

Mission Statement
The Deutsch Institute
835 Jefferson Avenue
Scranton, PA 18510
(570)348-1968
Email: Deutsch@epix.net

The Deutsch Institute is dedicated to developing and expanding resources and opportunities in order to improve health and well-being for persons with special needs.

The Deutsch Institute makes use of existing resources and facilities as well as volunteer services to initiate pilot programs as well as cooperative community ventures with social service agencies.

The Deutsch Institute also provides the Verve Vertu Art Studio which serves the community through educational services varied classes.

The Deutsch Institute supports ODP's mission, vision, values and quality framework, and adapts the self-determination initiatives of PA.

Deutsch Institute
Luzerne County Programs

Verve Vertu: (100% Community Participation Supports)

Verve Vertu Art Studio provides individuals within the local community an opportunity to enhance and explore their artistic abilities through different mediums. The local artists are able to sell their art pieces, within the studio, at local fairs, fiestas and exhibits.

Celebration of the Arts Camp

A two-week long summer camp held at Misericordia University which individuals with disabilities are provided the opportunity to complete arts and crafts, swim, and participate in music activities.

How to Apply for Programs/Services

Individuals can apply for services by walking into the Verve Vertu Art Studio and speaking with the Arts Coordinator. The individual can then schedule a time for a tour and start the application/registration process. Services can be paid out of pocket. Services can also be funded through the county in which the individual is served. An individual with a disability who has a Supports Coordinator can request services to attend the Deutsch Institute offered programs. For any questions, please call the Deutsch Institute at (570)348-1968.

**Deutsch Institute Applied Research Center
Board of Directors 2017-2018**

| | | Term Limit | Term | Expires |
|---|------------|------------|------|---------|
| <u>SANDRA GALDIERI</u> 124 CONSTITUTION DRIVE MOSCOW, PA 18444 499-3400(CELL) | Chair | 3 yrs | 1 | 2019 |
| <u>ROSEANN NOVEMBRINO</u> 1701 WASHBURN STREET SCRANTON, PA 18504 348-4125 | Vice Chair | 3 yrs | 1 | 2019 |
| <u>MICHAEL KELLY</u> 120 SOUTH LAKEVIEW AVENUE SCRANTON, PA 18505 969-2188 969-2189F 575-0744(CELL) | Treasurer | 3 yrs | 1 | 2019 |
| <u>JAMES WASILEWSKI</u> 24 South Beech Rd. Plains, PA 18705 570-283-3456 | Secretary | 3 yrs | 1 | 2019 |

| | Term Limit | Term | Expires | | Term Limit | Term | Expires |
|---|------------|------|---------|--|------------|------|---------|
| <u>SR MARIAM PFEIFER, IHM</u> MARYWOOD UNIVERSITY BOX 820 SCRANTON, PA 18509 963-8598 | 1 yr | 2 | 2018 | <u>MARYCLAIRE BOYLAN</u> 10 HERMEL STREET SCOTT TOWNSHIP, PA 18447 587-1599 498-4853(CELL) | 2 yrs | 1 | 2018 |
| <u>AUGIE BARHIGHT</u> 168 JUBILEE ROAD COVINGTON TOWNSHIP, PA 18424 842-2162 499-7605(CELL) | 2 yrs | 1 | 2018 | <u>PEG BARHIGHT</u> 168 JUBILEE ROAD COVINGTON TOWNSHIP, PA 18424 842-2162 499-7605(CELL) | 1 yr | 2 | 2018 |
| <u>MARIA FOX</u> 922 STATE RTE 307 SPRINGBROOK TWP, PA 18444 842-9742 702-3000(CELL) | 3 yrs | 1 | 2019 | <u>MARY RINALDI</u> 715 TERRACE STREET DUNMORE, PA 18512 342-9811 570-498-8165 | 1 yr | 2 | 2018 |
| <u>JACK MARTIN</u> 8 STAFFORD AVENUE SCRANTON, PA 18505 570-961-7575 (CELL) | 3 yrs | 1 | 2019 | <u>BRIAN WILLIAMS</u> 426 Mulberry St. Apt.# 209 Scranton, PA 18503 677-7383(CELL) | 2 yrs | 1 | 2018 |
| <u>JOAN MURRAY ROBINSON</u> 325 BAILEY STREET SOUTH ABINGTON, PA 18411 586-6774 | 2 yrs | 1 | 2018 | <u>MARGE GEORGE</u> 114 HOMESTEAD STREET DUNMORE, PA 18512 343-3479 | 3 yrs | 1 | 2019 |
| <u>JOYCE TRESSLER</u> 100 STONERIDGE CIRCLE CLARKS SUMMIT, PA 18411 586-1788 | 1 yr | 2 | 2018 | <u>MARYOU GROGAN</u> 933 Grandview St Scranton, PA 18509 236-0629 | 1 yrs | 1 | 2019 |
| <u>BRENNNA KELLY</u> 1431 DEWBERRY DRIVE HAWLEY, PA 18428 226-3922 493-0225(CELL) | 3 yrs | 1 | 2019 | <u>OPEN</u> | 2 yrs | 1 | 2018 |

