EXTENSION GRANTED THROUGH 11/15/17 Return of Private Foundation

Form **990-PF** Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No. 1545-0052

For	alen	dar year 2016 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	number
Н	UN	T ALTERNATIVES			04-3397500	
Nun	ber a	nd street (or P.O. box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		MT AUBURN ST.		205	(617) 995-	1900
		own, state or province, country, and ZIP or foreign p BRIDGE, MA 02138	ostal code		C If exemption application is p	ending, check here
		all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	check here
u c	Heck	Final return	Amended return	inter public charty	1. Torcigit organizations	, cricor rior o
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
н (heck	type of organization: X Section 501(c)(3) ex			E If private foundation sta	
$\ddot{\Box}$	_	31 3	Other taxable private founda	ution	under section 507(b)(1)	
I Fa		arket value of all assets at end of year J Accounti		X Accrual	F If the foundation is in a	• •
		Part II. col. (c). line 16)	ther (specify)		under section 507(b)(1)	
>		941,242. (Part I, colu	mn (d) must be on cash t	oasis.)		
Pa	rt I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	10,899,271.			
	2	Check if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	349.	349.	349.	STATEMENT 1
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a				
eve	7	Capital gain net income (from Part IV, line 2)		0.		
Œ	8	Net short-term capital gain		water to the second of the sec	0.	
	9	Income modifications				
	10a	Gross sales less returns and allowances		101010000000000000000000000000000000000		
		Less: Cost of goods sold	1			
	C	Gross profit or (loss)		0.	116	STATEMENT 2
	11	Other income	146. 10,899,766.	349.	495.	STATEMENT 2
	12	Total. Add lines 1 through 11	190,508.	0.		197,071.
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages	2,965,119.	0.	0.	2,945,971.
	14 15	Pension plans, employee benefits	670,309.	0.	0.	679,244.
es		Legal fees STMT 3	7,051.	0.		
ens		Accounting fees STMT 4	18,833.	0.		12,583.
Expense	c	Other professional fees STMT 5	4,621,073.	0.	0.	4,658,067.
Ş		Interest				
rati	18	Taxes				
nist	19	Depreciation and depletion	70,363.	0.		
Ē	20	Occupancy	604,081.	0.	·	610,196.
Ä	21	Travel, conferences, and meetings	572,240.	0.	· · · · · · · · · · · · · · · · · · ·	624,111.
ä	22	Printing and publications	6,849.	0.		2,290.
ing	23	Other expenses STMT 6	127,283.	0.	0.	124,722.
rat	24	Total operating and administrative	0 052 700	0.	0.	9,862,425.
Operating and Administrative	o F	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	9,853,709. 984,239.	<u> </u>	1	941,594.
		Total expenses and disbursements.	JU4,439.			J 11 / J 2 4 ·
	26	Add lines 24 and 25	10,837,948.	0.	0.	10,804,019.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	61,818.			
		Net investment income (if negative, enter -0-)		. 349.		
		Adjusted net income (if negative, enter -0-)			495.	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of	·
L	art	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	315,070.	378,245.	378,245.
		Savings and temporary cash investments			
	1	Accounts receivable ► 6,743.			
		Less: allowance for doubtful accounts ▶	112,013.	6,743.	6,743.
	4	Pledges receivable ►			
		Less; allowance for doubtful accounts ▶			
	5	Grants receivable	141,312.	84,096.	84,096.
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges	83,530.	111,412.	111,412.
As		Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
	''	Less: accumulated depreciation			
	12	Investments - mortgage loans			
		Investments - other			
	14	Land, buildings, and equipment: basis ► 858,305.			
	14	Less: accumulated depreciation STMT 7 497,559.	431,109.	360,746.	360,746.
	15	Other assets (describe	4 31,103.	300,740.	300,710.
	1	Total assets (to be completed by all filers - see the			
	10	•	1,083,034.	941,242.	941,242.
	17	instructions. Also, see page 1, item I)	1,001,202.	847,207.	741,444.
	1	Accounts payable and accrued expenses	1,001,202.	047,207	
		Grants payable			
ies	}	Deferred revenue			
Liabilities	1	Loans from officers, directors, trustees, and other disqualified persons			
Ľ.	21	Mortgages and other notes payable	573,230.	523,615.	
	22	Other liabilities (describe ► STATEMENT 8)	3/3,230.	<u> </u>	
	-	Table 19-6-1992 - a (add lines 47 through 90)	1,574,432.	1,370,822.	
	23	Total liabilities (add lines 17 through 22)	1,314,434.	1,310,022.	
	İ	Foundations that follow SFAS 117, check here X			
Ś	l	and complete lines 24 through 26 and lines 30 and 31.	F76 700	420 500	
nce	24	Unrestricted	<u>-576,708.</u>	-429,580.	
Net Assets or Fund Balances	25	Temporarily restricted	85,310.	U •	
e P	26	Permanently restricted		***************************************	
5		Foundations that do not follow SFAS 117, check here >			
P	l	and complete lines 27 through 31.			
ţ	27	Capital stock, trust principal, or current funds			
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	401 200	420 E00	
ž	30	Total net assets or fund balances	-491,398.	-429,580.	
	31	Total liabilities and net assets/fund balances	1,083,034.	941,242.	
P	art				
		I net assets or fund balances at beginning of year - Part II, column (a), line	30	1 1	
•		st agree with end-of-year figure reported on prior year's return)		1	-491,398.
2	•	r amount from Part I, line 27a		1 1	61,818.
		r increases not included in line 2 (itemize)			0.
		lines 1, 2, and 3		1 . 1	-429,580.
		eases not included in line 2 (itemize)		5	0.

-429,580.

