

Form **990**

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

OMB No. 1545-0047

**2015**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ 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).

**A** For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

<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 <b>EDEN BRIDGE FOUNDATION</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>901 EDEN ROAD, P.O. BOX 83403</b> City or town, state or province, country, and ZIP or foreign postal code <b>LANCASTER, PA 17608-1201</b> <b>F</b> Name and address of principal officer: <b>ROBERT TEAGUE</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <b>02-0714460</b> <b>E</b> Telephone number <b>717-560-8270</b> <b>G</b> Gross receipts \$ <b>10,610,812.</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.EDENBRIDGEFOUNDATION.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>2003</b>
<b>M</b> State of legal domicile: <b>PA</b>		

**Part I Summary**

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities: <b>TO PROVIDE SUPPORT TO LANCASTER BIBLE COLLEGE AND OTHER CHRISTIAN ORGANIZATIONS BY MAKING GIFTS OR</b> 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) ..... <b>3</b> 4 Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>4</b> 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) ..... <b>5</b> 6 Total number of volunteers (estimate if necessary) ..... <b>7</b> 7a Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>0.</b> 7b Net unrelated business taxable income from Form 990-T, line 34 ..... <b>0.</b>	<b>9</b>	<b>7</b>	<b>2</b>	<b>7</b>	<b>0.</b>	<b>0.</b>
<b>Revenue</b>	8 Contributions and grants (Part VIII, line 1h) ..... <b>7,647,054.</b> 9 Program service revenue (Part VIII, line 2g) ..... <b>49,756.</b> 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>427,585.</b> 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>0.</b> 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>8,124,395.</b>	<b>Prior Year</b>	<b>Current Year</b>				
<b>Expenses</b>	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) ..... <b>7,075,199.</b> 14 Benefits paid to or for members (Part IX, column (A), line 4) ..... <b>0.</b> 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>110,835.</b> 16a Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>0.</b> b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>132,823.</b> 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ..... <b>115,163.</b> 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>7,301,197.</b> 19 Revenue less expenses. Subtract line 18 from line 12 ..... <b>823,198.</b>	<b>7,075,199.</b>	<b>3,616,540.</b>				
<b>Net Assets or Fund Balances</b>	20 Total assets (Part X, line 16) ..... <b>8,872,409.</b> 21 Total liabilities (Part X, line 26) ..... <b>1,655,853.</b> 22 Net assets or fund balances. Subtract line 21 from line 20 ..... <b>7,216,556.</b>	<b>Beginning of Current Year</b>	<b>End of Year</b>				
		<b>8,872,409.</b>	<b>11,487,210.</b>				
		<b>1,655,853.</b>	<b>1,493,440.</b>				
		<b>7,216,556.</b>	<b>9,993,770.</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 <b>ROBERT TEAGUE, EXECUTIVE DIRECTOR</b> Type or print name and title	Date	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>STACY CULLEN</b>	Preparer's signature <i>Cullen</i>	Date <b>05/15/17</b>
	Firm's name ▶ <b>TAIT, WELLER &amp; BAKER LLP</b>	Firm's EIN ▶ <b>23-1144520</b>	Check <input type="checkbox"/> if self-employed PTIN <b>P00974308</b>
	Firm's address ▶ <b>1818 MARKET STREET; SUITE 2400 PHILADELPHIA, PA 19103</b>	Phone no. <b>215.979.8800</b>	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE EDEN BRIDGE FOUNDATION PROVIDES SUPPORT TO LANCASTER BIBLE COLLEGE AND OTHER CHRISTIAN ORGANIZATIONS BY MAKING GIFTS OR GRANTS, BY PROVIDING ASSISTANCE TO THE COLLEGE AND OTHER CHRISTIAN ORGANIZATIONS WITH FUNDRAISING AND OTHER EDUCATIONAL ACTIVITIES AND BY PROVIDING

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, 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 \$ 3,624,841. including grants of \$ 3,616,540. ) (Revenue \$ 56,254. ) THE EDEN BRIDGE FOUNDATION PROVIDES SUPPORT TO LANCASTER BIBLE COLLEGE AND OTHER CHRISTIAN ORGANIZATIONS BY MAKING GIFTS OR GRANTS, BY PROVIDING ASSISTANCE TO THE COLLEGE AND OTHER CHRISTIAN ORGANIZATIONS WITH FUNDRAISING AND OTHER EDUCATIONAL ACTIVITIES AND BY PROVIDING OTHER SUPPORT TO SAID ORGANIZATIONS.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 3,624,841.