Deutsch Institute **By Laws**

Article I Name, Area Served, Office:

- a) The name of this organization shall be the Deutsch Institute.
- b) The area this organization serves is Northeastern Pennsylvania.
- c) The headquarters is located at 837 Jefferson Ave, Scranton PA. Additional offices are located at the Verve Vertu Studio, 24 Main St. Dallas, PA.

Article II Mission & Purpose:

Mission

The Deutsch Institute, a nonprofit organization, has been serving the Northeast Region of Pennsylvania since 1979. We are dedicated to developing and expanding the leisure and recreational interests for persons with disabilities and special needs. The Deutsch Institute makes use of existing resources and facilities as well as volunteer services to initiate pilot programs as well as cooperative community ventures with other social service agencies.

Purposes

This corporation shall have the purposes or powers as may be stated in its Articles of Incorporation, and such powers as are now or may be granted hereafter by the Non Profit Corporation Law of 1972 of the Commonwealth of Pennsylvania, or any successor legislation.

Article III Membership

- a) The members of this corporation shall be the persons who are the Directors of the Corporation. Any person ceasing to be a Director for any reason shall thereupon cease to be a member of this corporation.
- b) The qualifications and rights of members of this corporation are as follow: Members must be 18 years of age or older.
- c) There shall be no dues assessed to the members of the corporation.

Article IV Directors:

Definition of Board of Directors:

The Board of Directors is that group of persons vested with stewardship of the business and affairs of this corporation.

Qualification of Directors:

The qualifications for becoming and remaining a Director of this corporation are as follows:

- a) Directors must be residents of the United States
- b) Directors must be 18 years or older

Vacancies on the Board:

Any vacancy or appointment occurring in the Board of Directors would be filled by a majority vote of the remaining members of the Board of Directors. The new Director so appointed to fill the vacancy will serve for the unexpired term of his/her predecessor in office.

Article V - Definition of Executive Director:

- 1. The Executive Director of the Corporation shall be the Managing Director through a valid and current management agreement who will be responsible for the general management of the affairs of the Corporation and shall report directly to the Chair of the Board of Directors.
- 2. The Executive Director shall supervise and control the activities of the staff and the consultants employed to support the activities of the Corporation.
- 3. The Executive Director shall when requested, present a written annual report to the Board of Directors.

Article VI Officers:

The officers of this Corporation will consist of the following personnel:

- a) Chair
- b) Vice Chair
- c) Secretary
- d) Treasurer

Selection of Officers- All officers must be on the Board.