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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

1a			s. MLC Co.)		D	- Don	equired hase ation	(1110., 02	ay, yr.)	(d) Date sold (mo., day, yr.)
b	NONE									
	· · · · · · · · · · · · · · · · · · ·									
d					 			.,,.		
e		3 Diati-a allad	(-) (/L) Co	in an (1000)	
(e) Gross	sales price (f) Depreciation allowed (or allowable)		st or other basis expense of sale					in or (loss) (f) minus (
<u>a</u>										
<u>b</u>										
<u>C</u>										
d										
Complete only	/ for assets showing gain	in column (h) and owned by	the foundation	on 12/31/69			(1) (raine (Co	ol (b) goin	minue
- Complete oni	y for assets showing gam	(j) Adjusted basis	T	cess of col. (i)			col. (1	c), but n	ol. (h) gain ot less than	-0-) or
(i) F.M.V. as	of 12/31/69	as of 12/31/69		col. (j), if any	l			_osses (from col. (I	1))
a										
b				***************************************						
C										
d										
е										
2 Canital nain ne	t income or (net capital los	(SS) $\begin{cases} If gain, also ente \\ If (loss), enter -0 \end{cases}$	r in Part I, line	7 7	}	2				
, ,	•	•			.)					
If gain, also en	capital gain or (loss) as d ter in Part I, line 8, columr -0- in Part I, line 8		10 (0):		}	3				
Part V Qu	alification Under	Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inco	me		
Was the foundatio	ation does not qualify unde	plank. 12 tax on the distributable an er section 4940(e). Do not co lumn for each year; see the i	omplete this pa	rt.						Yes X No
Base	(a) period years or tax year beginning in)	(b) Adjusted qualifying dis	stributions	Net value of no	(c) onchar		use assets	(Distrib	(d) ution ratio ded by col. (c))
Oalendar year (2015		6,464.		1	.02	1,012.		00.11 (2) 0.11	12.934680
	2014		0,485.				3,744.			5.857972
	2013		0,225.				0,587.		***************************************	2.796063
	2012		5,646.				6,760.			3.287857
••••	2011	5,99	7,009.		1	<u>, 35</u>	<u>8,677.</u>			4.413859
2 Total of line 1,	column (d)		,					2		29.290431
3 Average distrib	ution ratio for the 5-year t	ase period - divide the total	on line 2 by 5,	or by the number	of ye	ars				
the foundation	has been in existence if le	ss than 5 years			•••••			3		5.858086
4 Enter the net va	alue of noncharitable-use	assets for 2016 from Part X,	line 5	•••••				4		964,516.
5 Multiply line 4	by line 3							5	ļ	5,650,218.
6 Enter 1% of ne	t investment income (1%	of Part I, line 27b)						6		3.
7 Add lines 5 and	16							7		5,650,221.
		II, line 4						8	10	0,804,019.
If line 8 is equa See the Part VI		check the box in Part VI, line	e 1b, and comp	lete that part usin	ig a 19	% tax ı	rate.			

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	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see II	nstru	ictio	ns)
12	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
ŧ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%				<u>3.</u>
	of Part I, line 27b				
c	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2				0.
3	Add lines 1 and 2				3.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				<u>3.</u>
	Credits/Payments:				
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a				
	Exempt foreign organizations - tax withheld at source 6b				
	: Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld 6d				
	Total credits and payments. Add lines 6a through 6d 7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				3.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	***************************************			
	Enter the amount of line 10 to be: Credited to 2017 estimated tax	***************************************			
	art VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
18	any political campaign?		1a		X
			1b		X
E	, , , , , , , , , , , , , , , , , , , ,		(U		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?		1c		X
6	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$				
ε	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X_
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	n If "Yes," has it filed a tax return on Form 990-T for this year?		4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	<u> </u>
ρ.	Enter the states to which the foundation reports or with which it is registered (see instructions)				
oá	MA, DC, CO, MD, VA, NY, FL, OR, UT, WA, PA, IL, CA				
	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
0	of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT	9	8b		х
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		UD		
J	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	Х	
in	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	- 41	X
U	עונע מווץ אינו אינו אינו אינו אינו אינו אינו אינו		1)-PF	(2016)
					·

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Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privilege			
	If "Yes," attach statement (see instructions)			x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► HUNTALTERNATIVES.ORG			
14	The books are in care of ▶ HUNT ALTERNATIVES LLC Telephone no. ▶ (6	17) 995	5-19	75
	Located at ► 625 MT AUBURN ST., STE 205, CAMBRIDGE, MA ZIP+4			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year 15		I/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	<u> </u>	Yes	No
	securities, or other financial account in a foreign country?	16	1	х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		***************************************	L
L	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
12	a During the year did the foundation (either directly or indirectly):		1.00	
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	7 No.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	_ III		
	a disqualified person?	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes	No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes	No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	J 140		
	for the benefit or use of a disqualified person)?	T No.		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	ן אור		
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	7 810		
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	טוו ב		
U				х
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		-	
_	Organizations relying on a current notice regarding disaster assistance check here			•
Ü	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1.4.		•
•	before the first day of the tax year beginning in 2016?	1c	 	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	-		
_	defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
a		7 40		
	before 2016? Yes X	טוא ר		
	If "Yes," list the years \(\sum_{\text{intermediate}} \),,,,			
Ð	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	, , , , , , , , , , , , , , , , , , , ,	/7 04		
	statement - see instructions.) N	/A 2b	 	
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Зa		7		
	• • • • • • • • • • • • • • • • • • • •	ן מאב		
0	b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	/3 5:		
_	Form 4720, to determine if the foundation had excess business holdings in 2016.)		ļ	77
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	X
b	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		l	· ·
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b Form 99	A DF	(00.1C)
		rum 99 '	U-LL	(ZU Ib)

129,931. 28,585. 0. ► 23 Form **990-PF** (2016)

0.

0.

0.

35,537

31,900

40.00

40.00

40.00

40.00

DEP DIR MGMT

DIRECTOR,

DIRECTOR,

161,534.

145,000.

DEMAND ABOLITION

& ADMIN IS

142,192. 31,282.

