

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

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2015
Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015, and ending 06-30-2016

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: ALLIANCE DEFENDING FREEDOM
Doing business as:
Number and street (or P O box if mail is not delivered to street address) Room/suite: 15100 N 90TH ST
City or town, state or province, country, and ZIP or foreign postal code: SCOTTSDALE, AZ 85260

D Employer identification number: 54-1660459
E Telephone number: (480) 444-0020

F Name and address of principal officer: MICHAEL P FARRIS, 15100 N 90TH ST, SCOTTSDALE, AZ 85260

H(a) Is this a group return for subordinates? No Yes
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527

J Website: WWW.ALLIANCEDEFENDINGFREEDOM.ORG

H(c) Group exemption number ▶

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1993

M State of legal domicile: VA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
ADF IS COMMITTED TO TRANSFORMING LAW AND CULTURE SO TRUE FREEDOM CAN FLOURISH

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	11
4 Number of independent voting members of the governing body (Part VI, line 1b)	11
5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	292
6 Total number of volunteers (estimate if necessary)	679
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	46,258,198	50,007,910
	9 Program service revenue (Part VIII, line 2g)	0	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	40,424	52,122
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,012,211	1,477,659
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	48,310,833	51,537,691
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,277,819	7,623,451
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	21,007,878	23,651,174
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,782,379	2,461,012
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 8,116,898		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	20,867,878	23,910,768
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	48,935,954	57,646,405	
19 Revenue less expenses Subtract line 18 from line 12	-625,121	-6,108,714	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	38,683,986	32,795,628
	21 Total liabilities (Part X, line 26)	4,523,622	4,638,805
	22 Net assets or fund balances Subtract line 21 from line 20	34,160,364	28,156,823

Part II Signature Block

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

Sign Here
Signature of officer: *****
Date: 2017-04-06
WAYNE SWINDLER EXEC VP OF OPERATIONS, CFO
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: JACQUELINE ECKMAN
Preparer's signature: JACQUELINE ECKMAN
Date:
Check if self-employed PTIN: P01300648
Firm's name: CLIFTONLARSONALLEN LLP
Firm's EIN: 41-0746749
Firm's address: 20 E THOMAS RD STE 2300
Phone no: (602) 266-2248
PHOENIX, AZ 85012

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
TO KEEP THE DOORS OPEN FOR THE GOSPEL BY ADVOCATING FOR RELIGIOUS FREEDOM, SANCTITY OF LIFE, AND MARRIAGE AND THE FAMILY

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 15,747,966 including grants of \$ 2,572,350) (Revenue \$ 0)
LEGAL ADVOCACY ALLIANCE DEFENDING FREEDOM (ADF) IS AN ALLIANCE-BUILDING LEGAL ORGANIZATION THAT ADVOCATES FOR THE RIGHT OF PEOPLE TO FREELY LIVE OUT THEIR FAITH ADF CHAMPIONS GOD-GIVEN FREEDOMS THAT ALLOW FOR HUMAN FLOURISHING WHILE AFFIRMING THE DIGNITY OF EVERY PERSON ADF EXISTS TO SERVE AN ALLIANCE OF LIKE-MINDED PROFESSIONALS, RALLYING ATTORNEYS AND INFLUENCERS FROM ALL SPHERES OF CULTURE TO DEFEND AND PROMOTE THE CORE ISSUES OF RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND MARRIAGE AND FAMILY ADF OFFERS EXCEPTIONAL LEGAL ADVOCACY AND EXPERTISE FROM OUR 58 STAFF ATTORNEYS BASED AT OUR ADF HEADQUARTERS IN ARIZONA AND AT OFFICES AROUND THE WORLD, INCLUDING THE UNITED NATIONS IN NEW YORK CITY ADF ALSO WORKS WITH OUR MORE-THAN-3,100-STRONG NETWORK OF ALLIED ATTORNEYS AND HAS A 77% WIN RATE IN OUR CASES, PLAYING IMPORTANT ROLES IN 49 SUPREME COURT VICTORIES ADF AND ITS ALLIED PARTNERS WORK TOGETHER TO DEVELOP AND IMPLEMENT EFFECTIVE STRATEGIES TO ESTABLISH CRITICAL LEGAL PRECEDENTS AFFIRMING RELIGIOUS LIBERTY IN STATE COURTS, FEDERAL COURTS, THE U S SUPREME COURT, AND INTERNATIONAL COURTS AND GOVERNING BODIES ADF EXISTS TO SERVE ALLIED INDIVIDUALS AND GROUPS BY PROVIDING TRAINING, COORDINATION, AND FUNDING FOR THEIR EFFORTS, ALONG WITH OUR OWN LEGAL EXPERTISE FOR EXAMPLE, ADF PROVIDES FUNDING AND TRAINING TO ALLIED ATTORNEYS TO HELP THEM MAXIMIZE THEIR OWN LEGAL ADVOCACY WORK, AND SUPPORTS ALLIED ATTORNEYS, CHURCH AND PARACHURCH ORGANIZATION LEADERS, LEGISLATORS AND LEGISLATIVE STAFF MEMBERS, BUSINESS LEADERS, CLIENTS, STUDENT LEADERS, AND OTHER KEY ALLIES WITH NETWORKING, STRATEGY, TRAINING, AND FUNDING REQUESTS FOR LEGAL ADVOCACY IN DEFENSE OF RELIGIOUS LIBERTY CONTINUE TO INCREASE, INDICATING AN OVERWHELMING NEED FOR THE ALLIANCE IN THE PUBLIC SQUARE

4b (Code) (Expenses \$ 13,859,844 including grants of \$ 1,617,192) (Revenue \$ 0)
PUBLIC EDUCATION ADF PROVIDES EDUCATION TO THE PUBLIC ABOUT THE SIGNIFICANCE AND STATE OF RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND MARRIAGE AND FAMILY IN AMERICA AND AROUND THE WORLD THIS IS DONE THROUGH PRINTED MATERIALS, MAILINGS, WEBINARS, SOCIAL MEDIA, WEBSITES, EMAIL ALERTS, NEWSLETTERS, MEDIA AND PERSONAL APPEARANCES, BLOGS, OP-EDS, AND EVENTS ADF PUBLIC EDUCATION EFFORTS FOCUS ON INFORMING THE PUBLIC AND RAISING AWARENESS OF THE FOLLOWING THE FRAMERS ORIGINAL INTENT FOR THE CONSTITUTION OF THE UNITED STATES AND THE BILL OF RIGHTS TO REFLECT NATURAL LAW, ENTITIES THAT SEEK TO RE-DIRECT AND DISTORT THE CONSTITUTION'S ORIGINAL PURPOSE, AND U S AND INTERNATIONAL CHALLENGES TO RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND FAMILY VALUES ADF PROVIDES REAL-LIFE EXAMPLES OF SITUATIONS AND COURT CASES WHERE JUSTICE AND CIVIL LIBERTIES HAVE BEEN THWARTED, AND HOW THE LEGAL ADVOCACY EFFORTS OF ADF AND ITS ALLIED PARTNERS HAVE HELPED OBTAIN JUSTICE THROUGH THESE PUBLIC EDUCATION EFFORTS, ADF CAN SERVE AS THE FIRST LINE OF DEFENSE FOR INDIVIDUALS AND GROUPS WHOSE RELIGIOUS FREEDOM IS IN JEOPARDY WE ALSO USE THIS PUBLIC EDUCATION WORK TO RECRUIT POTENTIAL ALLIES, SUCH AS ATTORNEYS INTERESTED IN ATTENDING THE ADF RELIGIOUS LIBERTY SUMMIT AND LAW STUDENTS CONSIDERING THE BLACKSTONE LEGAL FELLOWSHIP PROGRAM ADF ALSO REQUESTS THAT THE RECIPIENTS OF THESE EDUCATIONAL COMMUNICATIONS REMEMBER ITS ACTIVITIES IN PRAYER AND PROVIDES INFORMATION AND DETAILS TO ASSIST THEM IN PRAYING INTELLIGENTLY, SPECIFICALLY, AND WITH PURPOSE

