROUP 12977 NORTH FORTY DRIVE SUITE 214 ST. LOUIS, MO 63141	80-0211060	N/A	80,000.	0. N/A		N/A	SANCTITY OF LIFE
NATHAN W KELLUM 699 OAKLEAF OFFICE LANE, SUITE 107 MEMPHIS, TN 38117	428-21-9756	N/A	62,000.	0. N/A		N/A	PUBLIC SQUARE
ROADS OF SUCCESS 2896 HACIENDA DRIVE DUARTE, CA 91010	26-0809074	501(C)(3)	43,601.	0. N/A		N/A	INTERNATIONAL ADVOCACY
THE WITHERSPOON INSTITUTE 16 STOCKTON STREET PRINCETON, NJ 08540	55-0835528	501(C)(3)	30,000.	0. N/A		N/A	FAMILY VALUES
BRENA, BELL & CLARKSON P.C. 810 N STREET SUITE 100 ANCHORAGE, AK 99501	92-0127640	N/A	26,157.	0. N/A		N/A	GENERAL LITIGATION
LAW OFFICE OF JASON R. CRADDOCK 19 S. LASALLE SUITE 604 CHICAGO, IL 60603	352-72-4233	N/A	25,680.	0. N/A		N/A	CENTER FOR LIFE
WOMEN'S LIBERATION FRONT 1800 M STREET NW UNIT 33943 MANCHESTER, DC 03101	81-3249020	501(C)(3)	15,000.	0. N/A		N/A	GENERAL LITIGATION
MRD LAW 3301 WEST CLYDE PLACE DENVER, CO 80211	45-4324795	N/A	14,267.	0. N/A		N/A	RELIGIOUS LIBERTY
LIEBLER, CONNOR, BERRY & ST. HILAIRE - 1141 N. EDISON, SUITE C P.O. BOX 6125 - KENNEWICK, WA 99336	911045987	N/A	13,850.	0. N/A		N/A	RELIGIOUS LIBERTY

Schedule I (Form 990)

## ALLIANCE DEFENDING FREEDOM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
STORY LAW FIRM, LLC 438 E. MILSAP RD. SUITE 103 FAYETTEVILLE, AR 72703	26-3980897	N/A	13,599.	0. N/A		N/A	GENERAL OPERATING
ETHICS AND PUBLIC POLICY CENTER 1730 M STREET NW, SUITE 910 WASHINGTON DC, DC 20036	52-1162185	501(C)(3)	13,000.	0. N/A		N/A	GENERAL LITIGATION
ARAGO LAW FIRM, PLLC P.O. BOX 452275 KISSIMMEE, FL 34745	27-0188415	N/A	12,212.	0. N/A		N/A	GENERAL OPERATING
DALTON & TOMICH PLC THE CHRYSLER HOUSE 719 GRISWOLD STREET, SUITE 270 - DETROIT, MI 48226	27-3296840	N/A	11,860.	0. N/A		N/A	RELIGIOUS LIBERTY
ELLIS, LI & MCKINSTRY, PLLC MARKET PLACE TOWER 2025 FIRST AVENUE, PENTHOUSE A - SEATTLE, WA 98121	91-1240777	N/A	10,000.	0. N/A		N/A	FAMILY VALUES
PENNSYLVANIA FAMILY INSTITUTE 23 NORTH FRONT STREET 2ND FLOOR HARRISBURG, PA 17101	23-2509197	501(C)(3)	10,000.	0. N/A		N/A	FAMILY VALUES
LAW OFFICE OF NIC COCIS 38975 SKY CANYON DR., SUITE 211 MURRIETA, CA 92563	20-3843470	N/A	9,301.	0. N/A		N/A	GENERAL OPERATING
MARGRAVE CELMINS 8171 E. INDIAN BEND ROAD SUITE 101 SCOTTSDALE, AZ 85250	86-0641342	N/A	8,430.	0. N/A		N/A	GENERAL LITIGATION
NATIONAL CENTER ON SEXUAL EXPLOITATION - 1100 G STREET NW #1030 - WASHINGTON, DC, DC 20005	13-2608326	501(C)(3)	6,000.	0. N/A		N/A	GENERAL LITIGATION

Schedule I (Form 990)



# ALLIANCE DEFENDING FREEDOM

Schedule I (Form 990)

ALLIANCE DEFENDING FREEDOM

Schedule I (Form 990) (2016)