**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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Main form table with columns for question numbers (1a-14b), Yes, and No. Includes questions about Form 1096, Form W-2G, Form W-3, unrelated business gross income, foreign accounts, prohibited tax shelter transactions, and charitable contributions.

**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**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?	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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		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?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	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		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?	X	
11b	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	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		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?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
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?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **PA**
- 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: **ROBERT TEAGUE - 717-560-8270**  
**901 EDEN ROAD, LANCASTER, PA 17608**

**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) MR. WILLIAM POOLE CHAIRMAN	5.00	X		X				0.	0.	0.
(2) MR. MICHAEL GEER VICE CHAIRMAN	5.00	X		X				0.	0.	0.
(3) DR. MATT MASON TREASURER	5.00 50.00	X		X				0.	84,816.	14,595.
(4) MR. RANDY MOYER SECRETARY	5.00	X		X				0.	0.	0.
(5) MR. PHILIP CLEMENS DIRECTOR	5.00	X						0.	0.	0.
(6) DR. PETER W. TEAGUE DIRECTOR	5.00 40.00	X						0.	180,000.	49,892.
(7) MR. MICHAEL VAN BELLE DIRECTOR	5.00	X						0.	0.	0.
(8) MR. SCOTT KEATING PRESIDENT	5.00	X		X				0.	0.	0.
(9) MR. BILL BOOK DIRECTOR	5.00	X						0.	0.	0.
(10) MR. ROBERT TEAGUE EXECUTIVE DIRECTOR	50.00			X				82,469.	0.	0.

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes sub-totals for lines 1b, 1c, and 1d.

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 0

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

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.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Row 1 contains 'NONE'.

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 0



**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>						
	<b>b</b> Membership dues	<b>1b</b>						
	<b>c</b> Fundraising events	<b>1c</b>						
	<b>d</b> Related organizations	<b>1d</b>	120,883.					
	<b>e</b> Government grants (contributions)	<b>1e</b>						
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	6,555,065.					
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		745,393.					
	<b>h Total.</b> Add lines 1a-1f			6,675,948.				
<b>Program Service Revenue</b>	<b>2 a</b> FEE INCOME	<b>Business Code</b>	900099	56,254.	56,254.			
	<b>b</b>							
	<b>c</b>							
	<b>d</b>							
	<b>e</b>							
	<b>f</b> All other program service revenue							
	<b>g Total.</b> Add lines 2a-2f			56,254.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			221,226.			221,226.	
	<b>4</b> Income from investment of tax-exempt bond proceeds							
	<b>5</b> Royalties							
	<b>6 a</b> Gross rents	(i) Real	(ii) Personal					
		<b>b</b> Less: rental expenses						
		<b>c</b> Rental income or (loss)						
		<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		<b>b</b> Less: cost or other basis and sales expenses			3,817,919.			
		<b>c</b> Gain or (loss)			-160,535.			
		<b>d</b> Net gain or (loss)			-160,535.			-160,535.
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>						
		<b>b</b> Less: direct expenses	<b>b</b>					
		<b>c</b> Net income or (loss) from fundraising events						
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
<b>b</b> Less: direct expenses		<b>b</b>						
<b>c</b> Net income or (loss) from gaming activities								
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>							
	<b>b</b> Less: cost of goods sold	<b>b</b>						
	<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>			<b>Business Code</b>					
<b>11 a</b>								
	<b>b</b>							
	<b>c</b>							
	<b>d</b> All other revenue							
<b>e Total.</b> Add lines 11a-11d								
<b>12 Total revenue.</b> See instructions.				6,792,893.	56,254.	0.	60,691.	

**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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,616,540.	3,616,540.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	80,000.	4,000.	12,000.	64,000.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	38,701.	1,935.	5,805.	30,961.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	2,182.		2,182.	
c Accounting	6,000.		6,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	75,987.		75,987.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	13,299.	665.	1,995.	10,639.
14 Information technology	22,339.	1,117.	3,351.	17,871.
15 Royalties				
16 Occupancy				
17 Travel	8,765.	438.	1,315.	7,012.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	784.	39.	118.	627.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	995.		995.	
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				
b				
c				
d				
e All other expenses	2,141.	107.	321.	1,713.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>3,867,733.</b>	<b>3,624,841.</b>	<b>110,069.</b>	<b>132,823.</b>
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**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	
Assets	1	Cash - non-interest-bearing	1,318,924.	1	3,546,479.
	2	Savings and temporary cash investments	73,572.	2	103,817.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	3,466.	4	9,564.
	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		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,629.		
	10b	Less: accumulated depreciation	1,629.	10c	0.
	11	Investments - publicly traded securities	7,476,447.	11	7,827,350.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	8,872,409.	16	11,487,210.	
Liabilities	17	Accounts payable and accrued expenses		17	1,480.
	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	1,644,752.	21	1,481,458.
	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	11,101.	25	10,502.
	26	<b>Total liabilities.</b> Add lines 17 through 25	1,655,853.	26	1,493,440.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	7,216,556.	27	9,993,770.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	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>	7,216,556.	33	9,993,770.	
34	<b>Total liabilities and net assets/fund balances</b>	8,872,409.	34	11,487,210.	