4c (Code) (Expenses \$ 11,976,844 including grants of \$ 1,028,828) (Revenue \$ 0)
ALLIED SUPPORT AND TRAINING AS AN ALLIANCE-BUILDING LEGAL ORGANIZATION THAT ADVOCATES FOR THE RIGHT OF PEOPLE TO FREELY LIVE OUT THEIR FAITH, ALLIANCE DEFENDING FREEDOM (ADF) IS COMMITTED TO EQUIPPING ALLIES TO DEFEND AND PROMOTE RELIGIOUS LIBERTY TO THE BEST OF THEIR ABILITY, AND TO TRANSFORM LAW AND CULTURE SO TRUE FREEDOM CAN FLOURISH TO THIS END, ADF OFFERS WORLD-CLASS TRAINING FOR CHRISTIAN ATTORNEYS AND PROFESSIONALS, FOR LAW STUDENTS, AND FOR COLLEGE STUDENTS INTERESTED IN PURSUING A CAREER IN LAW, PUBLIC POLICY, GOVERNMENT, BUSINESS, AND OTHER CULTURE-SHAPING FIELDS THROUGH THE ADF RELIGIOUS LIBERTY SUMMITS, PRACTICING ATTORNEYS, LEGAL ADVOCATES, BUSINESS LEADERS, ENTREPRENEURS, CLERGY, POLICY LEADERS, AND MEDIA LEADERS ARE INVITED TO PARTICIPATE IN WORLD-CLASS TRAINING, STRATEGY, AND NETWORKING SESSIONS AROUND THE WORLD TO DATE, MORE THAN 1,923 U S AND INTERNATIONAL ATTORNEYS HAVE COMPLETED THE ADF RELIGIOUS LIBERTY SUMMIT TRAINING 3,151 ADF ALLIED ATTORNEYS HAVE VOLUNTEERED PRO BONO LEGAL ADVOCACY SERVICES TO LOCAL AND INTERNATIONAL COMMUNITIES VALUED AT OVER \$202 MILLION THIS AMOUNT IS FAR IN EXCESS OF THE COST OF THE PROGRAM MOST U S STATE BARS ACCEPT ACCREDITATION FOR PORTIONS OF THE LEGAL ADVOCACY TRAINING WITH CONTINUING LEGAL EDUCATION CREDIT THROUGH THE BLACKSTONE LEGAL FELLOWSHIP, ADF PROVIDES TRAINING TO TOP CHRISTIAN LAW STUDENTS FROM AROUND THE WORLD ON NATURAL LAW, CONSTITUTIONAL JURISPRUDENCE, AND THE HISTORY OF RELIGIOUS LIBERTY IN AMERICAN LAW AND GOVERNMENT AND GOVERNMENTS ACROSS THE GLOBE THESE SUBJECTS ARE OFTEN SORELY NEGLECTED AND EVEN BLATANTLY MISTAUGHT IN PROMINENT LAW SCHOOLS THE BLACKSTONE LEGAL FELLOWSHIP ALSO FOCUSES ON EQUIPPING THESE STUDENTS TO INTEGRATE THEIR FAITH INTO THEIR WORK IN A CAREER THAT IS OFTEN HOSTILE TO CHRISTIANITY IN ADDITION TO PROVIDING COURSES TAUGHT FROM PROMINENT GUEST LECTURERS, THE PROGRAM INCLUDES SUMMER INTERNSHIPS WITH ALLIED PARTNERS LOCATED THROUGHOUT THE WORLD TO DATE, OVER 1,800 STUDENTS REPRESENTING 227 LAW SCHOOLS HAVE GRADUATED FROM THE BLACKSTONE LEGAL FELLOWSHIP THROUGH THE ARETE ACADEMY, ADF OFFERS A SIMILAR TRAINING TO COLLEGE AND UNIVERSITY STUDENTS WHO SENSE A CALLING TO LIVE OUT THEIR FAITH IN THE FIELDS OF LAW, GOVERNMENT, PUBLIC POLICY, OR BUSINESS TO DATE OVER 650 YOUNG PEOPLE FROM THE TOP UNIVERSITIES IN AMERICA, AND THE WORLD HAVE PARTICIPATED IN ARETE ACADEMY MANY OF THEM GO ON TO ATTEND THE BLACKSTONE LEGAL FELLOWSHIP DURING LAW SCHOOL ADF RECENTLY BEGAN OFFERING ARETE ACADEMY SESSIONS IN LATIN AMERICA AND IN EUROPE TO SUPPORT THE FINEST CHRISTIAN COLLEGE STUDENTS AROUND THE WORLD, EQUIPPING THEM WITH THE CHARACTER, COMPETENCE, AND CREDENTIALS TO EXCEL IN THEIR CHOSEN FIELD

See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ 3,545,566 including grants of \$ 2,405,081) (Revenue \$ 0)

4e Total program service expenses ▶ 45,130,220

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 20b regarding organizational requirements and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Answer. Rows include questions 21 through 38, covering topics like grants, tax-exempt bonds, excess benefit transactions, and controlled entities. Includes a 'Note' at the bottom regarding Form 990 filers.