**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
CASH SCHOLARSHIP FOR LAW SCHOOL	150	958,537.	0.	N/A	N/A

**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:

WHEN ALLIANCE DEFENDING FREEDOM APPROVES A GRANT, THE FUNDS ARE RETAINED BY ALLIANCE DEFENDING FREEDOM AND SET ASIDE TO BE EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST. DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> First-class or charter travel  | <input type="checkbox"/> Housing allowance or residence for personal use    |
| <input checked="" type="checkbox"/> Travel for companions          | <input type="checkbox"/> Payments for business use of personal residence    |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees      |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2016

54-1660459

## ALLIANCE DEFENDING FREEDOM

Schedule J (Form 990) 2016

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ALAN SEARS PRESIDENT, CEO, GEN. COUNSEL/FOUNDER	(i) 399,655.	0.	5,425.	10,600.	22,899.	438,579.	0.
(2) WAYNE SWINDLER EVP FINANCE & ADMINISTRATION	(i) 225,770.	0.	1,407.	9,362.	21,814.	258,353.	0.
(3) TONY JOHNSON CHIEF OPERATING OFFICER	(i) 131,968.	0.	82.	5,451.	19,374.	156,875.	0.
(4) BENJAMIN BULL CHIEF COUNSEL, EXEC. DIR. OF ADF INT	(i) 281,867.	0.	3,625.	10,600.	22,899.	318,991.	0.
(5) MARK CROZET SVP DEVELOPMENT	(i) 227,712.	0.	0.	9,336.	16,680.	253,728.	0.
(6) JEFFERY VENTRELLA SR COUNSEL, SVP OF TRAINING	(i) 200,089.	0.	797.	8,277.	21,214.	230,377.	0.
(7) KRISTEN WAGGONER SR COUNSEL, SVP U.S. LEGAL DIVISION	(i) 199,720.	0.	0.	8,218.	20,674.	228,612.	0.
(8) AMY SHEPHERD SVP OF MARKETING & COMMUNICATION	(i) 187,475.	0.	0.	7,814.	17,680.	212,969.	0.
(9) TIM CHANDLER SR CNSL SVP OF ALLIANCE ADVANCEMENT	(i) 184,151.	0.	140.	7,532.	20,414.	212,237.	0.
(10) DOUG NAPIER SVP OF ALLIANCE RELATIONS	(i) 205,274.	0.	443.	8,507.	21,899.	236,123.	0.
(11) GLEN LAVY CORPORATE COUNSEL	(i) 171,998.	0.	1,949.	7,276.	22,899.	204,122.	0.
(12) DAVID CORTMAN SR COUNSEL, VP U.S. LITIGATION	(i) 193,087.	0.	409.	7,958.	21,899.	223,353.	0.
(13) DONALD FOSTER CHIEF INFORMATION OFFICER	(i) 186,306.	0.	0.	7,735.	16,885.	210,926.	0.
(14) KEVIN THERIOT SR COUNSEL, VP CENTER FOR LIFE	(i) 181,301.	0.	396.	7,393.	18,074.	207,164.	0.
(15) JORDAN LORENCE SR COUNSEL	(i) 176,285.	0.	1,211.	7,336.	22,894.	207,726.	0.
(16) GARY MCALEB SR COUNSEL, VP CENTER FOR FAMILY VAL	(i) 188,297.	0.	1,389.	7,877.	16,965.	214,528.	0.
	(i) 0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2016

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

FIRST CLASS TRAVEL MAY BE PROVIDED TO EMPLOYEES FOR AIR TRAVEL OF EXTENDED

LENGTH OR WHEN AVAILABILITY OF RESERVATIONS IS LIMITED TO FIRST CLASS.

TYPICALLY THESE ARE LOW OR NO EXPENSE DUE TO AIRLINE FREQUENT FLYER

PROGRAMS WHICH ALLOW UPGRADES TO AIRLINE TRAVEL. THIS IS FOR THE

CONVENIENCE AND BUSINESS PURPOSE OF THE ORGANIZATION, NOT THE INDIVIDUAL

AND IS NOT TREATED AS TAXABLE INCOME.

TRAVEL FOR COMPANIONS IS PROVIDED WHEN THE COMPANION'S ATTENDANCE AT

MEETINGS, CONFERENCES, ETC. HAS A BUSINESS PURPOSE TO THE ORGANIZATION.

THIS IS NOT TREATED AS TAXABLE COMPENSATION. THESE EXPENSE ITEMS ARE NOT

LIMITED TO OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED INDIVIDUALS, BUT

ARE AVAILABLE TO ALL EMPLOYEES IN THE SITUATIONS DESCRIBED.