Structure of the Board:

The Board of Directors shall consist of not more than nineteen (19) persons who shall have terms as follows: of the members first appointed, the term of three years shall expire on the anniversary of their election, or until their successors are elected. The three-year terms of the members shall be staggered so that one-third of such members (or the nearest feasible percentage) shall expire each year. The terms of three years shall expire on the third anniversary of their election, or until their successors are elected and qualify.

Article VII Meetings:

Place of Members Meetings:

Meeting of members will be held at the registered office of this Corporation in the Commonwealth of Pennsylvania, or at such other places within the Commonwealth as may be selected by the Board of Directors.

Regular Board of Directors Meetings:

Regular meetings of the Board of Directors shall be normally held on the second Wednesday of August, November, February and May. Notice of these meetings shall be e-mailed/mailed to all members of the Board of Directors at least one week prior to the meeting. Matters other than those on the agenda may be considered at the meeting by agreement of a majority of a quorum.

Special Board of Directors Meetings:

Special meetings of the Board of Directors may be called by the Chair of the Board of Directors on his/her own motion or at the request of any three Directors on a five day notice to each Director personally or by mail, facsimile or telephone. Notice of a special meeting of the Board shall specify the date, place and hour of the meeting and its purpose.

Notice of Members Meetings:

E-mailed, written or printed notice, stating place, day and hour of the meeting and (in the case of a special meeting) the purpose or purposes for which the meeting is called, must be delivered not less than five (5) nor more than ten (30) days before the day of the member's meeting either personally, e-mailed or by first class mail, by or at the direction of the President, the Secretary, or the officers or other persons or members calling the meeting, to each member entitled to vote at such meeting. If mailed, the notice shall be deemed to be delivered when deposited in the United States Mail addressed to the member at his address as it appears on the records of the Corporation, with postage prepaid.

Voting Rights of Members:

Each member will be entitled to one vote on each matter submitted to a vote of members. A member may vote either in person or by proxy, executed in writing by the member. No proxy will be recognized as valid after eleven (11) months from the date of its execution, unless expressly provided otherwise in the proxy. A proxy can only be given to another member.

Quorum of Members:

The number or percentage of members represented in person or by proxy which constitute a quorum of members will be a majority of the membership. The vote of a majority of votes entitled to be cast by the members present or represented by proxy at a meeting at which a quorum is present is necessary for the adoption of any matter voted upon by the members, unless a greater percentage is required by the Non-Profit Corporation Law of 1972, the Articles of Incorporation of this Corporation, or any provisions of these By Laws.

Article VII Books and Records:

The Corporation shall keep an original or duplicate record of the proceedings of the Members and the Directors, the original or a copy of its Bylaws, including all amendments thereto to date, certified by the Secretary of the Corporation, and an original or a duplicate register of the Board, giving the names of the Directors, and showing their respective addresses and the date(s) of their election and of the expected expiration of the term. The Corporation shall also keep appropriate, complete and accurate books or records of account. The records provided for herein shall be kept at either the registered office of the Corporation in this Commonwealth, or at its principal place of business wherever situation.

Every Director shall, upon written demand under oath stating the purpose thereof, have a right to examine, in person or by agent or attorney, during the usual hours for business for any proper purpose, the membership register, books and records of account, and records of the proceedings of the Members and Directors, and to make copies of extracts therefrom. A proper purpose shall mean a purpose reasonably related to the interest of such person as a Director or Member of the Corporation. In every instance where an attorney or other agent shall be the person who seeks the right to inspection, the demand under oath shall be accompanied by a power of attorney or such other writing which authorizes the attorney or other agent to so act on behalf of the Director. The demand under oath shall be directed to the Corporation as its registered office in this Commonwealth or at its principal place of business wherever situated.