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

Table with columns for question number, question text, and Yes/No columns. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NY, NJ, OK, OR, PA, RI, SC, TN, UT, VA, WI, WV, NM, AZ
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶WAYNE SWINDLER 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260 (480) 444-0020	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							3,467,403	0	361,354	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 26

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ALANIZ METRO GROUP 1805 E WASHINGTON ST MOUNT PLEASANT, IA 52641	PRINTING	1,742,209
MASTERWORKS 19462 POWDER HILL PL NE POULSBO, WA 98370	CONSULTING	1,598,756
SIGNALCSK BRAND PARTNERS 1900 WAZEE ST SUITE 311 DENVER, CO 80202	CREATIVE AND DESIGN	306,300
BLACKBAUD 2000 DANIEL ISLAND DR CHARLESTON, SC 29492	SOFTWARE DEVELOPMENT	261,742
JAZEPRO MEDIA LLC 39506 N DAISY MOUNTAIN DR 112-167 ANTHEM, AZ 85086	WEB PAGE DESIGN	241,950

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 22

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a _____					
	b Membership dues 1b _____					
	c Fundraising events 1c _____					
	d Related organizations 1d _____ 119,501					
	e Government grants (contributions) 1e _____					
	f All other contributions, gifts, grants, and similar amounts not included above 1f _____ 49,888,409					
	g Noncash contributions included in lines 1a-1f \$ _____ 561,576					
	h Total. Add lines 1a-1f ▶	50,007,910				
Program Service Revenue	2a _____ Business Code _____					
	b _____					
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶	52,122			52,122	
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
	6a Gross rents	(i) Real 186,660				
		b Less rental expenses 0				
		c Rental income or (loss) 186,660				
		d Net rental income or (loss) ▶ 186,660				
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss) ▶					
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a					
		b Less direct expenses b				
		c Net income or (loss) from fundraising events ▶				
	9a Gross income from gaming activities See Part IV, line 19 a					
		b Less direct expenses b				
		c Net income or (loss) from gaming activities ▶				
	10a Gross sales of inventory, less returns and allowances a					
		b Less cost of goods sold b				
c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue		Business Code				
11a COURT AWARDED FEES	900099	979,457			979,457	
b HONORARIA	900099	245,736			245,736	
c MISCELLANEOUS	900099	65,806			65,806	
d All other revenue						
e Total. Add lines 11a-11d ▶		1,290,999				
12 Total revenue. See Instructions ▶		51,537,691	0	0	1,529,781	

Part IX Statement of Functional Expenses

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

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

		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.					
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,686,177	3,686,177		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	831,600	831,600		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	3,105,674	3,105,674		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,608,782	1,778,100	391,530	439,152
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	164,925		164,925	
7	Other salaries and wages	16,330,308	13,063,526	1,430,144	1,836,638
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	463,318	379,658	40,627	43,033
9	Other employee benefits	2,705,419	2,011,047	338,258	356,114
10	Payroll taxes	1,378,422	1,071,774	142,477	164,171
11	Fees for services (non-employees)				
a	Management	741,381	442,939	127,705	170,737
b	Legal	47,016	18,124	19,387	9,505
c	Accounting	56,612	60	56,423	129
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	2,461,012			2,461,012
f	Investment management fees	66,092	2,485	62,084	1,523
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	929,927	665,701	29,871	234,355
12	Advertising and promotion	6,545,283	5,237,911	381,969	925,403
13	Office expenses	1,594,287	1,286,989	126,641	180,657
14	Information technology	535,447	400,605	66,020	68,822
15	Royalties				
16	Occupancy	2,199,380	1,668,086	250,246	281,048
17	Travel	4,454,926	4,017,837	96,069	341,020
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,415,734	3,161,740	60,004	193,990
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,333,564	1,734,927	276,375	322,262
23	Insurance	148,515	111,989	14,534	21,992
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	RESOURCE MATERIALS	285,538	243,742	25,869	15,927
b	RECEIPTS PROCESSING	214,816	173,899	16,057	24,860
c	FINANCIAL SERVICES	203,998	582	202,310	1,106
d	FOREIGN CURRENCY TRANSL	46,130	0	46,130	0
e	All other expenses	92,122	35,048	33,632	23,442
25	Total functional expenses. Add lines 1 through 24e	57,646,405	45,130,220	4,399,287	8,116,898
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	6,571,589	5,511,602	316,499	743,488

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash-non-interest-bearing	2,239,934	1	1,596,947
	2 Savings and temporary cash investments	13,874,094	2	8,977,108
	3 Pledges and grants receivable, net	445,503	3	233,047
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	21,042	8	23,240
	9 Prepaid expenses and deferred charges	2,615,122	9	1,165,151
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 28,104,440		
	b Less accumulated depreciation	10b 11,516,450	17,316,569	10c 16,587,990
	11 Investments—publicly traded securities	7,904	11	2,135,954
	12 Investments—other securities See Part IV, line 11	1,805,526	12	1,771,983
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	358,292	15	304,208
16 Total assets. Add lines 1 through 15 (must equal line 34)	38,683,986	16	32,795,628	
Liabilities	17 Accounts payable and accrued expenses	4,115,464	17	3,865,412
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	408,158	25	773,393
	26 Total liabilities. Add lines 17 through 25	4,523,622	26	4,638,805
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	31,683,165	27	25,909,128
	28 Temporarily restricted net assets	2,477,199	28	2,247,695
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	34,160,364	33	28,156,823	
34 Total liabilities and net assets/fund balances	38,683,986	34	32,795,628	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	51,537,691
2	Total expenses (must equal Part IX, column (A), line 25)	2	57,646,405
3	Revenue less expenses Subtract line 2 from line 1	3	-6,108,714
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	34,160,364
5	Net unrealized gains (losses) on investments	5	10,697
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	128,971
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-34,495
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	28,156,823

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 3,545,566 including grants of \$ 2,405,081) (Revenue \$ 0)

GRANTS AND FUNDING ADF PROVIDES GRANT FUNDING FOR LEGAL CASES AND PROGRAMS THAT KEEP THE DOOR OPEN FOR THE GOSPEL BY ADVOCATING FOR RELIGIOUS LIBERTY, THE SANCTITY OF LIFE, AND MARRIAGE AND FAMILY THIS GRANT FUNDING COVERS EXPENSES FOR LITIGATION, INCLUDING TRAINING FOR EXPERT WITNESSES AND ACQUIRING STRONG AMICUS BRIEF SUPPORT FOR OUR CASES TO ENSURE THE BEST POSSIBILITY OF SUCCESS GRANT REQUESTS ARE REVIEWED AND RECOMMENDED BY AN INDEPENDENT GRANTS AND REVIEW COMMITTEE, WHICH IS COMPOSED OF EXPERT ATTORNEYS WHO VOLUNTEER THEIR TIME TO ADF FOR THIS PURPOSE UNDER THE GOVERNING BOARD OF DIRECTOR'S POLICY, NO GRANT IS AWARDED UNTIL IT IS FULLY FUNDED AND SET ASIDE IN SELF-DESIGNATED ACCOUNTS GRANTS ARE DISBURSED UPON PERFORMANCE AND IN ACCORDANCE WITH THE TERMS OF THE GRANT AGREEMENTS AS OF THIS WRITING, ADF HAS ISSUED ALMOST 3,400 GRANTS TOTALING OVER \$46 MILLION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SETH MORGAN DIRECTOR	2 00 0 00	X						0	0	0
CHARLES W PICKERING SR DIRECTOR	2 00 0 00	X						0	0	0
JOHN ROGERS DIRECTOR	2 00 0 00	X						0	0	0
ALAN SEARS PRESIDENT & CEO	60 00 1 00			X				389,598	0	31,650
BENJAMIN BULL CHIEF COUNSEL, EVP OF ADF PROGRAMS	50 00 0 00			X				295,659	0	31,650
MARK FEDDERN LEFT 2016 CFO & SECURITY DIRECTOR	55 00 1 00			X				225,003	0	25,356
TONY JOHNSON COO	50 00 0 00			X				107,223	0	9,203
WAYNE SWINDLER EVP OPERATIONS, CFO	55 00 1 00			X				225,883	0	31,250
GARY MCCALED SR COUNSEL, VP OF ADVOCACY & RESEARCH	55 00 0 00			X				226,283	0	31,560
JEFFERY VENTRELLA SR COUNSEL, SVP OF TRAINING	50 00 0 00				X			202,570	0	17,001

