Return of Organization Exempt From Income Tax

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

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.

20**15** Open to Public Inspection

OMB No. 1545-0047

A	For the	e 2015 cale	ndar year, or tax year beginning , 2015, and endir	g		, 20	
в	Check i	if applicable:	C Name of organization Peace Through Commerce, Inc.		D Employe	er identification n	umber
	Address	s change	Doing business as			27-3971757	
	Name c	change	Number and street (or P.O. box if mail is not delivered to street address) Room/su	ite	E Telephor	ne number	
	Initial re	eturn	1510 Falcon Ledge Drive			512-522-0782	
	Final retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code				
		ed return	Austin, TX 78746		G Gross re	ceipts \$	220,383
	Applica	tion pending	F Name and address of principal officer: Philomena Blees	H(a) is this a gr	oup return for s	subordinates? 🗔 Ves	🗹 No
			same as C above	H(b) Are all s	ubordinates	s included? 🗌 Yes	No
1	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () ◄ (insert no.) 4947(a)(1) or 527	lf "No	o," attach a	list. (see instructio	ins)
J	Websit	e: 🕨 www	w.peacethroughcommerce.org	H(c) Group	exemption	number 🕨	
K	Form of	organization:	Corporation Trust Association Other L Year of forma	tion: 2010	M State	of legal domicile:	TX
P	artl	Summ					
	1		escribe the organization's mission or most significant activities: Peace				the set of the set of the last and the set of
206			al organization dedicated to creating a world where all people enjoy peace				
lieu.		global pro	oblems from a different level of consciousness using our technology called	the Matrix of	Peace S	ystems Model™	' "MOP".
Ver	2		is box \blacktriangleright if the organization discontinued its operations or disposed		1 1	its net assets.	
Activities & Governance	3				3		4
ංර ග	4		of independent voting members of the governing body (Part VI, line 1b)		4		4
itie	5		nber of individuals employed in calendar year 2015 (Part V, line 2a) .		5		0
ctiv	6		nber of volunteers (estimate if necessary)		6		
Ř	7a		elated business revenue from Part VIII, column (C), line 12		7a		0
	b	Net unre	lated business taxable income from Form 990-T, line 34		7b		0
				Prior Ye	ar	Current Ye)ar
ne	8		tions and grants (Part VIII, line 1h)		163,298		217,483
Revenue	9	*	service revenue (Part VIII, líne 2g)		2,906		2,900
Rev	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)		0		0
	11		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		217		0
	12		enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		166,421		220,383
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)		0		0
	14		paid to or for members (Part IX, column (A), line 4)		0		0
ses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		0		26,164
ens	16a		onal fundraising fees (Part IX, column (A), line 11e)		0		0
Expenses	b		draising expenses (Part IX, column (D), line 25)				<u>Raine an an</u>
	14		penses (Part IX, column (A), lines 11a–11d, 11f–24e)		170,874		169,028
	18	•	benses. Add lines 13–17 (must equal Part IX, column (A), line 25)		170,874		195,192
. "	19	nevenue	less expenses. Subtract line 18 from line 12	Beginning of Cur	-4,453 rent Year	End of Ye	25,191
Net Assets or Fund Balances	20	Total coo					
Nsse Bala	20		ets (Part X, line 16)		117,492		206,492
Net /	21 22		ilities (Part X, line 26)		105 117,387		<u>63,913</u> 142,579
	art II		ture Block		117,30/		194,079
			ry, I declare that I have examined this return, including accompanying schedules and state	mente and to th	a hast of a	w knowledge and	heliof it ic
			lete. Declare that i have examined this return, including accompanying schedules and state lete. Declaration of preparer (other than officer) is based on all information of which prepare			iy nilomeoge allo	Donol, it is

	<u></u>		1	(
Sign Here	Signature of officer <u>Philomena</u> Type or print name and title	Bires	Resident	Date	12/16
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date	Check self-en	if PTIN
Use Only	Firm's name			Firm's EIN 🕨	
-	Firm's address 🕨			Phone no.	
May the IRS	discuss this return with the prepar	rer shown above? (see in:	structions)		🗌 Yes 🗌 No
For Paperwo	rk Reduction Act Notice, see the sep	parate instructions.	Cat. No. 11282Y	1	Form 990 (2015)

Peace Through Commerce, Inc	. 27-3971757
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Form 99	Peace Through Commerce, Inc. 27-3971757
Part	II Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Peace Through Commerce is a strategic, global and educational nonprofit organization dedicated to creating a world where all people
	enjoy peace and prosperity. We guide people to view problems like poverty, war, and gender inequality from a different level of
	consciousness than they were generated in by focusing on core societal values. We do this using our technology called the Matrix of
2	Peace Systems Model™ ("MOP"). Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
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: 611710) (Expenses \$ 115,000 including grants of \$ 0) (Revenue \$ 115,000)
44	Ko School & Incubator is an innovative middle and high school which includes Matrix of Peace Systems Modeling in its thinking and
	and teaching. The school launched as an incubator project of Peace Through Commerce and serves the important role of socializing
	the ideas behind the Matrix of Peace Systems Model with students and helping the organization create K-12 curriculum to extend the
	model to that demographic.