(Form 990 or 990-EZ)

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

2016

## Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

## Part I

**Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

[illegible]

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

**3** Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

## Part II

**Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

reported an amount on Form 990, Part X, line 8, or 22.												
(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						\$						

<b>Part III</b>		<b>Grants or Assistance Benefiting Interested Persons.</b>
-----------------	--	--

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

[illegible]

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

Schedule L (Form 990 or 990-EZ) 2016

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
JANET BITZKO	FAMILY MEMBER OF TH	52,794.	EMPLOYMENT		X
LUCAS SWINDLER	FAMILY MEMBER OF TH	19,359.	EMPLOYMENT		X
REBECCA SEARS	FAMILY MEMBER OF TH	71,455.	EMPLOYMENT		X

**Part V Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: JANET BITZKO

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

FAMILY MEMBER OF THE CEO

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT COMPENSATION

(A) NAME OF PERSON: LUCAS SWINDLER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

FAMILY MEMBER OF THE COS

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT COMPENSATION

(A) NAME OF PERSON: REBECCA SEARS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

FAMILY MEMBER OF THE CEO

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT COMPENSATION

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2016**

Open To Public  
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

**ALLIANCE DEFENDING FREEDOM**

Employer identification number

**54-1660459**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....				
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	102	1,365,498.	STOCK MARKET QUOTES
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( .....				
26 Other ▶ ( .....				
27 Other ▶ ( .....				
28 Other ▶ ( .....				

29 Number of Forms 8283 received by the organization during the tax year for contributions  
for which the organization completed Form 8283, Part IV, Donee Acknowledgement .....

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it  
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for  
exempt purposes for the entire holding period? .....

	Yes	No
30a		X
31	X	
32a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

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

Schedule M (Form 990) (2016)



**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTORS.

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

ALLIANCE DEFENDING FREEDOM

Employer identification number  
54-1660459

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CASES, AND HAS ACHIEVED SEVEN DIRECT LEGAL ADVOCACY VICTORIES AT THE  
U.S. SUPREME COURT.

ADF WORKS WITH OVER 1000 ALLIED ORGANIZATIONS TO CREATE EFFECTIVE  
STRATEGIES FOR ESTABLISHING CRITICAL LEGAL PRECEDENTS TO PRESERVE  
RELIGIOUS LIBERTY IN STATE COURTS, FEDERAL COURTS, AND THE SUPREME  
COURT, AS WELL AS INTERNATIONAL COURTS AND GOVERNING BODIES INCLUDING  
THE EUROPEAN COURT OF HUMAN RIGHTS AND THE UNITED NATIONS.

ADF SERVES OUR NETWORK OF ALLIES BY PROVIDING TRAINING, COORDINATION,  
FUNDING, LEGAL EXPERTISE, AND LITIGATION SERVICES IN SUPPORT OF OUR  
ALLIED ATTORNEYS, CHURCH AND PARACHURCH ORGANIZATION LEADERS,  
LEGISLATORS AND LEGISLATIVE STAFF MEMBERS, BUSINESS LEADERS, CLIENTS,  
STUDENT LEADERS, AND OTHER KEY ALLIES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

U.S. AND INTERNATIONAL CHALLENGES TO RELIGIOUS FREEDOM, THE SANCTITY OF  
LIFE, AND FAMILY VALUES; AND HOW AND WHERE CIVIL LIBERTIES HAVE BEEN  
JEOPARDIZED OR THWARTED AND THE EFFORTS OF ADF AND ITS ALLIES TO  
RECLAIM THOSE FREEDOMS. ADF PUBLIC EDUCATION EFFORTS ALSO SERVE TO  
RECRUIT POTENTIAL ALLIES AND TO HIGHLIGHT THE ADVOCACY WORK OF THE  
ALLIANCE IN ORDER TO POSITION OURSELVES TO SERVE AS THE FIRST LINE OF  
DEFENSE FOR INDIVIDUALS AND ORGANIZATIONS WHOSE RELIGIOUS FREEDOM IS AT  
RISK.