Article VIII Annual Report:

Treasurer shall prepare and the Chair shall verify annually the presentation to the Board, a report, showing in appropriate detail the following:

- a. The assets and liabilities, including the trust funds, of the Corporation as of the end of the fiscal year immediately preceding the date of the report.
- b. The principal changes in assets and liabilities including trust funds, during the year immediately preceding the date of the report.
- c. The revenue or receipts of the Corporation, both unrestricted and restricted to particular purposes, for the year immediately preceding the date of the report, including separate data with respect to each trust fund held by or for the Corporation.
- d. The expenses or disbursements of the Corporation, for both general and restricted purposes, during the year immediately preceding the date of the report, including separate data with respect to each trust fund held by or for the Corporation.
- e. The number of Directors of the Corporation as of the date of the report, together with a statement of increase or decrease in such number during the year immediately preceding the date of the report, and a statement of the place where the names and addresses of the current Directors may be found. This report shall be filed with the minutes of the meeting of the Board of Directors.

Article IX Notices:

Whenever written notice is required to be given to any person, it may be given to such person, either personally or by sending a copy thereof by first class mail or express mail, postage prepaid, or by telegram, telex or courier service, charges prepaid, by facsimile transmission, or by e-mail to his address appearing on the books of the Corporation, or, in the case of the Directors, supplied by him/her to the Corporation for the purpose of notice. If the notice is sent by mail or by telegraph or courier service, it shall be deemed to have been given to the person entitled thereto when deposited in the United States mail or with a telegraph office or courier service for delivery to that person or, in the case of telex, when dispatched for transmission to such person. A notice of meeting shall specify the place, day and hour of the meeting and any other information required by statute or these Bylaws. When a special meeting is adjourned it shall not be necessary to give any notice of the adjourned meeting or of the business to be transacted at an adjourned meeting, other than by announcement at the meeting which such adjournment is taken.

Whenever any written notice is required to be given under the provisions of the statute or the Articles or Bylaws of this Corporation, a waiver thereof in writing, signed by the person or persons entitled to such notice, whether before or after the time stated therein, shall be deemed equivalent to the giving of such notice. Except as otherwise required by statute, neither the business to be transacted at nor the purpose of a meeting need be specified in the waiver of notice of such meeting. In the case of a special meeting of Directors such waiver of notice shall specify the general nature of the business to be transacted. Attendance of a person at any meeting shall constitute a waiver of notice of such meeting, except where a person attends a meeting for the express purpose of objecting, at the beginning of the meeting, to the transaction of any business because the meeting was not lawfully called or convened.

Article X Misc. Provisions:

One or more persons may participate in a meeting of the Board by means of conference telephone or similar communications equipment by means of which all persons participating in the meeting can hear each other. Participation in a meeting pursuant to this section shall constitute presence in person at such meeting.

Article XI Indemnification:

1. Third Party Actions. The Corporation shall have power to indemnify any person who was or is a party or is threatened to be made a party to any threatened, pending or completed action or proceeding, whether civil, criminal, administrative or investigative (other than an action by or in the right of the Corporation), by reason of the fact that he/she is or was a representative of the Corporation, or is or was serving at the request of the Corporation as a representative of another domestic or foreign Corporation for profit or not-for-profit, partnership, joint venture, trust or other enterprise, against

expenses (including attorneys' fees), judgments, fines and amounts paid in settlement actually and reasonably incurred by him/her in connection with the action or proceedings if he/she acted in good faith and in a manner he/she reasonably believed to be in, or not opposed to, the best interests of the Corporation and, with respect to any criminal proceeding, had not reasonable cause to believe his/her conduct was unlawful. The termination of any action or proceeding by judgment, order, settlement or conviction or upon a pleas of nolo contendere or its equivalent shall not of itself create a presumption that the person did not act in good faith and in a manner that he/she reasonably believed to be in, or not opposed to, the best interests of the Corporation and, with respect to any criminal proceeding, had reasonable cause to believe that his/her conduct was unlawful.