4b	(Code: 611710) (Expenses \$ 27,900 including grants of \$ 0) (Revenue \$ 30,383)
	Matrix of Peace. In 2015 the organization continued to build out the Matrix of Peace Systems Model by presenting it at the Voice &
	Exit Festival of the Future in Austin, Texas, at Ko School & Incubator on Peace Day Austin, and the Expert Roundtable on Social
	Entrepreneurship for Democratic Governance and Peace, convened by Partners for Democratic Change at the Carnegie Endowment
	for International Peace in Washington, D.C. The organization also did extensive strategic planning and programmatic planning for
	launching the Model and the CEO is working on the manuscript for a book to explain the principles and ideas of the Model - completion date expected in late 2016.
	(Onder C11710) (Evenence C 25 000 including growth of C 2) (Devenue C 25 000)
4c	(Code: 611710) (Expenses \$ 25,000 including grants of \$ 0) (Revenue \$ 25,000) Voice & Exit is a partner organization dedicated to helping the organization extend the principles of the Matrix of Peace to millenials
	and others through its events and outreach. The organization presented the MOP at Voice & Exit's 2015 Festival of the Future. It also
	received donations earmarked to help the organization create MOP content for the Festival.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 5,355 including grants of \$) (Revenue \$ 50,000)
4e	Total program service expenses > 173,255

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Form 99			F	Page 3
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
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</i> "Yes," complete Schedule D, Part I	6		1
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>	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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> .	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		 ✓
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>	11b		✓
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
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>	11d		✓
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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> .	11e 11f	1	✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		↓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		• •
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		
			000	

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Part	Checklist of Required Schedules (continued)			
20 -	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	00-	Yes	No
20a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		¥ ./
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	200		 ✓
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
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? If "Yes," complete Schedule J.	23		1
2 4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		✓ ✓
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		√ √
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> .	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		1
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 b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a 28b		✓ ✓
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		✓ ✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓ ✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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>	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	

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Form 99	00 (2015)		P	age 5
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	• •		
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4	and the second sec		n zi e i i Composition
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	-2028 - 4 16-6-36-96-95- 16-6-36-96-95-95-95-95-95-95-95-95-95-95-95-95-95-		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		(1996) 1996)	ŝ.
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		5 50 ¹	194 A S I
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-		1
L		<u>4a</u>		¥
b	If "Yes," enter the name of the foreign country:		¥ .	1997 - 1997 1997 - 1997
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	Y dada	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		·
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		•
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			i en el
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			an Maria Ma
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	· 1.52.5	√
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
-	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Ť		at the
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	1	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			·
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			N. M.
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)		3 w 1	Carlor ye
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			angi Tin Angi Kara Angi Kara
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1.00	·
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	1. 19 19 1	<u></u>
ь	Enter the amount of reserves the organization is required to maintain by the states in which			
N.	the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
Conti	Check if Schedule O contains a response or note to any line in this Part VI	· ·		
Secu			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a		100	
Id	If there are material differences in voting rights among members of the governing body, or		ngi ya Marata	
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	40.073		
-	any other officer, director, trustee, or key employee?	2	1	
3	Did the organization delegate control over management duties customarily performed by or under the direct		· ·	
-	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	1	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6	1	1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			1
	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1		
	the year by the following:		1.2.1	
a	The governing body?	8a	1	ļ
b	Each committee with authority to act on behalf of the governing body?	8b	 ✓ 	
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.			
Saati	on B. Policies (This Section B requests information about policies not required by the Internal Rever	9	ode)	√
Jecu	on b. Policies (This Section D requests mionitation about policies not required by the internal never		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		v
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	\checkmark	
13	Did the organization have a written whistleblower policy?	13	1	
14	Did the organization have a written document retention and destruction policy?	14	1	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1000 1000 1000		
	with a taxable entity during the year?	16a	1	1997 (S. 1977) 1997 (S. 1977)
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		V	0.0
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	1	ta a ta A
Secti	on C. Disclosure	1.00		L
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 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.

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Form	990	(2015)	
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²⁰ State the name, address, and telephone number of the person who possesses the organization's books and records: ► Philomena Blees, 1510 Falcon Ledge Dr., Austin, TX 78746 512-522-0782

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

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.

	1	T		1	C)			1	1	
	-				uition					
(A)	(B)	(do n	iot cł			e than d	one	(D)	(E)	(F)
Name and Title	Average	box,	unles	ss pe	erson	is both	1 an	Reportable	Reportable	Estimated
	hours per week (list any		er an		1	or/trus		compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	Key employee	Highest compensated employee	Former	the	organizations	compensation
	related	lirec	itut	Cer	en	oloy	mer	organization	(W-2/1099-MISC)	from the
	organizations below dotted	d or La	ions		oldi	eco		(W-2/1099-MISC)		organization and related
	line)	shu			yee	mp				organizations
		lee	Institutional trustee			sense				
			ä			ted				
(1) Philomena Blees	60									
Director, President, Treasurer		1		1				4.000	l o	
	10			l ·	1			4,000	<u>v</u>	(
(2) Michael Strong		1							~	
Director			ļ					0	0	(
(3) Lara Ewing Himber	10	1								
Director		v						0	0	C
(4) Joyce Beck	20	1		1					_	
Director, Secretary		V		V				0	0	
(5) Eileen McPhillips Portner	10	1								
Director		V			-			0	0	
(6) Felora Derakhshani	10									
Director		1	ļ					0	0	(
(7)										
(0)										
(8)										
(9)										
(10)										
<u>X/</u>		1								
(11)										
(12)										
			L	ļ			ļ			
(13)		•								
(14)										
										C

Form 990 (2015)