Form 990 (2015)

**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	6,792,893.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,867,733.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,925,160.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,216,556.
5	Net unrealized gains (losses) on investments	5	-145,186.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,759.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,993,771.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
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:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	X	
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?		X
3b	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		

Form 990 (2015)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2015**

Open to Public Inspection

Name of the organization **EDEN BRIDGE FOUNDATION** Employer identification number **02-0714460**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 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 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.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - 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 ..... 1
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 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		
LANCASTER BIBLE COLLEGE	23-1484178	2	X		81,100.	0.
<b>Total</b>					81,100.	0.

**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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
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 .....						
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.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4 .....						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
11 <b>Total support.</b> Add lines 7 through 10						
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 2015 (line 6, column (f) divided by line 11, column (f)) .....	14	%
15 Public support percentage from 2014 Schedule A, Part II, line 14 .....	15	%
16a <b>33 1/3% support test - 2015.</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 type="checkbox"/>	
b <b>33 1/3% support test - 2014.</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 - 2015.</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 - 2014.</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) 2015

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

(Complete only if you checked the box on line 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 Total. 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 Public support. (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. 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 stop here

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

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

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

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. 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 - 2014. 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 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>	X	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		X
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		X
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		X
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		X
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c <b>Substitutions only.</b> 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? <i>If "Yes," provide detail in Part VI.</i>		X
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		X
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		X
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))? <i>If "Yes," provide detail in Part VI.</i>		X
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? <i>If "Yes," provide detail in Part VI.</i>		X
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? <i>If "Yes," provide detail in Part VI.</i>		X
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)? <i>If "Yes," answer 10b below.</i>		X
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		



**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?		X
<b>b</b> A family member of a person described in (a) above?		X
<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.		X

**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.	X	
<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.		X

**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**

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

**a**  The organization satisfied the Activities Test. Complete line 2 below.

**b**  The organization is the parent of each of its supported organizations. Complete line 3 below.

**c**  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 <b>Excess distributions carryover to 2016.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

**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.)

Multiple horizontal lines for supplemental information.

**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.

OMB No. 1545-0047

**2015**

Open to Public Inspection

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

Name of the organization **EDEN BRIDGE FOUNDATION** Employer identification number **02-0714460**

**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	55	8
2 Aggregate value of contributions to (during year)	6,555,065.	
3 Aggregate value of grants from (during year)	3,616,540.	61,773.
4 Aggregate value at end of year	9,987,155.	1,481,458.
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 checked="" 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 checked="" 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).  
 Preservation of land for public use (e.g., recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space
- 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 ▶ \$ \_\_\_\_\_

**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 exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

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:

	Amount
c Beginning balance	1,644,752.
d Additions during the year	
e Distributions during the year	163,294.
f Ending balance	1,481,458.

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment  %
- b Permanent endowment  %
- c Temporarily restricted endowment  %

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:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	

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

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				
b Buildings				
c Leasehold improvements				
d Equipment		1,629.	1,629.	0.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				0.

**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.

(a) Description	(b) Book value
(1) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITY PAYABLE	10,502.
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	10,502.

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

**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	6,571,720.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-145,186.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	-145,186.	
3	Subtract line 2e from line 1	3	6,716,906.	
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	75,987.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	75,987.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,792,893.	

**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	3,791,746.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	0.	
3	Subtract line 2e from line 1	3	3,791,746.	
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	75,987.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	75,987.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,867,733.	

**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 IV, LINE 1B:

THE ASSETS HELD CONSIST OF CRUTS, NIMCRUTS AND ESTATE TRUSTS.

PART X, LINE 2:

MANAGEMENT HAS REVIEWED THE TAX POSITIONS FOR EACH OF THE OPEN TAX YEARS (2013 - 2015) OR EXPECTED TO BE TAKEN IN THE FOUNDATION'S 2016 TAX RETURN AND HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.