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARK CROZET SVP DEVELOPMENT	55 00 0 00				X			230,462	0	16,061
KRISTEN WAGGONER SR COUNSEL, SVP U S LEGAL ADV	50 00 0 00				X			203,267	0	24,110
GLEN LAVY CORPORATE COUNSEL	50 00 0 00				X			182,103	0	31,009
TIM CHANDLER SR CNSL SVP OF ALLIANCE ADV	50 00 0 00				X			174,436	0	13,674
CHARLES BOLTE LEFT 2016 CCO	50 00 0 00					X		197,191	0	25,650
DOUG NAPIER SVP OF ALLIANCE RELATIONS	55 00 0 00					X		208,083	0	21,540
JORDAN LORENCE SR COUNSEL	50 00 0 00					X		208,911	0	16,205
DAVID CORTMAN SR COUNSEL, VP U S LITIGATION	50 00 0 00					X		196,907	0	14,669
KEVIN THERIOT SR COUNSEL, VP CENTER FOR LIFE	50 00 0 00					X		193,824	0	20,766

SCHEDULE A (Form 990 or 990EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
10 An organization organized and operated exclusively to test for public safety.
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations...
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations.
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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

Section A. Public Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a)2011, (b)2012, (c)2013, (d)2014, (e)2015, (f)Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied; 3 Value of services or facilities; 4 Total; 5 Portion of total contributions exceeding 2%; 6 Public support.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a)2011, (b)2012, (c)2013, (d)2014, (e)2015, (f)Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, etc; 9 Net income from unrelated business activities; 10 Other income; 11 Total support.

12 Gross receipts from related activities, etc (see instructions)
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 14, 15. Rows include: 14 Public support percentage for 2015; 15 Public support percentage for 2014.

16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here.
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here.
17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here.
b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here.
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)**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.*

	Yes	No
1		
2		

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).*

	Yes	No
1		

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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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.*

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**)
- a** The organization satisfied the Activities Test. Complete **line 2** below.
- b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2** Activities Test **Answer (a) and (b) below.**

- 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
2a		
2b		
3a		
3b		

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

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income

- 1** Net short-term capital gain
- 2** Recoveries of prior-year distributions
- 3** Other gross income (see instructions)
- 4** Add lines 1 through 3
- 5** Depreciation and depletion
- 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)
- 7** Other expenses (see instructions)
- 8** **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)

	(A) Prior Year	(B) Current Year (optional)
1		
2		
3		
4		
5		
6		
7		
8		

Section B - Minimum Asset Amount

- 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
- b** Average monthly cash balances
- c** Fair market value of other non-exempt-use assets
- d** **Total** (add lines 1a, 1b, and 1c)
- e** **Discount** claimed for blockage or other factors (explain in detail in Part VI) _____
- 2** Acquisition indebtedness applicable to non-exempt use assets
- 3** Subtract line 2 from line 1d
- 4** Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)
- 5** Net value of non-exempt-use assets (subtract line 4 from line 3)
- 6** Multiply line 5 by 0.35
- 7** Recoveries of prior-year distributions
- 8** **Minimum Asset Amount** (add line 7 to line 6)

	(A) Prior Year	(B) Current Year (optional)
1		
1a		
1b		
1c		
1d		
2		
3		
4		
5		
6		
7		
8		

Section C - Distributable Amount

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

		Current Year
1		
2		
3		
4		
5		
6		

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

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

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

Part VI Supplemental Information.

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

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	MISCELLANEOUS INCOME - 2011 AMOUNT \$ 239,985 2012 AMOUNT \$ 439,610 2013 AMOUNT \$ 3,860 2014 AMOUNT \$ 212,132 2015 AMOUNT \$ 65,806 COURT AWARDED FEES - 2011 AMOUNT \$ 1,394,900 2012 AMOUNT \$ 451,024 2013 AMOUNT \$ 574,537 2014 AMOUNT \$ 1,194,381 2015 AMOUNT \$ 979,457 HONORARIA - 2013 AMOUNT \$ 481,269 2014 AMOUNT \$ 302,118 2015 AMOUNT \$ 245,736

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047
2015
Open to Public Inspection

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number
54-1660459

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

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

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

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

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

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

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

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

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 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 in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,869,735	4,285,545	2,789,582	1,441,460	1,919
b Contributions	1,636,049	770,652	1,530,503	1,404,708	1,439,541
c Net investment earnings, gains, and losses	175,336	57,995	88,296	5,414	
d Grants or scholarships		180,484	90,000	62,000	
e Other expenditures for facilities and programs			2,015		
f Administrative expenses	353,826	63,973	30,821		
g End of year balance	6,327,294	4,869,735	4,285,545	2,789,582	1,441,460

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 88 010 %
 - b** Permanent endowment ▶ 5 150 %
 - c** Temporarily restricted endowment ▶ 6 840 %
- The percentages on lines 2a, 2b, and 2c should equal 100%

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|--|---------------|-----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | Yes |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | Yes |
- 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" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c) depreciation	(d) Book value
1a Land		2,000,000		2,000,000
b Buildings		15,239,024	5,170,633	10,068,391
c Leasehold improvements		659,340	151,413	507,927
d Equipment		10,206,076	6,194,404	4,011,672
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				16,587,990

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	1,391,648	F
(3) Other (A) RABBI TRUST	380,335	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	1,771,983	

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

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

1. (a) Description of liability	(b) Book value
Federal income taxes	
DEFERRED RENT PAYABLE	773,393
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	773,393

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	59,157,683
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	10,697
b	Donated services and use of facilities	2b	7,157,063
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	1,916,273
e	Add lines 2a through 2d	2e	9,084,033
3	Subtract line 2e from line 1	3	50,073,650
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	1,464,041
c	Add lines 4a and 4b	4c	1,464,041
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	51,537,691

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

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

1	Total expenses and losses per audited financial statements	1	63,832,634
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	7,157,063
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	373,706
e	Add lines 2a through 2d	2e	7,530,769
3	Subtract line 2e from line 1	3	56,301,865
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	1,344,540
c	Add lines 4a and 4b	4c	1,344,540
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	57,646,405

Part XIII Supplemental Information

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

Return Reference	Explanation
PART V, LINE 4	ADF FOUNDATION, A RELATED ORGANIZATION MAINTAINS THE ENDOWMENT TO SUPPORT ALLIANCE DEFENDING FREEDOM