Peace Through Commerce, Inc. 27-3971757

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo	vees		nd H C)	lighes	st C	ompensated E	mployees	continu	ied)
	{A) Name and title	(B) Average hours per week (list any	box, office	unles er and	Pos leck is pe	ition more rson irect	than c is both or/trust	i an iee)	(D) Reportable compensation from	(E) Reportat compensatio related	n from	(F) Estimated amount of other
		hours for related organizations below dotted line)	ndividua or directo	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizati (W-2/1099-N	ons	compensation from the organization and related organizations
(15)							<u> </u>					
(16)									<u></u>			
(17)												
(18)		3										
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1b	Sub-total								4.000		0	
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio	n A						4,000 0 4,000		0	0 0 0
2	Total number of individuals (including but reportable compensation from the organi	not limited						e) w	ho received m	ore than \$1	00,000) of
3	Did the organization list any former of employee on line 1a? If "Yes," complete s							emp	loyee, or high	est compe	ensatec	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	oortal	ole d	com	nper	isatio					•
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or ind	dividua	5 √
Sectio	on B. Independent Contractors											
1	Complete this table for your five highest of compensation from the organization. Rep year.											
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compensation
None												
	Total number of independent contracts	re (includir	na hu	t n	ot I	imi+	od to	+h	opp listed ch	ava) who	an a	· · · · · · · · · · · · · · · · · · ·
2	Total number of independent contractor received more than \$100,000 of compens							ពា	ose listed abo	ove) who		an a

Page 8

Peace ⁻	Through	Commerce,	Inc.	27-3971757
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Form 990 (2015)

Page 9

Part VIII		Statement of Revenue								
		Check if Schedule O		oonse or note t			* * * * * *	<u> []</u>		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
ts ts	1a	Federated campaigns	s 1 a	0						
un o	b	Membership dues .		1,533						
0 ŭ	¢	Fundraising events .		0	Construction of the Constr					
ar /	d	Related organizations		0						
s, G	е	Government grants (con		0						
i Si	f	All other contributions, g								
the		and similar amounts not inc	luded above 1f	215,950						
Ξò	g	Noncash contributions includ	ted in lines 1a-1f: \$	17,559						
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1	f	🕨	217,483	있는 것은 가격에 관계 1997년 - 1997년 - 1997년 1997년 - 1997년 -				
				Business Code						
/eUi	2a	Conscious Garden		611710	1,200	1,200	0	0		
Rei	b	Khabele + Strong Incu	bator	611710	1,100	1,100	0	0		
/ice	c	Voice & Exit		611710	500	500	0	0		
Sen	d	FLOW 2.0		611710	100	100	0	0		
Program Service Revenue	е									
ogra	f	All other program ser	vice revenue.							
Ĕ.	g	Total. Add lines 2a-2	<u>f</u>	<u> </u>	2,900					
	3	Investment income		ends, interest,						
		and other similar amo	ounts)	🕨	0	0	0	0		
	4	Income from investmen			0	0	0	0		
	5	Royalties	<u> </u>		0	0	0	0		
			(i) Real	(ii) Personal						
	6a	Gross rents	0	0						
	b	Less: rental expenses	0	0						
	c	Rental income or (loss)	0	0						
	d	Net rental income or	(loss)	<u> ></u>	0	0	0	0		
	7a	Gross amount from sales of	(i) Securities	(ii) Other	Although a straight of the	2,4 2,4				
		assets other than inventory	0	0			1979년 - 1922년 2013년 1월 1979년 1 1979년 1월 1979년 1월 197			
	b	Less: cost or other basis								
		and sales expenses .	0	0						
	c	Gain or (loss) .	0	0		n in the electric states In the states of the states		1993년 1975년 - 호 1993년 - 1975년 - 호		
	d	Net gain or (loss) .		<u> ►</u>	0	0	0	0		
•						일에 가 가장가 물을 받고 있다. 이 가지 가장 동료에 많이 많이 많이 있다.				
enu	8a	Gross income from fu	undraising							
0		events (not including \$	0							
Other Rev		of contributions reported								
ler		See Part IV, line 18 .	••••a	0						
ŧ	b	Less: direct expenses		0						
	C C	Net income or (loss) f		events . 🕨	0		0	0		
	9a	Gross income from ga	-		and the second second		and the second			
			· · · · a	0		Charles Constant Franklin				
	b	Less: direct expenses		0			· · · · · · · · · · · · · · · · · · ·	and a the states of a second		
	c	Net income or (loss) f		vities 🕨	0	0	0	0		
	10a	Gross sales of ir					 A start of the set o			
		returns and allowance		0			and the second			
	b	Less: cost of goods s		0						
	c	Net income or (loss) f		T	0	0	0	0		
		Miscellaneous F	levenue	Business Code			regi gradelje	A Contraction of the		
	11a				0	0	0			
	b			· · · · · · · · · · · · · · · · · · ·	0	0	0			
	c	************************			0	0	0			
	d	All other revenue .			0	0	0	0		
	е	Total. Add lines 11a-		.	0	C				
	12	Total revenue. See i	nstructions.	<u> ></u>	220,383	2,900	0	Form 990 (2015)		

0 Form **990** (2015)

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 respon include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0	0	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	
	Other salaries and wages	0	0	0	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	
	Other employee benefits	0	0	0	
	Payroll taxes	0	0	0	
а	Management	26,164	18,867	844	6,4
b	Legal	0	0	0	
	Accounting	615		585	
	Lobbying	0	0	0	
	Professional fundraising services. See Part IV, line 17	0			
g	Investment management fees	0	0	0	
	Advertising and promotion	2.265	2,265	0	
	Office expenses	701	564	137	
	Information technology	15,275	0	15,275	
	Royalties	0	0	0	
16 (Occupancy	0	0	0	
17 .	Travel	1,530	850	680	
	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	
19	Conferences, conventions, and meetings .	0	0	0	
20	Interest	0	0	0	
21	Payments to affiliates	0	0	0	
	Depreciation, depletion, and amortization	0	0	0	
		1,570	0	1,570	
	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.)				
					Courses
a <u>b</u>	Strategic Activities (Ko, MOP, V&E)	145,000	145,000	0	
c .		0	0	0	
ď		0	0	0	
-	All other expenses	2,072	1,033	550	4
	Total functional expenses. Add lines 1 through 24e	195,192	168,609	19,641	6,9
26 v	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here		100,003	10,041	
1	following SOP 98-2 (ASC 958-720)	0	0	0	