SCHEDULE I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

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

Name of the organization **EDEN BRIDGE FOUNDATION** Employer identification number **02-0714460**

**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.

**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
ADONAI PARTNERS P.O. BOX 4155 SILVER SPRING, MD 20914	20-5797965	501(C)(3)	6,500.	0.			DONATION TO MINISTRY
ADVANCED LIVING, INC. 1290 ALLENTOWN ROAD LANSDALE, PA 19446	23-1654625	501(C)(3)	50,000.	0.			DONATION TO MINISTRY
CALVARY CHURCH OF SOUDERTON 820 ROUTE 113 SOUDERTON, PA 18964	23-1652421	501(C)(3)	144,800.	0.			DONATION TO MINISTRY
ALASKA BIBLE COLLEGE 248 E. ELMWOOD AVE PALMER, AK 99645	94-3255546	501(C)(3)	5,000.	0.			DONATION TO MINISTRY
ALPHA AND OMEGA COMMUNITY CENTER 708 WABANK ST. LANCASTER, PA 17603	23-2792337	501(C)(3)	22,000.	0.			DONATION TO MINISTRY
ASSEMBLIES OF WORLD MISSIONS 1445 BONVILLE AVE SPRINGFIELD, MO 65802	44-0577787	501(C)(3)	50,000.	0.			DONATION TO MINISTRY

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **117.**

3 Enter total number of other organizations listed in the line 1 table **0.**

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

Schedule I (Form 990) (2015)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

**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
BOY SCOUTS OF AMERICA 100 W. 10TH ST. SUITE 915 WILMINGTON, DE 19801	22-1576300	501(C)(3)	12,000.	0.			DONATION TO MINISTRY
BCM INTL 201 GRANITE RUN DRIVE, SUITE 260 LANCASTER, PA 17603	23-6000176	501(C)(3)	20,000.	0.			DONATION TO MINISTRY
JESSICA & FRIENDS COMMUNITY 1625 E. MARKET STREET YORK, PA 17403	23-2991619	501(C)(3)	28,215.	0.			DONATION TO MINISTRY
LANCASTER BIBLE COLLEGE 901 EDEN RD LANCASTER, PA 17601	23-1484178	501(C)(3)	78,700.	0.			DONATION TO MINISTRY
BETHANY BIBLE FELLOWSHIP 75 WEST BROAD STREET HATFIELD, PA 17440	23-2119856	501(C)(3)	13,000.	0.			DONATION TO MINISTRY
PLUMSTEAD CHRISTIAN SCHOOL 5765 OLD EASTON ROAD PLUMSTEADVILLE, PA 18949	23-6050604	501(C)(3)	20,000.	0.			DONATION TO MINISTRY
CHILDREN'S JUBILEE FUND PO BOX 27709 PHILADELPHIA, PA 19118	31-1540887	501(C)(3)	24,000.	0.			DONATION TO MINISTRY
THREE SPRINGS MINISTRIES 874 LINCK HILL RD MORRIS, PA 16938	25-1592506	501(C)(3)	137,500.	0.			DONATION TO MINISTRY
AMBASSADORS FOR CHRIST 21 AMBASSADOR DRIVE PARADISE, PA 17562	58-1303476	501(C)(3)	33,900.	0.			DONATION TO MINISTRY

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
BETHANY CHRISTIAN SERVICES 7827 OLD YORK ROAD ELKINS PARK, PA 19027	23-2398599	501(C)(3)	24,500.	0.			DONATION TO MINISTRY
CALVARY BIBLE CHURCH 629 UNION SCHOOL ROAD MT JOY, PA 17552	23-6282026	501(C)(3)	37,450.	0.			DONATION TO MINISTRY
CHRISTIAN FELLOWSHIP CHURCH 758 SPRUCE ROAD NEW HOLLAND, PA 17557	23-2187262	501(C)(3)	8,000.	0.			DONATION TO MINISTRY
C.S. LEWIS P.O. BOX 6930 MCLEAN, VA 22106	54-1802015	501(C)(3)	40,000.	0.			DONATION TO MINISTRY
DAWSON MCALISSTER ASSOCIATION 10000 N. OAK TRFY KANSAS CITY, MO 64155	23-1352564	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
BLACK ROCK RETREAT 1345 KIRKWOOD PIKE QUARRYVILLE, PA 17566	23-1683475	501(C)(3)	80,000.	0.			DONATION TO MINISTRY
CAMP HEBRON 957 CAMP HEBRON RD HALIFAX, PA 17032	23-6050517	501(C)(3)	5,000.	0.			DONATION TO MINISTRY
C.B.M.C. INTL 2850 N. SWAN ROAD, SUITE 100 TUCSON, AZ 17225	58-1744271	501(C)(3)	50,000.	0.			DONATION TO MINISTRY DONATION TO MINISTRY DONATION TO MINISTRY
DAYSRING CHRISTIAN ACADEMY 120 COLLEGE AVE MOUNTVILLE, PA 17584	23-2833032	501(C)(3)	71,000.	0.			DONATION TO MINISTRY