PARTNERSHIPS

AUBURN ST, STE 205, CAMBRIDGE, MA

NICOLE OUINLAN - HA,625 MT AUBURN

ZIBA CRANMER - HA,625 MT AUBURN ST,

SOKOL SHTYLLA - HA,625 MT AUBURN ST

ST, STE 205, CAMBRIDGE, MA 02138

STE 205, CAMBRIDGE, MA 02138

STE 205, CAMBRIDGE, MA 02138

Total number of other employees paid over \$50,000

Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation HUNT ALTERNATIVES LLC - 625 MT AUBURN ST, STE 205, CAMBRIDGE, MA 02138 MANAGEMENT SERVICES 2,445,107. QUALTRICS, LLC - 2250 N. UNIVERSITY PARKWAY, #48-C, PROVO, UT 84604 94,398. PROGRAM CONSULTING ROOS CONSULTING AB - BERGSGATEN 7, VASTERVIK, 65,544. PROGRAM CONSULTING VASTERVIK, SWEDEN 59331 ANGELYN PRITCHARD BAYLESS 5415 E. CALLE VENTURA, PHOENIX, AZ 85018 63,650. PROGRAM CONSULTING CAROL EDGAR PO BOX 575, FORESTVILLE, CA 95436 MEDIA CONSULTING 40,000. Total number of others receiving over \$50,000 for professional services Part IX-A | Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 5,202,262. SEE STATEMENT 12 2 DEMAND ABOLITION SEEKS TO ERADICATE THE ILLEGAL COMMERCIAL SEX INDUSTRY IN THE UNITED STATES BY COMBATING DEMAND FOR 3,614,543. PURCHASED SEX. 160,239. SEE STATEMENT 13 774,214. SEE STATEMENT 14 Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions. 0. Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must comp	olete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purp	poses:		
	Average monthly fair market value of securities		1a	0.
	Average of monthly cash balances		1b	416,207.
	Fair market value of all other assets		1c	562,997.
	Total (add lines 1a, b, and c)		1d	979,204.
	Reduction claimed for blockage or other factors reported on lines 1a and			,
	1c (attach detailed explanation) 1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	979,204.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instru	ctions)	4	14,688.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, lin		5	964,516.
6	Minimum investment return. Enter 5% of line 5		6	48,226.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) pri foreign organizations check here ► X and do not complete this part.)		nd certain	
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2016 from Part VI, line 5 2a			
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b]	
	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	
P	art XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		Т	
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	10,804,019.
	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., pu		2	
3	Amounts set aside for specific charitable projects that satisfy the:			
	Suitability test (prior IRS approval required)		3a	
	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII		4	10,804,019.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
_	income. Enter 1% of Part I, line 27b		5	3.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			10,804,016.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calcula 4940(e) reduction of tax in those years.			

Form **990-PF** (2016)

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Part XIII Undistributed Income (see i	nstructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI,				
line 7				
2 Undistributed income, if any, as of the end of 2016:				
a Enter amount for 2015 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e				
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016				
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	<u></u>			
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions				
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr				
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election		:		
may be required - see instructions)				
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016		1	1	1

Part XIV Private Operating F	oundations (see ins	structions and Part VII-	A, question 9)		
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo				05/98	
b Check box to indicate whether the foun		ng foundation described in		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed	495.	13,096.	1,155.	5,426.	
b 85% of line 2a	421.	11,132.	982.	4,612.	17,146.
c Qualifying distributions from Part XII,					
line 4 for each year listed	10,804,019.	13,206,466.	9,980,494.	8,110,225.	42,101,204.
d Amounts included in line 2c not	;				
used directly for active conduct of					
exempt activities	941,594.	985,182.	1,271,316.	90,200.	3,288,292.
e Qualifying distributions made directly		:			
for active conduct of exempt activities.					
Subtract line 2d from line 2c	9,862,425.	12,221,284.	8,709,178.	8,020,025.	38,812,912.
3 Complete 3a, b, or c for the alternative test relied upon;					
a "Assets" alternative test - enter:					
(1) Value of all assets	941,242.	1,083,034.	1,144,841.	2,074,578.	5,243,695.
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)	941,242.	1,083,034.	1,144,841.	2,074,578.	5,243,695.
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					0.
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from					
an exempt organization					0.
(4) Gross investment income					0.
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during	the year-see instr	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed i	more than \$5,000). (See s	ection 507(d)(2).)			
SWANEE HUNT					
b List any managers of the foundation wh			or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation ha	is a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here X if the foundation	only makes contributions	to preselected charitable	organizations and does n	ot accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions, co	emplete items 2a, b, c, and	d d.
a The name, address, and telephone num	nber or e-mail address of t	the person to whom appli	cations should be addres	sed:	
		. •			
b The form in which applications should	be submitted and informa	tion and materials they sh	rould include:		
.,		•			
c Any submission deadlines:					
-					
d Any restrictions or limitations on award	ls, such as by geographic	al areas, charitable fields,	kinds of institutions, or o	other factors:	

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Part XV Supplementary Informatio	n (continued)			
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
,				
ABEKAM FOUNDATION	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	
279 POND STREET				
JAMAICA PLAIN, MA 02119				45,000.
ALAMEDA COUNTY DISTRICT ATTORNEY'S	none	GOVERNMENT	DEMAND ABOLITION GRANT	
OFFICE		ENTITY		
1225 FALLON ST.	le le	*		
OAKLAND, CA 94612		<u> </u>		37,500.
APB CONSULTING, LLC	NONE	EXPENDITURE	DEMAND ABOLITION GRANT	
14631 SOUTH THIRD AVE.		RESPONSIBILITY		
PHOENIX, AZ 85045				40,950.
BILATERAL SAFETY CORRIDOR COALITION	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	
121 EAST 31ST ST.				
NATIONAL CITY, CA 91950				60,000.
DOGMON DOLLAND DEDICAMENT	NONE	GOVERNMENT	DEMAND ABOLITION GRANT	
BOSTON POLICE DEPARTMENT	NONE	ENTITY	DEMAND ABOUTION GRANT	
ONE CITY HALL SQUARE, RM. 38 BOSTON MA 02201		ENTITI		15,000.
Total SEE CC	NTTNIATION SHEE	- የጥ(S)	▶ 3a	941 594.
b Approved for future payment				
• Approved for father paymont				
ABEKAM FOUNDATION	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	
279 POND STREET				
JAMAICA PLAIN, MA 02119				5,000.
4				
ALAMEDA COUNTY DISTRICT ATTORNEY'S	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	
OFFICE				
1225 FALLON ST.				
OAKLAND, CA 94612				2,500.
APB CONSULTING, LLC	NONE	EXPENDITURE	DEMAND ABOLITION GRANT	
14631 SOUTH THIRD AVE.		RESPONSIBILITY		
PHOENIX, AZ 85045				9,050.
Total SEE CC	NTINUATION SHEE	ET(S)	▶ 3b	324 116.

Form **990-PF** (2016)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ided by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	COUC				
a					
b			ļ		
<u> </u>			-		
d					
е					
g Fees and contracts from government agencies					
g Fees and contracts from government agencies 2 Membership dues and assessments			-		
3 Interest on savings and temporary cash					
- , , ,			14	349.	
investments 4 Dividends and interest from securities			7.4	349.	
			 		