P	art X				
		Check if Schedule O contains a response or note to any line in this Pa		• •	· · · · · · □
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	35,908	1	119,919
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
	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 instructions). Complete Part II of Schedule L			
ets		•	0		0
Assets	7	Notes and loans receivable, net	0	7	0
٩	8	Inventories for sale or use		8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2 402			물건은 문제 가지?
	b	other basis. Complete Part VI of Schedule D 10a 2,402 Less: accumulated depreciation 10b 0		100	
	11	Investments—publicly traded securities	2,034	11	
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments	0	13	0
	14		74,858	14	
	15	Other assets. See Part IV, line 11	4,692	15	79,479
	16	Total assets. Add lines 1 through 15 (must equal line 34)	117,492	16	206,492
	17	Accounts payable and accrued expenses	5	17	63,813
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
ŝ	22	Loans and other payables to current and former officers, directors,	 March 1997, 1997, 1997, 1997, 1997 March 1997, 1997, 1997, 1997, 1997 March 1997, 19977, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 19977, 1997, 197	i i i V urus	
ĨŢ		trustees, key employees, highest compensated employees, and		114 Jun 114	
Liabilities		disqualified persons. Complete Part II of Schedule L	0	22	0
Ξ	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	100	25	100
	26	Total liabilities. Add lines 17 through 25	105	26	63,913
ses		Organizations that follow SFAS 117 (ASC 958), check here ►			
anc	27	Unrestricted net assets	0	27	0
Bal	28	Temporarily restricted net assets	0	28	0
ğ	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☑ and complete lines 30 through 34.			
ts c	30	Capital stock or trust principal, or current funds	0	30	0
se	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
As	32	Retained earnings, endowment, accumulated income, or other funds .	117,387	32	142,579
Net	33	Total net assets or fund balances	117,387	33	142,579
_	34	Total liabilities and net assets/fund balances	117,492	34	206,492

Form 990 (2015)

Peace	Through	Commerce	Inc	27-3971757
i cace	rmougn	Commerce,	mo.	21-0011101

Form 990 (2015)

Page	1	2

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	220,38	3
2	Total expenses (must equal Part IX, column (A), line 25)	2	195,19	2
3	Revenue less expenses. Subtract line 2 from line 1	3	25,19	1
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	117,38	7
5	Net unrealized gains (losses) on investments	5		0
6	Donated services and use of facilities	6		0
7	Investment expenses	7		0
8	Prior period adjustments	8		0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			-
	33, column (B))	10	142,57	9
Part	XII Financial Statements and Reporting			-
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u> []
			Yes No	
1	Accounting method used to prepare the Form 990: 🗹 Cash 🗌 Accrual 🗌 Other		_	~~
	If the organization changed its method of accounting from a prior year or checked "Other," exp	plain li	in Lander and	Å.
	Schedule O.			л сч
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled o	or Casterna Cast	23 -2
	reviewed on a separate basis, consolidated basis, or both:			с.
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?			
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on a	a	
	separate basis, consolidated basis, or both:			á.
	Separate basis Consolidated basis Both consolidated and separate basis			i
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov			
	of the audit, review, or compilation of its financial statements and selection of an independent account if the event interview of the transmission of		A., W	

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2015)

✓ -

3a

3b

SCHE	DUL	ΕA
(Form	990 or	990-EZ)

Public Charity Status and Public Support

(Form	990 or 990-EZ)			y otacio ana i	Gono	oupp		004 -
(i oni	1000 01 000- 22)	Comple	-	tion is a section 501(c)()(1) nonexempt charita		ation or a	section	2015
Departe	nent of the Treasury		► Atta	ch to Form 990 or Form	990-EZ.			Open to Public
Internal	Revenue Service	Information about	rt Schedule A (For	m 990 or 990-EZ) and its	instructio	ns is at wv	vw.irs.gov/form990.	Inspection
Name	of the organization						Employer identification	n number
Peace	Through Comm	erce, Inc.					27-3	71757
Par	tl Reason	for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instructi	ons.
The c	organization is no	ot a private founda	tion because it i	s: (For lines 1 through	11, chec	k only or	ne box.)	
1	🗌 A church, co	nvention of churc	hes, or associati	on of churches descri	bed in se	ection 17	0(b)(1)(A)(i).	
2	A school des	scribed in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	Z).)	
3				ganization described i				
4		-		onjunction with a hosp	pital desc	ribed in s	section 170(b)(1)(A	(iii). Enter the
		ime, city, and state						
5		tion operated for ' (b)(1)(A)(iv). (Com		college or university	owned a	r operate	ed by a governmen	tal unit described in
6				mental unit described				
7				tantial part of its sup	port from	a gover	nmental unit or fro	m the general public
		section 170(b)(1)						
8		•)(1)(A)(vi). (Complete I				
9		-		re than 331/3% of its				
				functions-subject to unrelated business t				
				75. See section 509(a				ix) from businesses
40		•		sively to test for public		•	•	
10 11	-	-	•	ively for the benefit of,	-			out the purperse of
		÷		lescribed in section 56				
				the type of supporting				
а		-		supervised, or control	-		-	
				egularly appoint or ele				
	organizatio	on. You must com	plete Part IV, S	ections A and B.				
b	🗌 Type II. A	supporting organia	zation supervise	d or controlled in conr	nection w	ith its su	pported organizatio	n(s), by having
	control or i	management of th	e supporting org	anization vested in th	e same p	ersons th	hat control or mana	ge the supported
	organizatio	on(s). You must co	omplete Part IV,	, Sections A and C.				
С	🗌 Type III fu	nctionally integra	ited. A supportir	ng organization operat	ed in cor	nection	with, and functional	ly integrated with,
	its support	ed organization(s)	(see instructions	s). You must comple	te Part I	/, Section	ns A, D, and E.	
d				porting organization o				
				zation generally must				l an attentiveness
	-	-		mplete Part IV, Secti		-		
e				written determination onally integrated supp				II, Type III
f	-	ber of supported of				gamzano	. 1.	
				oorted organization(s).				• •
g	(i) Name of support	_	(ii) EIN	(iii) Type of organization	(iv) is the	rganization	(v) Amount of monetary	(vi) Amount of
	(i) reame or support	cd organization	(1) 2.0 4	(described on lines 1-9	listed in you	r governing	support (see	other support (see
				above (see instructions))	aocu	ment?	instructions)	instructions)
					Yes	No		
(A)								
(A)								
(B)								
(B)								