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ADF ALSO REQUESTS THAT THE RECIPIENTS OF THESE EDUCATIONAL COMMUNICATIONS REMEMBER ITS ACTIVITIES IN PRAYER AND PROVIDES INFORMATION AND DETAILS TO ASSIST THEM IN INTENTIONAL AND PURPOSEFUL PRAYER.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

LEADERS, AND MEDIA LEADERS ARE INVITED TO PARTICIPATE IN WORLD-CLASS TRAINING, STRATEGY, AND NETWORKING SESSIONS AROUND THE WORLD. MORE THAN 2,042 U.S. AND INTERNATIONAL ATTORNEYS HAVE COMPLETED THE ADF RELIGIOUS LIBERTY SUMMIT TRAINING, AND 3,214 ADF ALLIED ATTORNEYS HAVE VOLUNTEERED PRO BONO LEGAL ADVOCACY SERVICES TO LOCAL AND INTERNATIONAL COMMUNITIES VALUED AT OVER \$206 MILLION. THIS AMOUNT IS FAR IN EXCESS OF THE COST OF THE PROGRAM. MOST U.S. STATE BARS ACCEPT ACCREDITATION FOR PORTIONS OF THE LEGAL ADVOCACY TRAINING WITH CONTINUING LEGAL EDUCATION CREDIT.

THROUGH THE BLACKSTONE LEGAL FELLOWSHIP, ADF PROVIDES TRAINING TO TOP CHRISTIAN LAW STUDENTS FROM AROUND THE WORLD ON NATURAL LAW, CONSTITUTIONAL JURISPRUDENCE, AND THE HISTORY OF RELIGIOUS LIBERTY SUBJECTS THAT CURRENTLY SUFFER MUCH NEGLECT IN PROMINENT LAW PROGRAMS ACROSS THE UNITED STATES AND INTERNATIONALLY. THE BLACKSTONE LEGAL FELLOWSHIP EQUIPS THESE STUDENTS TO ADHERE TO THE PRACTICE OF THEIR FAITH IN THE LEGAL PROFESSION, AN ARENA OFTEN HOSTILE TO CHRISTIANITY. THE PROGRAM CONSISTS OF COURSES TAUGHT BY PROMINENT LECTURERS, INTERNSHIPS AROUND THE WORLD WITH SOME OF ADF'S MOST INFLUENTIAL ALLIED PARTNERS, AND PROFESSIONAL CAREER PLACEMENT SERVICES. TO DATE, 1962 STUDENTS HAVE GRADUATED FROM THE BLACKSTONE LEGAL FELLOWSHIP, REPRESENTING 227 LAW SCHOOLS.

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ADF OFFERS A SIMILAR TRAINING THROUGH THE ARETE ACADEMY TO COLLEGE AND UNIVERSITY STUDENTS WHO SEEK TO LIVE OUT THEIR FAITH IN THE FIELDS OF LAW, GOVERNMENT, PUBLIC POLICY, AND BUSINESS. TO DATE, 743 STUDENTS FROM TOP COLLEGES AND UNIVERSITIES WORLDWIDE HAVE PARTICIPATED IN ARETE ACADEMY, MANY OF WHOM GO ON TO ATTEND THE BLACKSTONE LEGAL FELLOWSHIP DURING LAW SCHOOL. THE ACADEMY EQUIPS STUDENTS WITH THE CHARACTER, COMPETENCE, AND CREDENTIALS TO EXCEL IN THEIR CHOSEN FIELD..

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

GRANTS AND FUNDING: ADF PROVIDES GRANT FUNDING FOR LEGAL CASES AND PROGRAMS THAT KEEP THE DOOR OPEN FOR THE GOSPEL BY ADVOCATING FOR RELIGIOUS LIBERTY, THE SANCTITY OF LIFE, AND MARRIAGE AND FAMILY. THIS GRANT FUNDING COVERS EXPENSES FOR LITIGATION, INCLUDING TRAINING FOR EXPERT WITNESSES AND ACQUIRING STRONG AMICUS BRIEF SUPPORT FOR OUR CASES TO ENSURE THE BEST POSSIBILITY OF SUCCESS. GRANT REQUESTS ARE REVIEWED AND RECOMMENDED BY AN INDEPENDENT GRANTS AND REVIEW COMMITTEE, WHICH IS COMPRISED OF EXPERT VOLUNTEER ATTORNEYS. UNDER THE GOVERNING BOARD OF DIRECTOR'S POLICY, NO GRANT IS AWARDED UNTIL IT IS FULLY FUNDED AND SET ASIDE IN SELF-DESIGNATED ACCOUNTS. GRANTS ARE DISBURSED UPON PERFORMANCE AND IN ACCORDANCE WITH THE TERMS OF THE GRANT AGREEMENTS. AS OF THIS WRITING, ADF HAS ISSUED MORE THAN 3,100 GRANTS TOTALING OVER \$46 MILLION.