5 Net rental income or (loss) from real estate:					
a Debt-financed property		White the same to the terms of	 		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			-		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events			-		
10 Gross profit or (loss) from sales of inventory			ļ		
11 Other revenue:					146.
a CREDIT CARD PTS REDEEMED					740•
b			<u> </u>		
c					
d			ļ		
e		0.	 	349.	146.
12 Subtotal. Add columns (b), (d), and (e)					495.
13 Total. Add line 12, columns (b), (d), and (e)				10	493.
(See worksheet in line 13 instructions to verify calculations.)				_	
Part XVI-B Relationship of Activities to	the Acco	omplishment of Ex	æmp	t Purposes	
Line No. Explain below how each activity for which incom			contril	outed importantly to the accor	nplishment of
the foundation's exempt purposes (other than b					
11A TRAVEL TO ADVANCE SOCIA	L CHAN	GE RELATING	TO	WOMEN, PEACE	AND SECURITY
					····

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Part XVII	Information Reg Exempt Organiz		and Transactions an	d Relationships With Nonc	haritabl	е	
the Code a Transfer (1) Cas (2) Othe b Other tra (1) Sale (2) Pure (3) Ren (4) Reir (5) Loa (6) Perf c Sharing d If the ans or service	organization directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly of the control of th	ctly engage in any of the following organizations) or in section 5% on to a noncharitable exempt or exempt organization charitable exempt organization other assets or paid em fes," complete the following schendation. If the foundation received	27, relating to political organizarganization of: ons nployees edule, Column (b) should alwa		1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1b(6) 1c is, other as:		X X X X X X X
column ((d) the value of the goods, ot (b) Amount involved	her assets, or services received. (c) Name of noncharitable		(d) Description of transfers, transactions,	and charing a	ran come	note
		affiliated with, or related to, one		tions described	Yes	[X	□ No
	complete the following sched	ule.					3011
	(a) Name of organ	ization	(b) Type of organization	(c) Description of relation	onship		
Sign Here	prature of officer or trustee	lete. Declaration of preparer (other that	an taxpayer) is based on all informat 11/15/17 Date	atements, and to the best of my knowledge ion of which preparer has any knowledge. CFO Title	May the IRS return with the shown below X Yes	e prepar (see ins	rer
Paid Preparer Use Only	Firm's name ► KAHN	HOPKINS DELO	A & CO. LTD.	Oate Check if self- employed Firm's EIN ▶ 05-	00167		

Form 990-PF (2016)

Phone no. (781)547-8800

WALTHAM, MA 02453

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,		- ·	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CENTER FOR AMERICAN WOMEN & POLITICS RUTGERS UNIV., 191 RYDERS LANE	NONE	·	POLITICAL PARITY GRANT	
NEW BRUNSWICK NJ 08901	*			150,000
CENTER FOR MEDIA JUSTICE	NONE	PIIRI.TC CHARITY	PRIME MOVERS GRANT	
436 14TH STREET	HONE	TODDIC CHIRCITI	TRIMB MOVERED GREAT	
OAKLAND, CA 94612				17,500
CHILDREN AT RISK 2900 LIVE OAK STREET	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	
DALLAS, TX 75204				48,500
CHILDREN AT RISK 2900 WESLAYAN, STE. 400	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	
HOUSTON, TX 77027				48,500
COOK COUNTY SHERIFF'S OFFICE 69 W. WASHINGTON ST.	NONE	GOVERNMENT	DEMAND ABOLITION GRANT	15 145
CHICAGO, IL 60602				15,145
DENVER DISTRICT ATTORNEY'S OFFICE 201 W. COLFAX AVE., DEPT. #801	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	
DENVER, CO 80202		<u> </u>		1,000
DENVER VALE BOARD 201 W. COLFAX AVE.	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	
DENVER, CO 80202				60,000
FUND FOR THE CITY OF NEW YORK, INC. 121 AVENUE OF THE AMERICAS, #6	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	
NEW YORK, NY 10013				10,000
HAVEN/ATL 395 PRYOR ST. SW	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	1 000
ATLANTA, GA 30312 HISPANAS ORGANIZED FOR POLITICAL EQUALITY	NONE	PUBLIC CHARITY	POLITICAL PARITY GRANT	1,000
634 S. SPRING ST. LOS ANGELES, CA 90014				20,000
Total from continuation sheets				743,144

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor NONE PUBLIC CHARITY PRIME MOVERS GRANT HOLLABACK! 30 THIRD AVENUE, #800B 15,000. BROOKLYN, NY 11217 KING COUNTY PROSECUTING ATTORNEY'S NONE GOVERNMENT DEMAND ABOLITION GRANT OFFICE ENTITY 516 3RD AVE. SEATTLE, WA 98104 48,000. PUBLIC CHARITY DEMAND ABOLITION GRANT MY LIFE MY CHOICE NONE 989 COMMONWEALTH AVENUE 3,500. BOSTON, MA 02215 PUBLIC CHARITY POLITICAL PARITY GRANT NATIONAL HISPANIC LEADERSHIP AGENDA NONE 815 16TH STREET NW 20,000. WASHINGTON, DC 20006 NEW ORLEANS WORKERS CENTER FOR RACIAL NONE PUBLIC CHARITY PRIME MOVERS GRANT JUSTICE 217 N. PRIEUR STREET 15,000. NEW ORLEANS, LA 70112 PUBLIC CHARITY DEMAND ABOLITION GRANT ORGANIZATION FOR PROSTITUTION NONE SURVIVORS PO BOX 22635 39,000. SEATTLE, WA 98122 NONE PUBLIC CHARITY DEMAIN ABOLITION GRANT SEATTLE AGAINST SLAVERY PO BOX 95662 12,500. SEATTLE, WA 98145 SOJOURNERS NONE PUBLIC CHARITY PRIME MOVERS GRANT 3333 14TH STREET 5,000. WASHINGTON, DC 20010 THE EPIK PROJECT NONE PUBLIC CHARITY DEMAND ABOLITION GRANT P.O. BOX 545 47,500, VANCOUVER, WA 98666 NONE PUBLIC CHARITY PRIME MOVERS GRANT THE NATIONAL GAY & LESBIAN TASK FORCE 1325 MASSACHUSETTS AVENUE NW 15,000. WASHINGTON, DC 20005 Total from continuation sheets

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient NONE PUBLIC CHARITY DEMAND ABOLITION GRANT THORN 200 PARK AVE. 51,000. NEW YORK, NY 10003 TRUSTEES OF BOSTON UNIVERSITY NONE PUBLIC CHARITY DEMAND ABOLITION GRANT BOSTON UNIVERSITY, 85 E. NEWTON STREET 29,999. BOSTON, MA 02118-2340 PUBLIC CHARITY PRIME MOVERS GRANT WORKING TODAY NONE 408 JAY STREET 22,500. BROOKLYN, NY 11201 YOUTHSPARK INC. NONE PUBLIC CHARITY DEMAND ABOLITION GRANT 395 PRYOR ST. SW 47,500. ATLANTA, GA 30312 Total from continuation sheets ...