(C)

(D)

(E)

Total

OMB No. 1545-0047

Page 2

2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 <td< th=""><th>Schedu</th><th>le A (Form 990 or 990-EZ) 2015 Peace Ir</th><th>nrough Com</th><th>merce, Inc</th><th>. 27-3971</th><th>(57</th><th></th><th>Page 2</th></td<>	Schedu	le A (Form 990 or 990-EZ) 2015 Peace Ir	nrough Com	merce, Inc	. 27-3971	(57		Page 2
Part III. (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 (d) 2014 (e) 2016 (f) 2012 (f) 2014 (f) 2014 (f) 2014 (f) 2014 (f) 2015 (f) 2014 (f) 2014 (f) 2015 (f) 2014 (f) 2015 (f) 2014 (f) 2015 (f) 70min 3000000000000000000000000000000000000	Part							
Section A. Public Support Calendar year (or flical year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total I Gits, grants, contributions, and membership fees received. (Co not include any 'unusul grants.') 51,958 35,122 135,427 163,298 217,483 603,2 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0								lify under
Calendar year (or fiscal year beginning in) ► (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 1 Gifts, grants, contributions, and include any 'unusual grants',			o qualify unde	r the tests lis	ted below, pl	ease comple	ete Part III.)	
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.'). 5 35,122 135,427 153,298 217,483 e03,2 2 Tax revenues leviced for the organization's benefit and either paid to or expended on its behalf 0			() 00(1)	# 1 0010	() 0040	(1) 2211		
membership fees received. (Co nd include any 'unusual grants.') 51,958 35,122 135,427 163,289 217,483 603,2 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0		· ·	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
incluce any "unusual grants.") 51,958 35,122 135,427 163,298 217,493 603,2 2 Tax revenues level of the organization's benefit and either paid to or expended on its behalf 0	1							
2 Tax revenues levided or lot								
organization's benefit and either paid to or expended on its behalf 0	0		51,958	35,122	135,427	163,298	217,483	603,288
to or expended on its behalf 0 0 0 0 0 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge. 0	Z							
3 The value of services or facilities furnished by a governmental unit to the organization without charge			0	0	0	0	n	0
furnished by a governmental unit to the organization without charge	3	•				<u>v</u>		
organization without charge 0 0 0 0 4 Total. Add lines 1 through 3	U							
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instructions	18	+						see
		instructions				· · · · ·		. 🕨 📋

Schedu		-	Commence		011101		Page 3
Part							
	(Complete only if you checked th			-		• •	er Part II.
	If the organization fails to qualify	under the te	sts listed bek	ow, please co	mplete Part	ll.)	
	on A. Public Support		1				
	dar 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.") Gross receipts from admissions, merchandise						
2	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						
4	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						
_							
с 8	Add lines 7a and 7b	1. St. 25 (1997) / A.O.	-			1	
0	line 6.)		and the second				
Secti	on B. Total Support	and the second se	Andrea Martin		And the second	Martin W. 1998 Stationart Station	
	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						<u>`</u>
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						
	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, check this box and stop he						· . 🕨 🗌
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2015 (line 8						<u>%</u>
<u>16</u>	Public support percentage from 2014 Sch			<u> </u>	<u>.</u>	16	%
	on D. Computation of Investment Inc			viine 10!	nn (fi)	47	n/
17 18	Investment income percentage for 2015 (Investment income percentage from 2014						<u>%</u>
10 19a	33 ¹ / ₃ % support tests – 2015. If the organ						

17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . b 331/3% support tests-2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization 🕨 🗌

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

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Page 4

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10h

Peace Through Commerce, Inc. 27-3971757

Part IV Supporting Organizations (continued)

Schedule A (Form 990 or 990-EZ) 2015

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

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

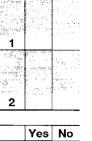
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons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

Section D. All Type III Supporting Organizations

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

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.
- 2 Activities Test. Answer (a) and (b) below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **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.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.