EXPENSES \$ 3,231,979. INCLUDING GRANTS OF \$ 2,128,289. REVENUE \$ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

AUSTRIA, CAYMAN ISLANDS, BELGIUM, SWITZERLAND,  
FRANCE, UNITED KINGDOM

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FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES THAT HAVE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

UPON COMPLETION, THE ORGANIZATION'S FINANCE TEAM REVIEWS THE FORM 990 THROUGH THE FOLLOWING PROCESS:

1) THE CFO AND CONTROLLER COMPARE THE FORM 990 TO THE ANNUAL CORPORATE AUDIT AND INTERNAL FINANCIAL REPORTS. THE CEO THEN READS THE FORM 990 FOR CONTENT AND CLARITY.

2) THE CFO ASSIGNS THE CONTROLLER AND HIS TEAM TO REVIEW CONTENT, CHECK MATH TOTALS, AND CHECK SPELLING.

3) FOLLOWING THE ABOVE REVIEW THE FORM 990 IS DISTRIBUTED TO:

A. CEO

B. CHAIRMAN OF THE FINANCE AND AUDIT COMMITTEE (FAC) - WHICH IS RESPONSIBLE FOR OVERSIGHT OF FINANCE, AUDIT, AND TAX MATTERS.

C. THE CHAIR OF THE FAC ENSURES COMMITTEE MEMBERS REVIEW THE FORM 990 FOR MATERIAL EDITS AND COMPLIANCE

D. UPON ACCEPTANCE AND APPROVAL, THE CHAIRMAN OF THE FAC THEN INSTRUCTS THE CFO TO SIGN AND FILE THE 990, AND POST IT ON THE BOARD WEBSITE SO THE FULL BOARD OF DIRECTORS CAN VIEW THE 990. BASED ON THE FAC'S RECOMMENDATION, THE BOARD APPROVES AND ACCEPTS THE 990 AT THE NEXT REGULARLY SCHEDULED BOARD MEETING.

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4) CHANGES AND CORRECTIONS FROM THE ABOVE ARE ADDRESSED AT EACH STEP.

5) FOLLOWING THE ABOVE, THE CFO SIGNS AND INSTRUCTS THE FORM 990 TO BE FILED WITH THE IRS.

6) UPON FILING WITH THE IRS, ADF'S FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION AND DISTRIBUTION TO TO STATE GOVERNING BODIES, FOUNDATIONS, AND OTHER REQUESTING ENTITIES.

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

THE CONFLICT OF INTEREST POLICY COVERS ANY DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST. IN ADDITION TO THOSE COVERED INDIVIDUALS, ADF IS IN THE PROCESS OF REQUIRING ALL KEY EMPLOYEES AND EXECUTIVE STAFF TO ANNUALLY SIGN A STATEMENT AFFIRMING RECEIPT, UNDERSTANDING, COMPLIANCE AND REPORTING UNDER THE POLICY. THE ORGANIZATION ALSO CONDUCTS PERIODIC REVIEWS TO ENSURE OPERATIONS ARE CONSISTENT WITH ITS CHARITABLE PURPOSES.

DIRECTORS SHALL REPORT POSSIBLE CONFLICTS OF INTEREST TO THE CHAIRMAN OF THE BOARD OF DIRECTORS PRIOR TO ANY ACTION ON THE TRANSACTION BY THE ORGANIZATION. UPON REPORT OF A POSSIBLE CONFLICT, THE BOARD OF DIRECTORS SHALL CONDUCT AN INVESTIGATION AND DETERMINE WHETHER A CONFLICT OF INTEREST DOES EXIST AND WHETHER IT IS SUBSTANTIAL. IF THE BOARD DETERMINES THAT A SUBSTANTIAL CONFLICT OF INTEREST EXISTS, THE INTERESTED INDIVIDUAL SHALL NOT VOTE ON THE TRANSACTION PRESENTING THE CONFLICT. THE INTERESTED INDIVIDUAL MAY VOTE ONLY IF THE BOARD DETERMINES THAT NO CONFLICT EXISTS OR THE CONFLICT IS NOT SUBSTANTIAL. NO INVESTIGATION OR DETERMINATION BY THE

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BOARD SHALL BE REQUIRED IF THE INTERESTED INDIVIDUAL VOLUNTARILY AGREES TO REFRAIN FROM VOTING ON THE TRANSACTION PRESENTING THE POTENTIAL CONFLICT OF INTEREST. THE INTERESTED INDIVIDUAL MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

THE MINUTES OF THE GOVERNING BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS SHALL CONTAIN:

A. THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE A FINANCIAL INTEREST IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT OF INTEREST WAS PRESENT, AND THE GOVERNING BOARD'S OR COMMITTEE'S DECISION AS TO WHETHER A CONFLICT OF INTEREST IN FACT EXISTED.