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
CHRISTIAN BUSINESS MENS CONFERENCE P.O. BOX 8009 CHATTANOOGA, TN 37414	36-2004402	501(C)(3)	53,000.	0.			DONATION TO MINISTRY
CENTER FOR MINISTRY ADVANCEMENT 820 SOUDERTON ROAD SOUDERTON, PA 18964	23-3100092	501(C)(3)	50,000.	0.			DONATION TO MINISTRY
CHESTNUT HILL MENNONITE CHURCH 4050MARIETTA AVE COLUMBIA, PA 17512	35-2157800	501(C)(3)	9,600.	0.			DONATION TO MINISTRY
HOPE INTERNATIONAL 227 GRANITE RUN DRIVE LANCASTER, PA 17101	23-2836648	501(C)(3)	57,000.	0.			DONATION TO MINISTRY
CENTRAL MANOR CHURCH 387 PENN STREET WASHINGTON BORO, PA 17582	23-1477199	501(C)(3)	30,000.	0.			DONATION TO MINISTRY
EPHRATA UNITED ZION CHURCH 408 E FULTON ST. EPHRATA, PA 17522	52-1718325	501(C)(3)	25,000.	0.			DONATION TO MINISTRY
CHINA CITY TRAINING MINISTRIES 13080 S. VALLEY FORGE ROAD LANSDALE, PA 19446	23-1531260	501(C)(3)	30,000.	0.			DONATION TO MINISTRY
MOODY BIBLE INSTITUTE 6719 R. RUTTER AVE SPOKANE, WA 99212	36-2167792	501(C)(3)	6,000.	0.			DONATION TO MINISTRY
COLUMBIA INTERNATIONAL UNIVERSITY 7435 MONTICELLO ROAD COLUMBIA, SC 29203	57-0352247	501(C)(3)	125,300.	0.			DONATION TO MINISTRY

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.)

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ROSEDALE BAPTIST CHURCH 9202 PHILADELPHIA RD BALTIMORE, MD 21237	22-1860090	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
CHILDREN'S SCHOLARSHIP FUND 100 S. BROAD STREET PHILADELPHIA, PA 19110	23-3078729	501(C)(3)	5,000.	0.			DONATION TO MINISTRY
CHRISTIAN LEGAL CLINICS 4455 N 6TH ST. PHILADELPHIA, PA 19140	83-0473312	501(C)(3)	20,000.	0.			DONATION TO MINISTRY
YOUTH WITH A MISSION 4444 EDGAR PARK AVENUE EL PASO, TX 79904	74-2238973	501(C)(3)	5,240.	0.			DONATION TO MINISTRY
CHRISTOPHER DOCK MENNONITE HIGH SCHOOL - 1000 FORTY FOOT ROAD - LANSDALE, PA 19446	23-1445670	501(C)(3)	5,000.	0.			DONATION TO MINISTRY
COMMUNITY AT ROCK HILL 3250 STATE ROAD SELLERSVILLE, PA 18960	23-1472520	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
CROSSWORLD 10000N. OAK TRFY KANSAS CITY, MO 64155	23-1352564	501(C)(3)	25,000.	0.			DONATION TO MINISTRY
CAIRN UNIVERSITY 200 MANOR AVE. LANGHORNE, PA 19047	23-0973290	501(C)(3)	10,300.	0.			DONATION TO MINISTRY
CALVARY MONUMENT BIBLE CHURCH 1660 MINE RD PARADISE, PA 17562	23-2114890	501(C)(3)	20,000.	0.			DONATION TO MINISTRY