Yes No

1	No
2	
350 443	
3	

1

Page 5

Yes No

11a

11b

11c

	res	NO
2a		
2 b		
 3a		an a
3b		

Vee Me

Schedule A (Form 990 or 990-EZ) 2015

Part V

Form 990 or 990-EZ) 2015 Peace Through Commerce, Inc. 27-3971757 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 Adjusted Net Income (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		and the second second
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2	i	A State of the second sec
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount	nl		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	an a	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	ly-in	tegrated Type III supporting	organization (se

instructions).

Schedule A (Form 990 or 990-EZ) 2015

Peace Through Commerce, Inc. 27-3971757

Part	Type III Non-Functionally Integrated 509(a)(ion D - Distributions	of oupporting organi	zations (continued)	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		ounent real
	Amounts paid to perform activity that directly furthers exe		wtad	
2	organizations, in excess of income from activity	i teu		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	Juses of Supported orge		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	the organization is res	ponsive	
	Distributable amount for 2015 from Section C, line 6			
9				
10	Line 8 amount divided by Line 9 amount		(ii)	(iii)
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6		n an	
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
С				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years	and the second		
h	Applied to 2015 distributable amount			
I	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			And the second
4	Distributions for 2015 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
с	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			
7	instructions). Excess distributions carryover to 2016. Add lines 3j			a series a series de la series d La series de la series La series de la series
	and 4c		ka k	
8	Breakdown of line 7:	Sector		
а				
b				
c	Excess from 2013			
d	Excess from 2014	Last 2000 Carlos Carlos Carlos		
e	Excess from 2015			

Schedule A (F	orm 990 or 990-EZ) 2015	Peace Through C	ommerce, Inc.	27-3971757	Page 8
Part VI	Supplemental Informati III, line 12; Part IV, Sectio B, lines 1 and 2; Part IV, 3a and 3b; Part V, line 1; lines 2, 5, and 6. Also co	on. Provide the explan n A, lines 1, 2, 3b, 3c, 4 Section C, line 1; Part I Part V, Section B, line	ations required by 4b, 4c, 5a, 6, 9a, 9 V, Section D, lines 1e; Part V, Sectior	Part II, line 10; Part II, I 9b, 9c, 11a, 11b, and 11 52 and 3; Part IV, Section 5 D, lines 5, 6, and 8; ar	c; Part IV, Section on E, lines 1c, 2a, 2b, nd Part V, Section E,
·····					

Schedule B	Schedule of Contributors	OMB No. 1545-0047				
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	 Attach to Form 990, Form 990-EZ, or Form 990-PF. Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. 	2015				
Name of the organizati	on Employer ide	ntification number				
Peace Through Comm	erce, Inc. 2	7-3971757				
Organization type (c	heck one):					
Filers of:	Section:					
Form 990 or 990-EZ	✓ 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					

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

General Rule

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- □ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Cat. No. 30613X Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schadula B	(Earm 990)	990-F7	or 990-PF) (2015)

Name of organization

Page **2**

Employer identification number

	bugh Commerce, Inc.		27-3971757
Part I	Contributors (see instructions). Use duplicate co	opies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Susan Niederhoffer		Person
	30 Hillcrest Lane	\$5,000	Noncash
	Weston, CT 06883-1105		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Drane Douglas Charitable Trust		Person ☑ Payroli □
	925 S Capital of Texas Hwy, Ste. B245	\$\$	Noncash (Complete Part II for
	Austin, TX 78746		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributior
3	Donor's Trust		Person 🗹 Payroll 🗌
	109 N. Henry Street	\$\$	Noncash
	Alexandría, VA 22314-2903		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Schwab Charitable Trust		Person ☑ Payroll □
	211 Main Street, Floor 10	\$5,000	Noncash
	San Francisco, CA 94105		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Vanguard Charitable Endowment		Person ☑ Payroll □
	P.O. Box 5766	\$\$	Noncash
	Boston, MA 02205-5766		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

	ganization	6	loyer identification numb
	bugh Commerce, Inc.		27-3971757
art II	Noncash Property (see instructions). Use duplicate co	opies of Part II if additional space	e is needed.
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-	· · · · · · · · · · · · · · · · · · ·	 	
i) 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
		s	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Page	4
	-

	ganization			Employer identification numbe
eace Throu Part III	ugh Commerce, Inc. Exclusively religious, charitable, etc (10) that total more than \$1,000 for the following line entry. For organizati	the year from any one of ions completing Part III, e	ontributor. Complete enter the total of exclusion	e columns (a) through (e) and sively religious, charitable, etc
	contributions of \$1,000 or less for the	• ·	tion once. See instruc	stions.) \$
a) No.	Use duplicate copies of Part III if add			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held
-		(e) Transfer of	_	
-	Transferee's name, address, an	Id ZIP + 4	Relationship of tr	ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held
-	Transferee's name, address, an	(e) Transfer of d ZIP + 4	_	ansferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held
		(e) Transfer of		
-	Transferee's name, address, an	d ZIP + 4	Relationship of tr	ansferor to transferee
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held
		(e) Transfer of		
-	Transferee's name, address, an			ansferor to transferee