Part XV Supplementary Information Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, Purpose of grant or Foundation show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor NONE PUBLIC CHARITY DEMAND ABOLITION GRANT BILATERAL SAFETY CORRIDOR COALITION 121 EAST 31ST ST. NATIONAL CITY, CA 91950 2,500. BOSTON POLICE DEPARTMENT NONE GOVERNMENT DEMAND ABOLITION GRANT ONE CITY HALL SQUARE, RM. 38 ENTITY BOSTON MA 02201 5,000. PUBLIC CHARITY POLITICAL PARITY GRANT CENTER FOR AMERICAN WOMEN & POLITICS NONE RUTGERS UNIV., 191 RYDERS LANE 50,000. NEW BRUNSWICK, NJ 08901 CHILDREN AT RISK NONE PUBLIC CHARITY DEMAND ABOLITION GRANT 2900 LIVE OAK STREET 2,500. DALLAS, TX 75204 PUBLIC CHARITY DEMAND ABOLITION GRANT CHILDREN AT RISK NONE 2900 WESLAYAN, STE. 400 2,500. HOUSTON, TX 77027 PUBLIC CHARITY PRIME MOVERS GRANT COMMUNITY FUTURES COLLECTIVE NONE 221 IDORA AVENUE 15,000. VALLEJO, CA 94591 DENVER VALE BOARD NONE GOVERNMENT DEMAND ABOLITION GRANT ENTITY 201 W. COLFAX AVE. 20,000. DENVER, CO 80202 NONE PUBLIC CHARITY PRIME MOVERS GRANT EYE TO EYE 1430 BROADWAY, ROOM 602 30,000. NEW YORK, NY 10018 GENERATION CITIZEN NONE PUBLIC CHARITY PRIME MOVERS GRANT 175 VARICK STREET 15,000. NEW YORK, NY 10014 PUBLIC CHARITY POLITICAL PARITY GRANT GREEN FOR ALL NONE 1611 TELEGRAPH AVENUE, STE. 600 16,066. OAKLAND, CA 94612 307,566. Total from continuation sheets

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Part XV Supplementary Information 3 Grants and Contributions Approved for Future		<u> </u>		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
GREENPEACE FUND 702 H STREET NW	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	15 000
WASHINGTON, DC 20001				15,000
GROWING POWER, INC. 5500 W. SILVER SPRING DRIVE MILWAUKEE, WI 53218	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	30,000
HOLLABACK! 30 THIRD AVENUE, #800B BROOKLYN, NY 11217	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	. 15,000
KING COUNTY PROSECUTING ATTORNEY'S OFFICE 516 3RD AVE.	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	0.000
SEATTLE, WA 98104				2,000
NEW ORLEANS WORKERS CENTER FOR RACIAL JUSTICE 217 N. PRIEUR STREET	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	
NEW ORLEANS, LA 70112				15,000
ORGANIZATION FOR PROSTITUTION SURVIVORS	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	
PO BOX 22635 SEATTLE, WA 98122				2,000
ROOT CAUSE INSTITUTE 11 AVENUE DE LAFAYETTE	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	
BOSTON, MA 02111				15,000
ROSE COMMUNITY FOUNDATION 600 SOUTH CHERRY ST, #1200	NONE	PUBLIC CHARITY	POLITICAL PARITY GRANT	20, 000
DENVER, CO 80246				20,000
THE EPIK PROJECT P.O. BOX 545 VANCOUVER, WA 98666	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	2,500
UNITED WE DREAM 1900 L STREET NW	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	
WASHINGTON, DC 20036 Total from continuation sheets		1		30,000

Part XV Supplementary Information					
3 Grants and Contributions Approved for Future	re Payment (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	status of recipient	Contribution		
YOUTHSPARK INC.	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT		
395 PRYOR ST. SW	NONE	CODDIC CIMICITI	DEFINITE INDUSTRICE CHART		
ATLANTA, GA 30312			Ť	2,500.	
ATBANTA, GA 30312					
			4		
	,"				
				<u> </u>	
Total from continuation sheets		1	.1		
. Juli il dili dollari da dili dili dili dili dili dili dili	***************************************	· · · · · · · · · · · · · · · · · · ·			

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 . Employer identification number

F	HUNT ALTERNATIVES	04-3397500
Organization type (check	cone):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
• =	n is covered by the General Rul e or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule. See instructions.
General Hule		
_	ion filing Form 990, 990·EZ, or 990·PF that received, during the year, contribution ny one contributor. Complete Parts I and II. See instructions for determining a co	
Special Rules		
sections 509(a)(⁻ any one contribu	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the EZ, line 1. Complete Parts I and II.	13, 16a, or 16b, and that received from
year, total contri	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive butions of more than \$1,000 exclusively for religious, charitable, scientific, literary of cruelty to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, ente purpose. Don't c	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receivens exclusively for religious, charitable, etc., purposes, but no such contributions the here the total contributions that were received during the year for an exclusively complete arry of the parts unless the General Rule applies to this organization be able, etc., contributions totaling \$5,000 or more during the year	otaled more than \$1,000. If this box religious, charitable, etc., cause it received <i>nonexclusively</i>
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Sche on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

HUNT ALTERNATIVES

04-3397500

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SWANEE HUNT FAMILY FOUNDATION 625 MT AUBURN STREET CAMBRIDGE, MA 02138	\$ <u>10,500,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DEPT OF STATE, USSESSS 1701 N FT MEYER DRIVE, BERKELEY BLDG ARLINGTON, VA 22209	\$ 238,846.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	DEPT OF STATE US EMBASSY OF ISLAMABAD PUBLIC AFFAIRS SECTION, AMERICAN EMBASSY ISLAMABAD, PAKISTAN	\$54,785.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ELAINE NONNEMAN 226 21ST AVE. EAST SEATTLE, WA 98112	\$ <u>10,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	THEODORE ANSBACHER-HUNT 1550 DETROIT STREET, APT. 304 DENVER, CO 80206	\$6,138.	Person X Payroll
(a) No.	(b) . Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	VISIONARY WOMEN 9663 SANTA MONICA BLVD., #851 BEVERLY HILLS, CA 90210	\$ <u>15,000.</u>	Person X Payroll