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
DONORS TRUST 1800 DIAGONAL ROAD, SUITE 280 ALEXANDRIA, VA 22314	52-2166327	501(C)(3)	20,000.	0.			DONATION TO MINISTRY
ELIZABETHTOWN CHURCH OF THE BRETHREN - 777 MOUNT JOY ST - ELIZABETHTOWN, PA 17022	23-7177016	501(C)(3)	12,050.	0.			DONATION TO MINISTRY
EPHRATA CHURCH OF THE BRETHREN 201 CRESCENT AVE EPHRATA, PA 17522	36-2167026	501(C)(3)	6,000.	0.			DONATION TO MINISTRY
CROWN FINANCIAL MINISTRIES 9 MARKET SQUARE, SUITE 202 KNOXVILLE, TN 37902	58-1260812	501(C)(3)	75,500.	0.			DONATION TO MINISTRY
CHRISTIAN COUNSELING AND EDUCATION FOUNDATION - 1803 EAST WILLOW GROVE AVE - GLENSIDE, PA 19038	23-1996251	501(C)(3)	30,000.	0.			DONATION TO MINISTRY
FIRST BAPTIST CHURCH OF LANSDALE 700 N. BROAD STREET LANSDALE, PA 19446	23-1522991	501(C)(3)	30,000.	0.			DONATION TO MINISTRY
CHRIST'S HOME 800 N. YORK ROAD WARMINSTER, PA 18974	23-1624905	501(C)(3)	34,500.	0.			DONATION TO MINISTRY
FOR ALL SAINTS MINISTRIES P.O. BOX 41337 SAN JOSE, CA 95160	33-0733628	501(C)(3)	20,000.	0.			DONATION TO MINISTRY
FRANCONIA MENNONITE CAMP ASSOCIATION - 100 FORTY FOOT ROAD - LANSDALE, PA 19446	23-1736496	501(C)(3)	150,000.	0.			DONATION TO MINISTRY

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
FRIENDS IN ACTION P.O. BOX 323 ELIZABETHTOWN, PA 17022	77-0296087	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
GREATER EUROPE MISSION 18940 BASE CAMP RD. MONUMENT, CO 80132	23-2306606	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
GLOBAL ASSISTANCE PARTNER 1232 N. PALM STREET LA HABRA, CA 90631	95-4869431	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
HAGGAI INSTITUTE OP.O. BOX 13 ATLANTA, GA 30370	58-0898309	501(C)(3)	102,000.	0.			DONATION TO MINISTRY
HARVEY CEDARS BIBLE CONFERENCE 12 CEDARS AVE HARVEY CEDARS, NJ 08008	21-6000708	501(C)(3)	20,000.	0.			DONATION TO MINISTRY
HAYCOCK CAMPING MINISTRIES 3100 SCHOOL RD KINTERSVILLE, PA 18930	23-1743966	501(C)(3)	30,000.	0.			DONATION TO MINISTRY
HEMPFIELD BRETHERN IN CHRIST 2600 MARIETTA AVE LANCASTER, PA 17601	25-1687179	501(C)(3)	11,000.	0.			DONATION TO MINISTRY
INDIAN CREEK FOUNDATION 420 COWPATH RD SOUDERTON, PA 18964	23-3330096	501(C)(3)	20,000.	0.			DONATION TO MINISTRY
IVY HILL FOUNDATION 1811 MILL ROAD PERKASIE, PA 18944	23-3003460	501(C)(3)	7,500.	0.			DONATION TO MINISTRY

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
INTERNATIONAL JUSTICE MISSION PO BOX 58147 WASHINGTON, DC 20037	54-1722887	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
INTERNATIONAL THERAPY 231 ADRIAN COURT LANSDALE, PA 19446	27-3487746	501(C)(3)	8,000.	0.			DONATION TO MINISTRY
JONI AND FRIENDS PO BOX 3333 AGOURA HILLS, CA 91376	95-3402002	501(C)(3)	9,900.	0.			DONATION TO MINISTRY
KINGDOM BUILDERS NETWORK 4455 N. 6TH STREET PHILADELPHIA, PA 19140	27-3402139	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
KEYSTONE OPPORTUNITY CENTER 104 MAIN STREET, BOX 64183 SOUDERTON, PA 18964	23-2602243	501(C)(3)	17,000.	0.			DONATION TO MINISTRY
ESPERANZA HEALTH 4417 N 6TH ST PHILADELPHIA, PA 19140	23-2480701	501(C)(3)	25,000.	0.			DONATION TO MINISTRY
LITITZ CHRISTIAN SCHOOL 501 W. LINCOLN AVE LITITZ, PA 17543	23-1887649	501(C)(3)	14,750.	0.			DONATION TO MINISTRY
LOVE 146 P.O. BOX 8266 NEW HAVEN, CT 06530	20-1168284	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
MAMA PROJECT 2781 A GERRYVILLE PIKE PENNSBURG, PA 18073	23-2992647	501(C)(3)	50,000.	0.			DONATION TO MINISTRY