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Schedule B	(Form	990,	990-EZ,	or	990-PF	•)	(2015	5]
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SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service		Supplement ► Complete if the or Part IV, line 6, 7, 8, 9, 1 ► Information about Schedule D (Fo	OMB No. 1545-0047 20 15 Open to Public Inspection		
Name of the organization					ver identification number
	Through Comm	erce. Inc.			27-3971757
1		izations Maintaining Donor Adv	vised Funds or Otl	ner Similar Funds or	
	Comple	ete if the organization answered	"Yes" on Form 990	, Part IV, line 6.	
			(a) Donor adv	ised funds	(b) Funds and other accounts
1	Total number	at end of year			
2	Aggregate val	ue of contributions to (during year)			
3		ue of grants from (during year) .			
4		ue at end of year		that the second hald in	
5		ization inform all donors and donor organization's property, subject to th			
6	Did the organi only for charit	zation inform all grantees, donors, a able purposes and not for the bene	and donor advisors in fit of the donor or do	writing that grant func	ls can be used other purpose
Par	t II Conse	rvation Easements.			
	Compl	ete if the organization answered	"Yes" on Form 990	, Part IV, line 7.	
1 2	 Preservation Protection Preservation Complete lines 	conservation easements held by the on of land for public use (e.g., recrea of natural habitat on of open space s 2a through 2d if the organization he	tion or education)	Preservation of a hist Preservation of a cer	tified historic structure
		he last day of the tax year.			Held at the End of the Tax Year
а		of conservation easements			2a
b	-	restricted by conservation easement			2b
c d	Number of co	nservation easements on a certified honservation easements included in ure listed in the National Register	(c) acquired after 8		2c
3	Number of cor tax year ►	nservation easements modified, trans	sferred, released, ext	inguished, or terminated	d by the organization during the
4 5	Does the org	tes where property subject to conse anization have a written policy re- enforcement of the conservation ea	garding the periodic	*****************	
6	Staff and volunt	eer hours devoted to monitoring, inspec	ting, handling of violatio	ons, and enforcing conserv	vation easements during the year
7	Amount of exp ► \$	enses incurred in monitoring, inspectin	ig, handling of violatio	ns, and enforcing conser	vation easements during the year
8	and section 17	servation easement reported on line 0(h)(4)(B)(ii)?			· · · · · □ Yes □ No
9	balance sheet organization's	scribe how the organization reports of , and include, if applicable, the text of accounting for conservation easeme	of the footnote to the ents.	organization's financial	statements that describes the
Part		zations Maintaining Collection	•	•	r Similar Assets.
		ete if the organization answered			
1a	works of art,	tion elected, as permitted under SF. historical treasures, or other similar provide, in Part XIII, the text of the f	assets held for put	lic exhibition, educatio	n, or research in furtherance of
b	works of art, l public service,	ation elected, as permitted under S historical treasures, or other similar provide the following amounts relati	assets held for put ing to these items:	lic exhibition, educatio	on, or research in furtherance of
	(i) Revenue in	cluded on Form 990, Part VIII, line 1			• \$
2	If the organization following amount	uded in Form 990, Part X ation received or held works of art, unts required to be reported under S	historical treasures FAS 116 (ASC 958) r	, or other similar asset elating to these items:	s for financial gain, provide the
а	Revenue inclu	ded on Form 990, Part VIII, line 1 .			► \$
	Assets include	d in Form 990, Part X	<u> </u>		
		ion Act Notice, see the Instructions for		Cat. No. 52283D	Schedule D (Form 990) 2015

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Part III Organizations 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 actibition d Loan or exchange programs b Scholarly research e Other c Previde a classificant use of resconservices, check any of the following that are a significant use of resconservices of the organization's collections and explain how they further the organization's exempt purpose in Part Xill. c Prevention of the organization's collections and explain how they further the organization's collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 930, Part IV, line 9, or reported an amount on Form selection form 900, Part Xine 21, for escrow or custodial account lability? Yes No Is the organization include an amount on Form 930, Part X, line 21, for escrow or custodial account lability? Yes No b H*Yes," explain the arrangement in Part Xill and complete the following table: If If If c Ending balance. If If If If If If a b the organization answered 'Yes' on Form 930, Part X, line 21, for escrow or custodial account lability? Yes No b H*Yes," explai	Schedul	e D (Form 990) 2015								Page 2	
collection items (check all that apply): d Loan or exchange programs e Other Other c Preservation for future generations e Other 2 Preservation for future generations e Other Yes No 3 During the year, did the organization solicit or receive denations of art, historical treasures, or other similar assets to be soid to raise funds rather than to be mathaland as part of the organization's collection? Yes No Part W Excorew and Custofial Arrangements. Complete if the organization an agent, trustee, custodian or other intermeding for contributions or other assets not included on form 990, Part X, line 21. Yes No 1a Is the organization includes an amount on Form 990, Part X, line 21. Yes No 2 During the year. 1d 1d Id Id<	Part										
b Scholarly research e ○ Cher c Previde a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. d Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to ratee funds rather than to be maintained as part of the organization's collection? Yes No Part IV Exercive 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. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990 Part X. Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Is Is Amount Is	3										
b Scholarly research e Other c Previde a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. d Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to ratee funds rather than to be maintained as part of the organization's collection? Yes No Part IV Exercive 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. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990 Part X, line 21. Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Yes No c Beginning balance Include an amount on Form 990, Part X, line 21, for earce or or custodial account liability? Yes No Part V Endowment Funds. Complete if the organization nawwered "Yes" on Form 990, Part X, line 10. Part XIII Part XIIII Part XIIII Part XIIII Check here if the explanation has been provided on Part XIII . Part YU a Bigrinning of year balance Imagement in Part XIIII. Check here if the explanation has been provided on Part XIII . Part YU Part XIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	а										
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solidit or receive donations of ant, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection? Yes No Part W 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. 1 Is the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X2	-										
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be old to raise funds rather than to be maintained as part of the organization's collection?		-	\$								
During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raiso 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 930, Part IV, line 9, or reported an amount on Form 930, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not includeed on Form 930, Part X, line 21. Gegrining balance Yes No b ff 'Yes," explain the arrangement in Part XIII and complete the following table: Cell to the organization include an amount on Form 930, Part X, line 21, for escrow or custodial account liability? I'yes No b If 'Yes," explain the arrangement in Part XII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 930, Part IV, line 10. Complete in the organization answered 'Yes' on Form 930, Part IV, line 10. Complete in the organization answered 'Yes' on Form 930, Part IV, line 10. Complete in the organization answered 'Yes' on Form 930, Part IV, line 10. Complete in the organization answered 'Yes' on Form 930, Part IV, line 10. Complete in the organization answered 'Yes' on Form 930, Part IV, line 10. Contributions		Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part									
Part IV Escrow and Custodial Arrangements. Complete if the organization an aswered "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 ff "Yes," explain the arrangement in Part XIII and complete the following table: Amount Amount c Beginning balance Amount It Amount It d Additions during the year It	5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar									
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? Image: Control Part X = Control P	Pari										
1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? No b If Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance		Complete if the organization	-	s" on Form	1 990, F	Part IV, line	9, or r	reported an an	nount on F	orm	
c Beginning balance . Ic Amount d Additions during the year . Id Id e Distributions during the year . Id Id Id 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 . Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (e) Four years back	1a								_		
c Beginning balance . Ic Amount d Additions during the year . Id Id e Distributions during the year . Id Id Id 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 . Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (e) Four years back	b	If "Yes," explain the arrangement in P	art XIII and compl	ete the follo	owing ta	able:					
d Additions during the year 1d e Distributions during the year 1d 1 Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custolial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 2art 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 (e) Four years back b Contributions			·		Ũ			A	mount		
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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 ▶% main percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b Jaa(i) jaa(ii) jaa(ii) jaa(ii) jaa(ii) jaa(iii) isted as required on Schedule R? jaa(iii) jaa(ii) jab jab 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 (other) gaar (b) Cost or other basis (other) gaar (d) Book value d Equipment c Leasehold improvements d Equi											
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b Buildings	19	Land					te ye w				
c Leasehold improvements			-					······································			
d Equipment		5	-								
e Other			-								
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Schedule D (Form 990) 2015