Name of organization

Employer identification number

HUNT ALTERNATIVES

04-3397500

Part I	Contributors	(See instructions)). Use duplicate copies	of Part I if additional space is needed.
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		· · · · · · · · · · · · · · · · · · ·	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HILTON WORLDWIDE, INC. MEMPHIS SHARES SERVICES, 755 CROSSOVER LANE MEMPHIS, TN 38117	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	GOOGLE, INC. PO BOX 2050 MOUNTAIN VIEW, CA 94042	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

HUNT ALTERNATIVES

04-3397500

Part li	Noncash Property (See instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Name of orga	anization		Employer identification number
HUNT A	LTERNATIVES		04-3397500
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou. Use duplicate copies of Part III if addition.	olumns (a) through (e) and the foles, charitable, etc., contributions of \$1,000	ed in section 501(c)(7), (8), or (10) that total more than \$1,000 for
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	gift
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No.		()))	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of g	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	gift
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of g	gift Relationship of transferor to transferee
-	,		
-		I	

INGS AND TE	MPORARY	CASH :	INVESTMENTS	STATEMENT	1
REV	ENUE			(C) ADJUSTED NET INCOME	1
	349.		349.	34	9.
***************************************	349.		349.	34	9.
OTHER	INCOME			STATEMENT	2
	REVEN	JE			
_		146.	0	. 14	6.
LINE 11 =		146.	0	. 14	6.
LEGA	L FEES			STATEMENT	3
	NET II	WEST-			
				2 2 2 2 2 2 2 2 2 2	iS
7,051	•	0	•	0. 8,17	
7,051 7,051		0			0.
7,051		0		0. 8,17	0.
7,051	ING FEE:	0		0. 8,17 0. 8,17 STATEMENT (D) CHARITAB	'0. '0. 4
7,051 ACCOUNT (A) EXPENSES	ING FEES	0. S S NVEST-	(C) ADJUSTED NET INCOM	0. 8,17 0. 8,17 STATEMENT (D) CHARITAB	70. 70. 4
	OTHER LEGA (A) EXPENSES	(A) REVENUE PER BOOKS 349. OTHER INCOME (A) REVENUE PER BOO PER BOO LINE 11 LEGAL FEES (A) EXPENSES NET II	(A) REVENUE NET : PER BOOKS : 349. OTHER INCOME (A) REVENUE PER BOOKS : 146. LINE 11 146. LEGAL FEES (A) EXPENSES NET INVEST-	REVENUE NET INVESTMENT INCOME 349. 349. 349. 349. OTHER INCOME (A) (B) NET INVEST-PER BOOKS MENT INCOME 146. 0 LINE 11 146. 0 LEGAL FEES (A) (B) (C)	(A) (B) (C) REVENUE NET INVESTMENT ADJUSTED 1100ME NET INCOME 349. 349. 349. 34 OTHER INCOME STATEMENT (A) (B) (C) REVENUE NET INVEST- ADJUSTED PER BOOKS MENT INCOME NET INCOME 146. 0. 14 LINE 11 146. 0. 14 LEGAL FEES STATEMENT (A) (B) (C) (D) (D) (D) (EXPENSES NET INVEST- ADJUSTED CHARITAB

FORM 990-PF	OTHER PROFES	SIONAL FEES	S	\$	STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		(C) ADJUSTED ET INCOME	(D) CHARITA PURPOS	
OTHER CONSULTANTS	802,437.		0.	0 .	952,8	89.
MANAGEMENT SERVICES	3,776,914.		0.	0.	-	
TRANSLATION SERVICES	21,406.		0.	0 .		
HONORARIA	20,316.		0.	0 .	. 13,3	16.
TO FORM 990-PF, PG 1, LN 16C	4,621,073.	`	0.	0 .	4,658,0	67.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
	(A)	(B)		(C)	(D)	
	EXPENSES	NET INVEST	Γ-	ADJUSTED	CHARITA	BLE
DESCRIPTION	PER BOOKS	MENT INCOM	ME N	ET INCOME	PURPOS	ES
PROFESSIONAL DEVELOPMENT	777.		0.	0 .	. 7	77.
PAYROLL ADMINISTRATION FEES	4,014.		0.	0 .		
AUDIO/VISUAL	3,923.		0.	0 .		
BANK SERVICE CHARGES	1,657.		0.	0 .	. 1,3	72.
INFORMATION TECHNOLOGY	24,558.		0.	0 .		
INSURANCE	39,414.		0.	0 .	•	
MISCELLANEOUS	23,481.		0.	0 .		
OFFICE EXPENSES & SUPPLIES	39,282.		0.	0 .	•	
POSTAGE & SHIPPING	1,305.		0.	0.	•	
REFERENCE MATERIALS	62,391.		0.	0.		
STATE FILING FEES	3,617.		0.	0.	-	
TELECOMMUNICATIONS	35,733.		0. 0.	0.	•	
COST SHARING	-112,869.			U .	112,/	05.
TO FORM 990-PF, PG 1, LN 23	127,283.		0.	0 .	124,7	22.
FORM 990-PF DEPRECIATION O	F ASSETS NOT	HELD FOR	INVEST	MENT S	STATEMENT	7
			70. L			
DESCRIPTION			ACCUMU DEPREC	LATED IATION	BOOK VALU	E
FURNITURE & FIXTURES		100,254.	1	00,254.		0.
FURNITURE & FIXTURES		46,950.		46,950.		0.
LEASEHOLD IMPROVEMENTS		52,427.		13,048.	39,3	
EQUIPMENT		32,483.		32,483.		0.
FURNITURE & FIXTURES		4,631.		4,631.		0.
FURNITURE & FIXTURES		26,151.		18,369.	7,7	82.

HUNT ALTERNATIVES			04-3397500
FURNITURE & FIXTURES	95,730.	60,403.	35,327.
FURNITURE & FIXTURES	7,500.	4,642.	2,858.
LEASEHOLD IMPROVEMENTS	460,395.	199,384.	261,011.
LEASEHOLD IMPROVEMENTS COMPUTER EQUIPMENT-PC LEASE	15,850.	5,839.	10,011.
BUY-OUT	8,429.	8,429.	0.
COMPUTER EQUIPMENT	7,505.	3,127.	4,378.
TOTAL TO FM 990-PF, PART II, LN 1	858,305.	497,559.	360,746.
FORM 990-PF OT	THER LIABILITIES		STATEMENT 8
FORM 990-PF OT DESCRIPTION	THER LIABILITIES	BOY AMOUNT	STATEMENT 8 EOY AMOUNT
	THER LIABILITIES	BOY AMOUNT 573,230.	
DESCRIPTION			EOY AMOUNT

EXPLANATION

THERE IS NO REQUIREMENT TO FILE THIS RETURN WITH THE ATTORNEY GENERAL OFFICES IN CO, DC AND WA.