Part XIII Supplemental Information (continued)

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	ADF FOUNDATION REVENUE 1,811,385 15100 SOLAR REVENUE 104,888
PART XI, LINE 4B - OTHER ADJUSTMENTS	INTERCOMPANY ELIMINATIONS 1,464,041
PART XII, LINE 2D - OTHER ADJUSTMENTS	15100 SOLAR EXPENSES 139,383 ADF FOUNDATION EXPENSES 234,323
PART XII, LINE 4B - OTHER ADJUSTMENTS	INTERCOMPANY ELIMINATIONS 1,344,540

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2015

**Open to Public
Inspection**

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

Part I General Information on Activities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	8	0			3,044,805
b Total from continuation sheets to Part I	0	0			31,500
c Totals (add lines 3a and 3b)	8	0			3,076,305

Part II Grants and Other Assistance to Organizations or Entities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	See Add'l Data								
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities ▶ 19

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) CASH SCHOLARSHIP FOR LAW SCHOOL	SOUTH AMERICA	3	18,900	WIRE TRANSFER	0	N/A	N/A
(2) CASH SCHOLARSHIP FOR LAW SCHOOL	EUROPE	2	12,600	WIRE TRANSFER	0	N/A	N/A
(3) CASH SCHOLARSHIP FOR LAW SCHOOL	CENTRAL AMERICA AND THE CARIBBEAN	1	6,300	WIRE TRANSFER	0	N/A	N/A
(4) CASH SCHOLARSHIP FOR LAW SCHOOL	NORTH AMERICA	2	11,300	WIRE TRANSFER	0	N/A	N/A
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	WHEN ALLIANCE DEFENDING FREEDOM APPROVES A GRANT, THE FUNDS ARE RETAINED BY ALLIANCE DEFENDING FREEDOM AND SET ASIDE TO BE USED EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST. DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3	ACCRUAL METHOD

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III, COL (C)	THE ESTIMATED NUMBER OF RECIPIENTS IS DETERMINED BY THE NUMBER OF APPROVED SCHOLARSHIP APPLICATIONS

Additional Data

Software ID:

Software Version:

EIN: 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,	1	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	92,258
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	5	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	2,464,529
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	1	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	382,119

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	5,000
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	56,970
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	26,329

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	OTHER ACTIVITES	N/A	6,300
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	1	0	OTHER ACTIVITES	N/A	11,300
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	OTHER ACTIVITES	N/A	18,900

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	OTHER ACTIVITES	N/A	12,600

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	HUMAN RIGHTS LEGAL WORK	951,625	WIRE TRANSFERS	0	N/A	N/A
		EUROPE	HUMAN RIGHTS LEGAL WORK	578,007	WIRE TRANSFERS	0	N/A	N/A
		EUROPE	HUMAN RIGHTS LEGAL WORK	339,819	WIRE TRANSFERS	0	N/A	N/A
		EUROPE	HUMAN RIGHTS LEGAL WORK	505,982	WIRE TRANSFERS	0	N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	HUMAN RIGHTS LEGAL WORK	12,602	WIRE TRANSFERS	0	N/A	N/A
		NORTH AMERICA	HUMAN RIGHTS LEGAL WORK	210,888	WIRE TRANSFERS	0	N/A	N/A
		SOUTH ASIA	HUMAN RIGHTS LEGAL WORK	88,210	WIRE TRANSFERS	0	N/A	N/A
		NORTH AMERICA	HUMAN RIGHTS LEGAL WORK	163,395	WIRE TRANSFERS	0	N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	HUMAN RIGHTS LEGAL WORK	60,647	WIRE TRANSFERS	0	N/A	N/A
		EAST ASIA & THE PACIFIC	HUMAN RIGHTS LEGAL WORK	52,000	WIRE TRANSFERS	0	N/A	N/A
		SUB-SAHARAN AFRICA	HUMAN RIGHTS LEGAL WORK	26,329	WIRE TRANSFERS	0	N/A	N/A
		SOUTH AMERICA	HUMAN RIGHTS LEGAL WORK	5,000	WIRE TRANSFERS	0	N/A	N/A

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a
 Attach to Form 990 or Form 990-EZ
 Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number
54-1660459

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 MASTERWORKS INC 19265 POWDER HILL PLACE NE POULSBO, WA 98370	CONSULTING ON DIRECT MAIL PROGRAM		No	16,087,398	2,153,882	13,933,516
2 INFOCISION PO BOX 932441 CLEVELAND, OH 44193	TELEMARKETING		No	152,519	90,158	62,361
3 DUNHAM COMPANY 6111 WEST PLANO PARKWAY SUITE 2700 PLANO, TX 75093	FUNDRAISING CONSULTATION		No	0	210,113	0
4 CAMPAIGNHQ 109 WEST FRONT ST PO BOX 257 BROOKLYN, IA 52211	TELEMARKETING		No	0	6,859	0
5						
6						
7						
8						
9						
10						
Total				16,239,917	2,461,012	13,995,877

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

AR, CA, CO, DC, FL, GA, HI, IL, KS, LA, ME, MD, MA, MI, MN, NH, NJ, NM, NC, ND, OH, OK, OR, PA, SC, TN, VA, WA, WI, AK, CT, MS, NY, RI, UT, WV, AZ

Part II Fundraising Events.

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

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

Part III Gaming.

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

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

9 Enter the state(s) in which the organization conducts gaming activities _____

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

b If "No," explain _____

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

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ _____

Address ▶ _____

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

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

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions

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

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

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

Return Reference	Explanation
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Schedule I (Form 990)

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

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Row 1 contains 'See Additional Data Table'.

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) CASH SCHOLARSHIP FOR LAW SCHOOL	132	831,600	0	N/A	N/A

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

Return Reference	Explanation
PART I, LINE 2	WHEN ALLIANCE DEFENDING FREEDOM APPROVES A GRANT, THE FUNDS ARE RETAINED BY ALLIANCE DEFENDING FREEDOM AND SET ASIDE TO BE EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED

Additional Data

Software ID:
Software Version:
EIN: 54-1660459
Name: ALLIANCE DEFENDING FREEDOM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AHREND LAW FIRM PLLC 16 BASIN STREET SW EPHRATA, WA 98823	21-2277663	N/A	17,000	0	N/A	N/A	MARRIAGE PROJECT
ADF FOUNDATION 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260	86-1158500	501(C)(3)	1,464,041	0	N/A	N/A	RELIGIOUS LIBERTY
AMERICAN LIBERTIES INSTITUTE PO BOX 547503 ORLANDO, FL 32854	59-3309465	501(C)(3)	60,000	0	N/A	N/A	CHURCH AND LIFE PROJECTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIOETHICS DEFENSE FUND - AZ 6811 E VOLTAIRE AVE SCOTTSDALE, AZ 85254	72-1528822	501(C)(3)	35,000	0	N/A	N/A	LIFE PROJECT
BRENA BELL & CLARKSON PC 810 N STREET SUITE 100 ANCHORAGE, AK 99501	92-0127640	N/A	41,625	0	N/A	N/A	GENERAL LITIGATION AND LIFE PROJECT
CENTER FOR RELIGIOUS EXPRESSION 699 OAKLEAF OFFICE LANE SUITE 107 MEMPHIS, TN 38117	42-8219756	501(C)(3)	133,800	0	N/A	N/A	PUBLIC SQUARE PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAPLAIN ALLIANCE FOR RELIGIOUS LIBERTY PO BOX 151353 ALEXANDRIA, VA 22315	45-3911937	501(C)(3)	20,000	0	N/A	N/A	CHURCH PROJECT
CHARLOTTE LOZIER INSTITUTE 1200 NEW HAMPSHIRE AVE NW SUITE 750 750 WASHINGTON, DC 20036	26-4788700	501(C)(3)	30,000	0	N/A	N/A	LIFE PROJECT
CIVIL RIGHTS RESEARCH CENTER 1875 I STREET NW SUITE 500 WASHINGTON, DC 20006	47-4348553	501(C)(3)	330,000	0	N/A	N/A	ALL AREAS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CL FOUNDATION 8655 EXPLORER DR COLORADO SPRINGS, CO 80920	46-4577178	501(C)(3)	375,500	0	N/A	N/A	LIFE PROJECT
CUTLER TRAINOR & CUTLER LLP 2 HEMPHILL PLACE SUITE 153 MALTA, NY 12020	14-1833304	N/A	7,500	0	N/A	N/A	MARRIAGE PROJECT
FIDELIS CENTER FOR LAW AND POLICY PO BOX 2709 CHICAGO, IL 60690	20-2787890	501(C)(3)	164,500	0	N/A	N/A	LIFE PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEDOM OF CONSCIENCE DEFENSE FUND PO BOX 9520 RANCHO SANTA FE, CA 92067	30-0741605	501(C)(3)	290,332	0	N/A	N/A	LIFE AND MARRIAGE PROJECTS
HOME SCHOOL FOUNDATION ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	52-1354365	501(C)(3)	37,500	0	N/A	N/A	INTERNATIONAL PROJECT
HUMAN LIFE OF WASHINGTON 14400 BEL-RED RD SUITE 207 BELLEVUE, WA 98007	91-0904419	501(C)(3)	7,942	0	N/A	N/A	LIFE PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JAMES MADISON CENTER FOR FREE SPEECH INC ONE SOUTH SIXTH STREET TERRE HAUTE, IN 47807	23-7442564	501(C)(3)	25,000	0	N/A	N/A	LIFE PROJECT
KIRKPATRICK LAW OFFICES PC 843 PENNIMAN AVE SUITE 201 PLYMOUTH, MI 48170	26-0719168	N/A	10,000	0	N/A	N/A	MARRIAGE PROJECT
LANGDON LAW LLC 8913 CINCINNATI- DAYTON ROAD WEST CHESTER, OH 45069	01-0752200	N/A	5,000	0	N/A	N/A	ALL AREAS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAW OFFICE OF JASON R CRADDOCK 19 S LASALLE SUITE 604 CHICAGO, IL 60603	35-2724233	N/A	6,040	0	N/A	N/A	UNIVERSITY PROJECT
LAW OFFICE OF SCOTT D BERGTHOLD 2290 OGLETREE AVE SUITE 106 CHATTANOOGA, TN 37421	86-1036392	N/A	10,687	0	N/A	N/A	GENERAL LITIGATION
LAW OFFICES OF HERBERT GREY 4800 SW GRIFFITH DRIVE 320 BEAVERTON, OR 97005	76-0743764	N/A	9,500	0	N/A	N/A	UNIVERSITY PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAW OFFICES OF JONATHAN R WHITEHEAD LLC 229 SE DOUGLAS STE 210 LEES SUMMIT, MO 64063	26-3065769	N/A	20,000	0	N/A	N/A	CHURCH PROJECT
LIFE LEGAL DEFENSE FOUNDATION PO BOX 2105 2129 BIG RANCH ROAD NAPA, CA 94558	68-0191488	501(C)(3)	20,000	0	N/A	N/A	PUBLIC SCHOOL PROJECT
MAUCK & BAKER LLC ONE N LASALLE STREET SUITE 600 CHICAGO, IL 60602	36-4394768	N/A	74,089	0	N/A	N/A	CHURCH PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MRD LAW 3301 WEST CLYDE PLACE DENVER, CO 80211	45-4324795	N/A	5,469	0	N/A	N/A	MARRIAGE PROJECT
NATIONAL CHRISTIAN FOUNDATION 11625 RAINWATER DR SUITE 500 ALPHARETTA, GA 30009	58-1493949	501(C)(3)	83,575	0	N/A	N/A	COMMUNICATIONS PROJECT
ROADS OF SUCCESS 2896 HACIENDA DRIVE DUARTE, CA 91010	26-0809074	501(C)(3)	30,476	0	N/A	N/A	INTERNATIONAL PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUTA SOULIOS & STRATIS LLP 10-04 RIVER ROAD FAIR LAWN, NJ 07410	22-3630626	N/A	28,390	0	N/A	N/A	MARRIAGE PROJECT
SCHAERR DUNCAN LLP 1717 K STREET NW SUITE 900 WASHINGTON, DC 20006	46-5018287	N/A	10,000	0	N/A	N/A	MARRIAGE PROJECT
SCHAERR DUNCAN LLP 1717 K STREET NW SUITE 900 WASHINGTON, DC 20006	47-4993863	N/A	15,000	0	N/A	N/A	MARRIAGE PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEPHEN T FIEWEGER P C 5157 UTICA RIDGE ROAD DAVENPORT,IA 52807	47-2179103	N/A	74,500	0	N/A	N/A	UNIVERSITY PROJECT
STORY LAW FIRM LLC 438 E MILSAP RD SUITE 103 FAYETTEVILLE,AR 72703	26-3980897	N/A	20,412	0	N/A	N/A	GENERAL LITIGATION
STURGILL TURNER BARKER & MOLONEY PLLC 333 WEST VINE STREET SUITE 1400 LEXINGTON,KY 40507	61-0576615	N/A	5,887	0	N/A	N/A	PUBLIC SQUARE PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CLAREMONT INSTITUTE 1317 W FOOTHILL BLVD STE 120 UPLAND, CA 91786	95-3443202	501(C)(3)	10,000	0	N/A	N/A	MARRIAGE PROJECT
WADLEIGH STARR & PETERS PLLC 95 MARKET STREET MANCHESTER, NH 03101	02-0504984	N/A	93,237	0	N/A	N/A	LIFE, MARRIAGE AND PUBLIC SQUARE PROJECTS
WASHINGTON LEGAL SERVICES PLLC PO BOX 2400 SNOHOMISH, WA 98291	27-0454847	N/A	16,726	0	N/A	N/A	MARRIAGE PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHITEHEAD LAW FIRM LLC 200 NE MISSOURI ROAD SUITE 200 LEES SUMMIT, MO 64086	49-0583297	N/A	21,449	0	N/A	N/A	LIFE AND MARRIAGE PROJECTS