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	ete if the organization answ	wered "Yes" on For	n 990	, Part IV, lin	<u>e 11b. Se</u>	e Form	990, Part X, line
(1	 a) Description of security or category (including name of security) 		(b) i	Book value	Co		od of valuation: of-year market value
Financial derivative	es						
Closely-held equity		[
Other							
(A)							
(B)							
(C)							
(D)							
(E)							
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(G)							
(H)						• ;	
	Form 990, Part X, col. (B) line 12.) ments—Program Related						
	ete if the organization answ		m 000	Part IV lin	0 110 So	o Form	000 Bort V line
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Peace Through Commerce, Inc.

	Reconciliation of Revenue per Audited Financial Statem	ents With Povenue ner	Page 4
Part	Complete if the organization answered "Yes" on Form 990,		netum.
4	Total revenue, gains, and other support per audited financial statements		
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1
2			
a	Net unrealized gains (losses) on investments	2a	-
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	· · · · · · · · · · · ·	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		40
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part			er Return.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.	
1			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	and the second sec
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin		5
Part			
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	o; Part V, line 4; Part X, line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional in	nformation.
			*

Schedule D (For	rm 990) 2015	Page 5
Part XIII	Supplemental Information (continued)	······

Schedule D (Form 990) 2015

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-E Complete to provide information for responses to specific questions Form 990 or 990-EZ or to provide any additional information.	
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www. 	Open to Public irs.gov/form990. Inspection
Name of the organization		Employer identification number
Peace Through Comm	erce, Inc.	27-3971757
Part I, Line 6. The CEC) performed full-time CEO services on a volunteer basis and board members gave	e significant volunteer hours to work
on programs in Isra	el and Palestine and on the AWE program in general.	
Part VI, Section A, Line	e 4. The bylaws of the organization were amended in two respects: 1.) tenure of b	oard members which changed from 1,
2 or 3 years to an in	determinate number of years as shall be decided by the board of directors, and 2	.) the reference to a "vice-chair" was
removed as that off	ie does not exist at this time.	
Part VI, Section B, Line	11b. The form 990 was emailed to all board members before filing, confirmed th	ey all received it and staff was
available to answer	any questions.	
Part VI, Section B, Line	e 12c. At annual board meetings, the policy is reviewed, board members and offic	cers are asked to disclose any
conflicts and reaffir	m their commitment to the policy. A record of affirmation was made and filed wit	h the corporate minute book. At
annual staff meeting	gs the policy is reviewed with the staff members and reaffirmed.	
Part VI, Section B, Line	15b. The organization has adopted the IRC Section 4958 Rebuttable Presumption	on Rule and guidelines. It is required
to follow the rule wi	th every hire of a top official paid in excess of \$50,000, including collecting at lea	st five comparables, reviewing the
person's employme	nt history and pay, circulating it to and obtaining approval of the board prior to the	ieir hire.
Part VI, Section C, Line	19. The organization makes its governing documents, conflicts of interest polic	y and financial statements available
to the public upon r	equest throughout the tax year. Also, the certificate of formation is available onli	ine with the Texas Secretary of State.
Part XI, Line 9. Round	ing adjustment.	
Part III, Line 4d. Other	program services. Expenses for FLOW 2.0, an incubated program.	
Part VI, Section A, Line	2. Director and Officer Philomena Blees and Director Michael Strong have a bus	iness relationship.
		······
For Paperwork Reduct	ion Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056K	Schedule O (Form 990 or 990-EZ) (2015)

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization	Employer identification number
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