STATEMENT 10

FORM 990-PF

		TOF OFFICERS, DID FOUNDATION MANAC		STATI	EWENT 10
NAME AND ADDRESS		TITLE AND AVRG HRS/WK			EXPENSE
SWANEE HUNT		DIRECTOR, CHAIR	R, PRESIDENT		
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625 MT	10.00	0.	0.	0.
LILLIAN SHUFF	605	DIRECTOR, VICE	PRESIDENT		
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625 MT	2.00	0.	0.	0.
MARVA HAMMONS		DIRECTOR, SECRE	ETARY		
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625 MT	2.00	0.	0.	0.
LORETTA FEEHAN	605.45	DIRECTOR, TREAS	SURER		
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625 MT	2.00	0.	0.	0.
KATHERINE ARCHULETTA	605	DIRECTOR (AS OF	F 4/16)		
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625 MT	2.00	0.	0.	0.
ALICE F. EMERSON	60E M	DIRECTOR			
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625 M.I.	2.00	0.	0.	0.
DAVID FLINK	COE NO	DIRECTOR			
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625 M.I.	2.00	0.	0.	0.
RAY HAMMOND	605 NT	DIRECTOR			
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625 MT	2.00	0.	0.	0.
KERRY HEALEY	COE NO	DIRECTOR (4/16-	-6/16)		
C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	025 MT	2.00	0.	0.	0.

PART VIII - LIST OF OFFICERS, DIRECTORS

HUNT ALTERNATIVES					0	4-3397500
JANE LUTE C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625	МТ	DIRECTOR 2.00	(4/16-6/16) 0.	0.	0.
FERN PORTNOY C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625	МТ	DIRECTOR 2.00	0.	0.	0.
RODNEY SHUFF C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625	МТ	DIRECTOR 2.00	0.	0.	0.
WILLIAM SNYDER C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625	МТ	DIRECTOR 2.00	0.	0.	0.
ELIZABETH BENHAM C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625	МТ	ASSISTANT 2.00	SECRETARY 0.	0.	0.
KATHERINE SEARS C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625	МТ	ASSISTANT	TREASURER 0.	0.	0.
EVELYN THORNTON C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138	625	МТ	CHIEF EXEC	CUTIVE OFFICER 161,534.	35,537.	0.
TOTALS INCLUDED ON 990-	-PF,	PAGE 6,	PART VIII	161,534.	35,537.	0.

04-3397500

HUNT ALTERNATIVES

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT 11

GRANTEE'S NAME

APB CONSULTING LLC

GRANTEE'S ADDRESS

5415 E. CALLE VENTURA PHOENIX, AZ 85018

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

15,000.

03/24/16

15,000.

PURPOSE OF GRANT

PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM

DATES OF REPORTS BY GRANTEE

GRANTEE'S NAME

APB CONSULTING LLC

GRANTEE'S ADDRESS

5415 E. CALLE VENTURA PHOENIX, AZ 85018

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

7,500.

05/13/16

7,500.

PURPOSE OF GRANT

PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM

DATES OF REPORTS BY GRANTEE

04-3397500 HUNT ALTERNATIVES

GRANTEE'S NAME

APB CONSULTING LLC

GRANTEE'S ADDRESS

5415 E. CALLE VENTURA PHOENIX, AZ 85018

GRANT AMOUNT

DATE OF GRANT AMOUNT EXPENDED

950.

06/23/16

950.

PURPOSE OF GRANT

DEVELOPING AND TESTING DEMAND REDUCTION TACTICS IN PHOENIX METRO AREA -DEMAND ABOLITION PROGRAM

DATES OF REPORTS BY GRANTEE

NO REPORT YET

04-3397500 HUNT ALTERNATIVES

GRANTEE'S NAME

APB CONSULTING LLC

GRANTEE'S ADDRESS

5415 E. CALLE VENTURA PHOENIX, AZ 85018

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

7,500.

09/02/16

7,500.

PURPOSE OF GRANT

PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM

DATES OF REPORTS BY GRANTEE

GRANTEE'S NAME

APB CONSULTING LLC

GRANTEE'S ADDRESS

5415 E. CALLE VENTURA PHOENIX, AZ 85018

GRANT AMOUNT

DATE OF GRANT AMOUNT EXPENDED

7,500.

11/21/16

7,500.

PURPOSE OF GRANT

PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM

DATES OF REPORTS BY GRANTEE

HUNT ALTERNATIVES 04-3397500

GRANTEE'S NAME

APB CONSULTING LLC

GRANTEE'S ADDRESS

5415 E. CALLE VENTURA PHOENIX, AZ 85018

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

2,500.

12/22/16

2,500.