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**

2015
Open to Public Inspection

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

Name of the organization ALLIANCE DEFENDING FREEDOM	Employer identification number 54-1660459
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Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b Yes									
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:										
a Receive a severance payment or change-of-control payment?	4a Yes									
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No								
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c	No								
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.										
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
a The organization?	5a	No								
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.	5b	No								
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
a The organization?	6a	No								
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.	6b	No								
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No								
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No								
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9									

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	FIRST CLASS TRAVEL MAY BE PROVIDED TO EMPLOYEES FOR AIR TRAVEL OF EXTENDED LENGTH OR WHEN AVAILABILITY OF RESERVATIONS IS LIMITED TO FIRST CLASS. TYPICALLY THESE ARE LOW OR NO EXPENSE DUE TO AIRLINE FREQUENT FLYER PROGRAMS WHICH ALLOW UPGRADES TO AIRLINE TRAVEL. THIS IS FOR THE CONVENIENCE AND BUSINESS PURPOSE OF THE ORGANIZATION, NOT THE INDIVIDUAL AND IS NOT TREATED AS TAXABLE INCOME. TRAVEL FOR COMPANIONS IS PROVIDED WHEN THE COMPANION'S ATTENDANCE AT MEETINGS, CONFERENCES, ETC. HAS A BONA FIDE BUSINESS PURPOSE TO THE ORGANIZATION. THIS IS NOT TREATED AS TAXABLE COMPENSATION. THESE EXPENSE ITEMS ARE NOT LIMITED TO OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED INDIVIDUALS, BUT ARE AVAILABLE TO ALL EMPLOYEES IN THE SITUATIONS DESCRIBED.
PART I, LINE 4A	MARK FEDDERN AND CHARLES BOLTE RECEIVED SEVERANCE FOLLOWING TERMINATION IN THE AMOUNTS OF \$46,354 AND \$74,652, RESPECTIVELY.

Additional Data

Software ID:
Software Version:
EIN: 54-1660459
Name: ALLIANCE DEFENDING FREEDOM

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ALAN SEARS PRESIDENT & CEO	(i)	387,142	0	2,456	24,000	7,650	421,248	0
	(ii)	0	0	0	0	0	0	0
1 BENJAMIN BULL CHIEF COUNSEL, EVP OF ADF PROGRAMS	(i)	292,034	0	3,625	24,000	7,650	327,309	0
	(ii)	0	0	0	0	0	0	0
2 MARK FEDDERN LEFT 2016 CFO & SECURITY DIRECTOR	(i)	177,918	0	47,085	18,000	7,356	250,359	0
	(ii)	0	0	0	0	0	0	0
3 WAYNE SWINDLER EVP OPERATIONS, CFO	(i)	224,988	0	895	24,000	7,250	257,133	0
	(ii)	0	0	0	0	0	0	0
4 GARY MCCALEB SR COUNSEL, VP OF ADVOCACY & RESEARC	(i)	224,898	0	1,385	24,000	7,560	257,843	0
	(ii)	0	0	0	0	0	0	0
5 JEFFERY VENTRELLA SR COUNSEL, SVP OF TRAINING	(i)	201,790	0	780	10,351	6,650	219,571	0
	(ii)	0	0	0	0	0	0	0
6 MARK CROZET SVP DEVELOPMENT	(i)	230,462	0	0	9,411	6,650	246,523	0
	(ii)	0	0	0	0	0	0	0
7 KRISTEN WAGGONER SR COUNSEL, SVP U S LEGAL ADV	(i)	203,267	0	0	18,000	6,110	227,377	0
	(ii)	0	0	0	0	0	0	0
8 GLEN LAVY CORPORATE COUNSEL	(i)	180,949	0	1,154	23,359	7,650	213,112	0
	(ii)	0	0	0	0	0	0	0
9 TIM CHANDLER SR CNSL SVP OF ALLIANCE ADV	(i)	174,302	0	134	7,104	6,570	188,110	0
	(ii)	0	0	0	0	0	0	0
10 CHARLES BOLTE LEFT 2016 CCO	(i)	120,317	0	76,874	18,000	7,650	222,841	0
	(ii)	0	0	0	0	0	0	0
11 DOUG NAPIER SVP OF ALLIANCE RELATIONS	(i)	207,650	0	433	14,890	6,650	229,623	0
	(ii)	0	0	0	0	0	0	0
12 JORDAN LORENCE SR COUNSEL	(i)	207,684	0	1,227	8,555	7,650	225,116	0
	(ii)	0	0	0	0	0	0	0
13 DAVID CORTMAN SR COUNSEL, VP U S LITIGATION	(i)	196,507	0	400	8,019	6,650	211,576	0
	(ii)	0	0	0	0	0	0	0
14 KEVIN THERIOT SR COUNSEL, VP CENTER FOR LIFE	(i)	193,435	0	389	15,656	5,110	214,590	0
	(ii)	0	0	0	0	0	0	0

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

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

Attach to Form 990 or Form 990-EZ.

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

2015

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Department of the Treasury Internal Revenue Service

Name of the organization ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

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

Table with 4 main columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

- 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

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

Table with 9 main columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization?, (e) Original principal amount, (f) Balance due, (g) In default?, (h) Approved by board or committee?, (i) Written agreement?

Part III Grants or Assistance Benefiting Interested Persons.

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

Table with 5 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) JANET BITZKO	FAMILY MEMBER OF THE CEO	79,331	EMPLOYMENT COMPENSATION		No
(2) REBECCA SEARS	FAMILY MEMBER OF THE CEO	59,608	EMPLOYMENT COMPENSATION		No
(3) LUCAS SWINDLER	FAMILY MEMBER OF THE CFO	15,229	EMPLOYMENT COMPENSATION		No

Part V Supplemental Information

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

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

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

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number
54-1660459

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	72	561,576	SALE PROCEEDS
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II Supplemental Information.