B. THE NAMES OF THE PERSONS WHO WERE PRESENT FOR DISCUSSIONS AND VOTES RELATING TO THE TRANSACTION OR ARRANGEMENT, THE CONTENT OF THE DISCUSSION, INCLUDING ANY ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT, AND A RECORD OF ANY VOTES TAKEN IN CONNECTION WITH THE PROCEEDINGS.

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

ALLIANCE DEFENDING FREEDOM MAINTAINS A COMPENSATION SYSTEM. CEO COMPENSATION IS SET BY THE ORGANIZATION'S INDEPENDENT BOARD, AND THE CEO'S COMPENSATION IS IN ACCORDANCE WITH THE ADF COMPENSATION SYSTEM. JOB DESCRIPTIONS ARE EVALUATED AGAINST INDEPENDENT MARKET SOURCES AND COMPENSATION DATA AS PROVIDED BY INDEPENDENT THIRD PARTY RESOURCE PROVIDERS. THE MANAGEMENT COMPENSATION COMMITTEE APPROVES POSITION GRADES

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AND PAY RANGES OF ALL OTHER POSITIONS. ANNUALLY ADF ALSO PREPARES COMPENSATION DATA FOR THE BOARD'S FINANCE AND AUDIT COMMITTEE IN ACCORDANCE WITH THE IRS RECOMMENDED "REBUTTABLE PRESUMPTION OF REASONABLENESS" PROCESS TO SUBSTANTIATE THE COMPENSATION OF ADF KEY EMPLOYEES. THE FAC REVIEWS AND APPROVES KEY EMPLOYEE COMPENSATION ONCE A YEAR.

THE ADF COMP TEAM (COMPRISED OF THE CFO, COO, VP HR, AND COMP & BENEFITS ANALYST) REVIEW BENCHMARK DATA PROVIDED BY Payscale, Mercer, and other compensation resources to determine the appropriate compensation for all positions in accordance with the ADF compensation philosophy. Compensation above the 60th percentile but less than the 75th percentile of a pay grade requires that the CEO be informed; at or above the 75th percentile requires CEO approval; and above the maximum of the grade requires board approval. Discussions, decisions, and approvals are recorded in writing, typically via e-mail. This compensation review process last occurred in 2017.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NY, OK, OR, PA, RI, SC, TN, UT  
VA, WI, WV, NM

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

THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE ON ITS WEB SITE. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

FOREIGN CURRENCY EXCHANGE LOSS -44,115.

NET EQUITY ADJUSTMENT TO 15100 SOLAR INVESTMENT -32,030.



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TOTAL TO FORM 990, PART XI, LINE 9

-76,145.







**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)	X	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ADF FOUNDATION	C	40,000.	CASH TRANSFERRED
(2) 15100 SOLAR LLC	Q	60,000.	ADMIN FEE PAID
(3) ADF FOUNDATION	O	389,554.	COMPENSATION PAID
(4) ADF FOUNDATION	Q	219,315.	ADMIN FEE PAID
(5)			
(6)	65		



**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Department of the Treasury  
Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

► **Information about Form 8868 and its instructions is at [www.irs.gov/form8868](http://www.irs.gov/form8868).**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile), click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

## Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Enter filer's identifying number	
	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	<b>ALLIANCE DEFENDING FREEDOM</b>	<b>54-1660459</b>
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
File by the due date for filing your return. See instructions	<b>15100 N 90TH ST</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	<b>SCOTTSDALE, AZ 85260</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) **0 1**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

### MARK FEDDERN - THE ORGANIZATION

- The books are in the care of ► **15100 N. 90TH STREET - SCOTTSDALE, AZ 85260**

Telephone No. ► **480-444-0020**

Fax No. ► **480-444-0027**

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **MAY 15, 2018**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year \_\_\_\_\_ or

► ☒ tax year beginning **JUL 1, 2016**, and ending **JUN 30, 2017**.

**2** If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	<b>0.</b>
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	<b>0.</b>
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	<b>0.</b>

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2017)