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
MAKE IT RAIN 335 FREED ROAD HARLEYSVILLE, PA 19436	46-1070187	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
PENNSYLVANIA SPCA 350 E. ERIE AVE PHILADELPHIA, PA 19134	23-1352269	501(C)(3)	25,000.	0.			DONATION TO MINISTRY
MANHEIM BRETHREN IN CHRIST 54 N. PENRYN ROAD MANHEIM, PA 17545	27-0284129	501(C)(3)	5,000.	0.			DONATION TO MINISTRY
MANNA ON MAIN STREET 713 W. MAIN STREET LANSDALE, PA 19446	23-2287252	501(C)(3)	15,000.	0.			DONATION TO MINISTRY
MCC MENNONITE RESOURCE CENTER 737 HAGEY CENTER DRIVE SOUDERTON, PA 18964	92-0183355	501(C)(3)	50,400.	0.			DONATION TO MINISTRY
MISSION KIDS 9P.O. BOX 4313 BLUE BELL, PA 19422	14-1975929	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
NEFFSVILLE MENNONITE CHURCH 2371 LITITZ PIKE LANCASTER, PA 17601	35-2157800	501(C)(3)	11,200.	0.			DONATION TO MINISTRY
NEW LIFE YOUTH AND FAMILY 585 FREEMAN SCHOOL ROAD SCHWENKSVILLE, PA 19473	23-1433895	501(C)(3)	15,000.	0.			DONATION TO MINISTRY
HABITAT FOR HUMANITY 533 FOUNDRY ROAD WEST NORRITON, PA 19403	25-1755227	501(C)(3)	15,000.	0.			DONATION TO MINISTRY

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
NEW HOPE UGANDA PO BOX 154 BELLE FOURCHE, SD 57717	95-1570304	501(C)(3)	6,000.	0.			DONATION TO MINISTRY
HOUSE ON THE ROCK FAMILY MINISTRIES - 222 S.MARKET ST - ELIZABETHTOWN, PA 17022	20-0628342	501(C)(3)	9,000.	0.			DONATION TO MINISTRY
NEW TRIBES MISSION 1000 E 1ST ST. SANDFORD, GA 32771	36-6024926	501(C)(3)	5,000.	0.			DONATION TO MINISTRY
NORTH PENN AND INDIAN VALLEY MINISTRIES - P.O. BOX 103 - LANSDALE, PA 19446	23-7164617	501(C)(3)	50,000.	0.			DONATION TO MINISTRY
OXFORD CIRCLE CHRISTIAN COMMUNITY DEVELOPMENT - 900 EAST HOWELL STREET - PHILADELPHIA, PA 19149	20-4984694	501(C)(3)	26,000.	0.			DONATION TO MINISTRY
LCBC 4150 CHAMBERS HILL ROAD HARRISBURG, PA 17111	23-2439175	501(C)(3)	20,000.	0.			DONATION TO MINISTRY
PEACEFUL LIVING 2210 SHELLY ROAD, SUITE 2 HARLEYSVILLE, PA 19438	23-3062613	501(C)(3)	35,000.	0.			DONATION TO MINISTRY
PENN VIEW BIBLE INSTITUTE PO BOX 970 PENNS CREEK, PA 17862	23-6296855	501(C)(3)	117,000.	0.			DONATION TO MINISTRY
LIGHTHOUSE NETWORK 13639 ALLAMANDA CIRCLE FORT CHARLOTTE, FL 33961	20-0431950	501(C)(3)	10,500.	0.			DONATION TO MINISTRY

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PERRY HALL BAPTIST CHURCH 3919 SCHROEDER AVE PERRY HALL, MD 21236	62-1629306	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
SCRIPTURE UNION PO BOX 215 VALLEY FORGE, PA 19481	25-1228715	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
PHILHAVEN 283 SOUTH BUTLER ROAD MOUNT GRETN, PA 17064	23-1548822	501(C)(3)	5,250.	0.			DONATION TO MINISTRY
PUSH THE ROCK 647 WALNUT STREET EMMAUS, PA 18049	23-2990640	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
YOUNG LIFE 130 LENAPE DRIVE BERWYN, PA 19312	84-0385934	501(C)(3)	15,000.	0.			DONATION TO MINISTRY
WYCLIFFE BIBLE TRANSLATORS P.O. BOX 628200 ORLANDO, FL 32862	95-1831097	501(C)(3)	7,750.	0.			DONATION TO MINISTRY
TEEN CHALLENGE TRAINING CENTER 33 TEEN CHALLENGE ROAD, PO BOX 98 REHRERSBURG, PA 19550	23-1731792	501(C)(3)	52,400.	0.			DONATION TO MINISTRY
MESSIAH COLLEGE ONE COLLEGE AVE SUITE 3010 MECHANICSBURG, PA 17055	23-1352661	501(C)(3)	20,500.	0.			DONATION TO MINISTRY
MISSION AVIATION FELLOWSHIP P.O. BOX 47 NAMPA, ID 83653	96-1920987	501(C)(3)	9,980.	0.			DONATION TO MINISTRY