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

Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTORS

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

Supplemental Information to Form 990 or 990-EZ

2015

**Open to Public
Inspection**

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

▶ Attach to Form 990 or 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	UPON COMPLETION, THE ORGANIZATION'S FINANCE TEAM REVIEWS THE FORM 990 THROUGH THE FOLLOWING PROCESS 1) THE CFO AND CONTROLLER COMPARE THE FORM 990 TO THE ANNUAL CORPORATE AUDIT AND INTERNAL FINANCIAL REPORTS THE CEO THEN READS THE FORM 990 FOR CONTENT AND CLARITY 2) THE CFO ASSIGNS THE CONTROLLER AND HIS TEAM TO REVIEW CONTENT, CHECK MATH TOTALS, AND CHECK SPELLING 3) FOLLOWING THE ABOVE REVIEW THE FORM 990 IS DISTRIBUTED TO A CHIEF OF STAFF B CEO C CHAIRMAN OF THE FINANCE AND AUDIT COMMITTEE (FAC) - WHICH IS RESPONSIBLE FOR OVERSIGHT OF FINANCE, AUDIT, AND TAX MATTERS D THE CHAIR OF THE FAC ENSURES COMMITTEE MEMBERS REVIEW THE FORM 990 FOR MATERIAL EDITS AND COMPLIANCE E. UPON ACCEPTANCE, THE CHAIRMAN OF THE FAC INSTRUCTS THE CFO TO CIRCULATE THE FORM 990 TO THE FULL BOARD OF DIRECTORS 4) CHANGES AND CORRECTIONS FROM THE ABOVE ARE ADDRESSED AT EACH STEP 5) FOLLOWING THE ABOVE, THE CFO SIGNS AND INSTRUCTS THE FORM 990 TO BE FILED WITH THE IRS 6) UPON FILING WITH THE IRS, ADF'S FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION AND DISTRIBUTION TO STATE GOVERNING BODIES, FOUNDATIONS, AND OTHER REQUESTING ENTITIES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>THE CONFLICT OF INTEREST POLICY COVERS ANY DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST ANNUALLY, EACH COVERED PERSON IS REQUIRED TO ANNUALLY SIGN A STATEMENT AFFIRMING RECEIPT, UNDERSTANDING, COMPLIANCE AND REPORTING UNDER THE POLICY THE ORGANIZATION ALSO CONDUCTS PERIODIC REVIEWS TO ENSURE OPERATIONS ARE CONSISTENT WITH ITS CHARITABLE PURPOSES DIRECTORS SHALL REPORT POSSIBLE CONFLICTS OF INTEREST TO THE CHAIRMAN OF THE BOARD OF DIRECTORS PRIOR TO ANY ACTION ON THE TRANSACTION BY THE ORGANIZATION UPON REPORT OF A POSSIBLE CONFLICT, THE BOARD OF DIRECTORS SHALL CONDUCT AN INVESTIGATION AND DETERMINE WHETHER A CONFLICT OF INTEREST DOES EXIST AND WHETHER IT IS SUBSTANTIAL IF THE BOARD DETERMINES THAT A SUBSTANTIAL CONFLICT OF INTEREST EXISTS, THE INTERESTED INDIVIDUAL SHALL NOT VOTE ON THE TRANSACTION PRESENTING THE CONFLICT THE INTERESTED INDIVIDUAL MAY VOTE ONLY IF THE BOARD DETERMINES THAT NO CONFLICT EXISTS OR THE CONFLICT IS NOT SUBSTANTIAL NO INVESTIGATION OR DETERMINATION BY THE BOARD SHALL BE REQUIRED IF THE INTERESTED INDIVIDUAL VOLUNTARILY AGREES TO REFRAIN FROM VOTING ON THE TRANSACTION PRESENTING THE POTENTIAL CONFLICT OF INTEREST THE INTERESTED INDIVIDUAL MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS THE MINUTES OF THE GOVERNING BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS SHALL CONTAIN A THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE A FINANCIAL INTEREST IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT OF INTEREST WAS PRESENT, AND THE GOVERNING BOARD'S OR COMMITTEE'S DECISION AS TO WHETHER A CONFLICT OF INTEREST IN FACT EXISTED B THE NAMES OF THE PERSONS WHO WERE PRESENT FOR DISCUSSIONS AND VOTES RELATING TO THE TRANSACTION OR ARRANGEMENT, THE CONTENT OF THE DISCUSSION, INCLUDING ANY ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT, AND A RECORD OF ANY VOTES TAKEN IN CONNECTION WITH THE PROCEEDINGS</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	ALLIANCE DEFENDING FREEDOM MAINTAINS A COMPENSATION SYSTEM CEO COMPENSATION IS SET BY THE ORGANIZATION'S INDEPENDENT BOARD, AND THE CEO'S COMPENSATION IS IN ACCORDANCE WITH THE ADF COMPENSATION SYSTEM JOB DESCRIPTIONS ARE EVALUATED AGAINST INDEPENDENT MARKET SOURCES AND COMPENSATION DATA AS PROVIDED BY AN INDEPENDENT COMPENSATION CONSULTANT THE MANAGEMENT COMPENSATION COMMITTEE APPROVES POSITION GRADES AND PAY RANGES OF ALL OTHER POSITIONS THE ADF BOARD OF DIRECTORS SETS THE COMPENSATION FOR THE CEO THE PLANNING AND EVALUATION COMMITTEE OF THE BOARD ANNUALLY REVIEWS THE CEO'S PERFORMANCE, CONSULTS WITH THE CHIEF OF STAFF/CFO ABOUT HOW THEIR EVALUATION TRANSLATES TO AN ADJUSTMENT OF PAY WITHIN THE STRUCTURE OF THE ORGANIZATION'S COMPENSATION SYSTEM, AND THEN PRESENTS TO THE FULL BOARD THE PERFORMANCE EVALUATION AND RESULTING PAY INCREASE, IF ANY, FOR APPROVAL THIS ACTION IS RECORDED IN THE MINUTES OF THE BOARD'S EXECUTIVE SESSION MEETING, AND DOCUMENTATION OF ANY INCREASE IS APPROVED BY THE CHAIRMAN AND PLACED IN THE CEO'S PERSONNEL FILE THE PROCESS WAS LAST UNDERTAKEN FOR ALL POSITIONS IN 2016

Return Reference**Explanation**

FORM 990, PART VI,
SECTION C, LINE 19

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

Return Reference**Explanation**

FORM 990, PART XI, LINE 9

NET EQUITY ADJUSTMENT TO 15100 SOLAR INVESTMENT -34,495

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENDING FREEDOM

Employer identification number

54-1660459

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) 15100 LLC 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260 54-1660459	OWN REAL PROPERTY	AZ	249,020	12,097,825	ALLIANCE DEFENDING FREEDOM

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ADF FOUNDATION 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260 86-1158500	PUBLIC BENEFIT CORPORATION	AZ	501(C)(3)	LINE 7	ALLIANCE DEFENDING FREEDOM	Yes	

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) ADF RABBI TRUST 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260	RETIREMENT FUNDING	AZ	ALLIANCE DEFENDING FREEDOM	T		380,335	100 000 %	Yes	
(2) 15100 SOLAR LLC 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260	OWN AND OPERATE SOLAR ENERGY PROJECT	AZ	ALLIANCE DEFENDING FREEDOM	C	104,888	1,378,858	100 000 %	Yes	

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

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

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

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b	Yes	
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n	Yes	
1o	Yes	
1p		No
1q	Yes	
1r	Yes	
1s		No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ADF FOUNDATION	B	1,464,041	CASH TRANSFERRED
(2) ADF FOUNDATION	C	119,501	CASH TRANSFERRED
(3) ADF FOUNDATION	O	204,446	COMPENSATION PAID
(4) 15100 SOLAR LLC	Q	60,000	ADMIN FEE PAID

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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

Return Reference	Explanation
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