PURPOSE OF GRANT

PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM

DATES OF REPORTS BY GRANTEE

04-3397500

ACTIVITY ONE INCLUSIVE SECURITY IS TRANSFORMING DECISION MAKING ABOUT WAR AND PEACE BY EQUIPPING DECISION MAKERS WITH KNOWLEDGE TOOLS AND CONNECTIONS THAT STRENGTHEN THEIR ABILITY TO DEVELOP INCLUSIVE POLICIES. BRINGING ALL STAKEHOLDERS TOGETHER, ESPECIALLY WOMEN, IN PEACE PROCESSES IMPROVES THE LIKELIHOOD OF ITS SUCCESS. IN 2016, WE STRENGTHENED THE WILL AND CAPACITY OF THOSE WHO SHAPE PEACE AND SECURITY POLICY; PROVIDED RESEARCH ON WHY INCLUSION MATTERS AND GUIDANCE ON HOW IT CAN BE ACHIEVED; EQUIPPED WOMEN TO CONTRIBUTE EFFECTIVELY TO PEACE PROCESSES; AND SUPPORTED COALITIONS OF DIVERSE LEADERS WHO OFFER PRACTICAL SOLUTIONS TO INTRACTABLE CONFLICTS.		
AND PEACE BY EQUIPPING DECISION MAKERS WITH KNOWLEDGE TOOLS AND CONNECTIONS THAT STRENGTHEN THEIR ABILITY TO DEVELOP INCLUSIVE POLICIES. BRINGING ALL STAKEHOLDERS TOGETHER, ESPECIALLY WOMEN, IN PEACE PROCESSES IMPROVES THE LIKELIHOOD OF ITS SUCCESS. IN 2016, WE STRENGTHENED THE WILL AND CAPACITY OF THOSE WHO SHAPE PEACE AND SECURITY POLICY; PROVIDED RESEARCH ON WHY INCLUSION MATTERS AND GUIDANCE ON HOW IT CAN BE ACHIEVED; EQUIPPED WOMEN TO CONTRIBUTE EFFECTIVELY TO PEACE PROCESSES; AND SUPPORTED COALITIONS OF DIVERSE LEADERS WHO OFFER PRACTICAL SOLUTIONS TO INTRACTABLE		
	EXPENSES	!
TO FORM 990-PF, PART IX-A, LINE 1	5,202,2	62.
FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT	13
ACTIVITY THREE		
POLITICAL PARITY'S GOAL IS TO INCREASE THE NUMBER OF WOMEN IN HIGH-LEVEL POLITICAL OFFICES VIA NONPARTISAN ACTIVITIES WHICH EDUCATE ALL STAKEHOLDERS FOR THE NEED FOR MORE WOMEN IN HIGH ELECTED OFFICES IN THE U.S.		
	EXPENSES	i I
TO FORM 990-PF, PART IX-A, LINE 3	160,2	39.
FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT	14
ACTIVITY FOUR		
PRIME MOVERS SUPPORTS LEADERS WHO ENGAGE MASSES OF PEOPLE TO CREATE A MORE JUST SOCIETY. THE ORGANIZATIONS OFFERS THESE LEADERS INDIVIDUAL PROFESSIONAL DEVELOPMENT GRANTS AND ONGOING ENGAGEMENT IN A DISTINCTIVE "COMMUNITY OF PRACTICE."		
	EXPENSES	
TO FORM 990-PF, PART IX-A, LINE 4	774,2	14.

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2016 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF	90-PF PAGE 1					5	990-PF							
Asset No.	Description	Date Acquired	Method	Life	C > o C > No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
14	FURNITURE & FIXTURES	05/31/02	200DB	7.00	HY17	100,254.				100,254.	100,254.		.0	100,254.
20	FURNITURE & FIXTURES	05/30/07	7 200DB	7.00	HY17	46,950.		******		46,950.	46,950.		.0	46,950.
21	LEASEHOLD IMPROVEMENTS	04/13/07	SL	39,00	MM17	52,427.		-		52,427.	11,704.		1,344.	13,048.
22	EQUIPMENT	04/13/07	7 200DB	5.00	HY17	32,483.	4,			32,483.	32,483.		.0	32,483.
23	FURNITURE & FIXTURES	80/08/90	200DB	7.00	HY1.7	4,631.				4,631.	4,631.		.0	4,631.
25	FURNITURE & FIXTURES	01/26/12	SI	7.00	16	26,151.	***************************************			26,151.	14,633.		3,736.	18,369.
26	FURNITURE & FIXTURES	08/14/12	SI	7.00	16	95,730.				95,730.	46,727.		13,676.	60,403.
27	FURNITURE & FIXTURES	09/19/12	SIL	7.00	16	7,500.				7,500.	3,570.		1,072.	4,642.
28	LEASEHOLD IMPROVEMENTS	06/01/12	SL	10.58	16	460,395.		***	W B.W. 5. 17	460,395.	155,882.		43,502.	199,384.
29		07/01/13	3 ST	9.50	16	15,850.				15,850.	4,170.		1,669.	5,839.
30	COMPUTER EQUIPMENT-PC LEASE BUY-OUT	11/30/14	4 SL	2.00	16	8,429.				8,429.	4,566.		3,863.	8,429.
31	COMPUTER EQUIPMENT	11/30/14	# SI	5.00	16	7,505.				7,505.	1,626.		1,501.	3,127.
	* TOTAL 990-PF PG 1 DEPR					858,305.				858,305.	427,196.		70,363.	497,559.
		·												
		·						4.001.00						
628111 (628111 04-01-16					(D) - Asset disposed	peso		*	ITC, Salvage,	Bonus, Comr	nercial Revita	ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	tion, GO Zone

Form **8868**

(Rev. January 2017)

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

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No. 1545-1709

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 . Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the

forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit

Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Employer identification number (EIN) or Name of exempt organization or other filer, see instructions. Type or print 04-3397500 HUNT ALTERNATIVES File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) filing your 625 MT AUBURN ST., NO. 205 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. CAMBRIDGE, MA 02138 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Return Code Is For le For Code

13 1 01	Ocac	10101			9000			
Form 990 or Form 990-EZ	01	Form 990-T (corporation)			07			
Form 990-BL	orm 990-BL 02 Form 1041-A 08							
Form 4720 (individual)	orm 4720 (individual) 03 Form 4720 (other than individual) 09							
Form 990-PF	04	Form 5227			10			
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
Form 990-T (trust other than above)	06	Form 8870			12			
• The books are in the care of ▶ 625 MT AUBURN			MA	02138				
Telephone No. ▶ <u>(617) 995–1975</u> Fax No. ▶ <u>(617) 995–1982</u>								
If the organization does not have an office or place of business in the United States, check this box								
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this								
box 🕨 . If it is for part of the group, check this box 🕨 and attach a list with the names and EINs of all members the extension is for.								
1 I request an automatic 6-month extension of time until NOVEMBER 15, 2017 , to file the exempt organization return								
for the organization named above. The extension is for the organization's return for:								
▶ X calendar year 2016 or								
tax year beginning	, ar	d ending		•				
2 If the tax year entered in line 1 is for less than 12 months			ıl retun	n				
Change in accounting period								
3a If this application is for Forms 990-BL, 990-PF, 990-T, 472	20, or 6069,	enter the tentative tax, less any						
nonrefundable credits. See instructions.			3a	\$	0.			
b If this application is for Forms 990-PF, 990-T, 4720, or 60	69, enter an	y refundable credits and						
estimated tax payments made. Include any prior year over	rpayment a	llowed as a credit.	3b	\$	89.			
c Balance due. Subtract line 3b from line 3a. Include your								
by using EFTPS (Electronic Federal Tax Payment System	by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$							

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

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

Form 8868 (Rev. 1-2017)