Schedule I (Form 990)

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WORTHWHILE WEAR P.O. BOX 660 SILVERDALE, PA 18962	45-5081795	501(C)(3)	70,000.	0.			DONATION TO MINISTRY
WORD OF LIFE CHRISTIAN CENTER 854 S. OLD BALTIMORE PIKE NEWARK, DE 19702	51-0303455	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
WHITE OAK CHURCH OF THE BRETHREN 1211 N. PENRYN ROAD MANHEIM, PA 17545	36-2167026	501(C)(3)	7,250.	0.			DONATION TO MINISTRY
ROCKVILLE EVANGELICAL MISSION 9009 SHADY GROVE CT GAITHERSBURG, MD 20877	52-1950680	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
ONE LIFE ISTITUTE 901 EDEN ROAD LANCASTER, PA 17601	61-1525165	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
RAMESH RICHARD EVANGELISM AND CHURCH HEALTH - 17110 DALLAS PKWY #230 - DALLAS, TX 75248	75-2181879	501(C)(3)	76,700.	0.			DONATION TO MINISTRY
SEND INTL 4227 SPENARD ROAD UNIT B ANCHORAGE, AL 99517	41-0713904	501(C)(3)	7,000.	0.			DONATION TO MINISTRY
SHINING LIGHT MINISTRIES 1600 N STE. 934 ANNVILLE, PA 17003	25-1847018	501(C)(3)	50,000.	0.			DONATION TO MINISTRY
SUSQUEHANNA VALLEY PREGNANCY SERVICES - P.O. BOX 707 - LEBANON, PA 17042	25-1506510	501(C)(3)	6,600.	0.			DONATION TO MINISTRY

Schedule I (Form 990)

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RAINBOWS END YOUTH 105 FAIRVIEW ST. MOUNT JOY, PA 17552	23-2654513	501(C)(3)	10,000.	0.			DONATION TO MINISTRY
SAMARITANS PURSE P.O. BOX 3000 BOONE, NC 28607	58-1437002	501(C)(3)	8,300.	0.			DONATION TO MINISTRY
TOWAMENCIN MENNONITE CHURCH P.O. BOX 225 KULPSVILLE, PA 17443	35-2157800	501(C)(3)	32,550.	0.			DONATION TO MINISTRY
SERVINGLEADERS MINISTRIES 107 EAST CHESTNUT ST. WEST CHESTER, PA 19380	56-2674055	501(C)(3)	5,000.	0.			DONATION TO MINISTRY
TRANSPORT FOR CHRIST P.O. BOX 117 MARIETTA, PA 17547	38-2013299	501(C)(3)	10,500.	0.			DONATION TO MINISTRY
UNIVEST FOUNDATION 14 NORTH MAIN STREET SOUDERTON, PA 18964	01-0702102	501(C)(3)	30,000.	0.			DONATION TO MINISTRY
SUMMIT CHRISTIAN ACADEMY 660 GRIFFIN POND ROAD SOUTH ABINGDON TOWNSHIP, PA 18411	27-1962061	501(C)(3)	60,000.	0.			DONATION TO MINISTRY
VALLEY FORGE BAPTIST TEMPLE 616 S. TRAPPE ROAD COLLEGEVILLE, PA 19426	25-1481355	501(C)(3)	100,000.	0.			DONATION TO MINISTRY
THE CITY SCHOOL 860 NORTH 24TH ST. PHILADELPHIA, PA 19130	23-2073123	501(C)(3)	45,000.	0.			DONATION TO MINISTRY

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
VICTORY MINISTRIES 64742 S VICTORY RD SUTTON, AK 99674	92-0143034	501(C)(3)	7,000.	0.			DONATION TO MINISTRY
WOODCREST RETREAT 225 WOODCREST RD EPHRATA, PA 17522	23-7346138	501(C)(3)	5,000.	0.			DONATION TO MINISTRY
WORLDWIDE CHRISTIAN CHURCHES 1125 N ALMANSOR ST ALHAMBRA, CA 91801	95-4541371	501(C)(3)	10,000.	0.			DONATION TO MINISTRY

**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 non-cash assistance

**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:

AMBASSADOR FOUNDATION CAREFULLY SCREENS ORGANIZATIONS BEFORE PROVIDING GRANTS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ADONAI PARTNERS

(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION TO MINISTRY  
DONATION TO MINISTRY.