2. **Derivative and Corporate Actions.** The Corporation shall have power to indemnify any person who was or is a party, or is threatened to be made a party, to any threatened, pending or completed action by or in the right of the Corporation to procure a judgment in its favor by reason of the fact that he/she is or was a representative of the Corporation or is or was serving at the request of the Corporation as a representative of another domestic or foreign corporation for profit or not-for-profit, partnership, joint venture, trust or other enterprise, against expenses (including attorneys' fees) actually and reasonably incurred by him/her in connection with the defense or settlement of the action if he/she acted in good faith and in a manner he/she reasonably believed to be in, or not opposed to, the best interests of the Corporation. Indemnification shall not be made under this section in respect of any claim, issue or matter as to which the person has been adjudged to be liable to the Corporation unless and only to the extent that the court of common pleas of the judicial district embracing the county in which the registered office of the Corporation is located or the court in which the action was brought determines upon application that, despite the adjudication of liability but in view of all the circumstances of the case, such person is fairly and reasonably entitled to indemnity for such expenses that the court of common pleas or other court shall deem proper.
3. **Mandatory Indemnification.** To the extent that a representative of the Corporation has been successful on the merits or otherwise in defense of any action or proceeding referred or relating to third-party actions or relating to derivative and corporation actions or in defense of any claim, issue or matter therein, such representative shall be indemnified against expenses (including attorney fees) actually and reasonably incurred in connection therewith.
4. **Procedure for Effecting Indemnification.** Any indemnification under actions (relating to third party actions, derivative and corporation actions) shall be made by the nonprofit Corporation only as authorized in the specific case upon a determination that indemnification of the representative is proper under the circumstances in meeting the applicable standard of conduct. The determination shall be made:
 - a. By the Board of Directors by a majority vote of a quorum consisting of Directors who were not parties to the action or proceeding;
 - b. if such a quorum is not obtainable or if obtainable and a majority vote of a quorum of disinterested Directors so directs, by independent legal counsel in a written opinion;
 - c. by such other body as may be provided in the Bylaws; or
 - d. by the Directors.
5. **Advancing Expenses.** Expenses (including attorneys' fees) incurred in defending any action or proceeding may be paid by the Corporation in advance of the final disposition of the action or proceeding upon receipt of an undertaking by or on behalf of the representative to repay the amount if it is ultimately determined not to be indemnifiable by the Corporation as authorized in this Article or otherwise.
6. **Supplementary Coverage.**

- a. General rule – The indemnification and advancement of expenses provided by or granted pursuant to the other sections of this Article shall not be deemed exclusive of any other rights to which a person seeking indemnification or advancement of expenses may be entitled under any Bylaw, agreement, vote of Members or disinterested Directors or otherwise, both as to action in his/her official capacity and as to action in another capacity while holding that office. Actions relating to interested Members, Directors or Officers; quorum shall be applicable to any Bylaw, contract or transaction authorized by the Directors under this section. A Corporation may create a fund of any nature, which may, but need not, be under the control of a trustee, or otherwise secure or insure in any manner its indemnification obligations, whether arising under or pursuant to this section or otherwise.
 - b. When indemnification is not to be made – Indemnification pursuant to subsection (a) shall not be made in any case where the act or failure to act giving rise to the claim for indemnification is determined by a court to have constituted willful misconduct or recklessness.
 - c. Grounds – Indemnification pursuant to subsection (a) under any Bylaw, agreement, vote of Directors or otherwise may be granted for any action taken or any failure to take any action and may be made whether or not the Corporation would have the power to indemnify the person under any other provision of law except as provided in this section and whether or not the indemnified liability arises or arose from any threatened, pending or completed action by or in the right of the Corporation. Such indemnification is declared to be consistent with the public policy of this Commonwealth.
 - d. Trust property – This Article shall not affect the liability of a representative with respect to the administration of assets held by the Corporation relating to authority to take and hold trust property.
7. Power to Purchase Insurance. The Corporation shall have power to purchase and maintain insurance on behalf of any person who is or was a representative of the Corporation or is or was serving at the request of the Corporation as a representative of another domestic or foreign corporation for profit or not-for-profit, partnership, joint venture, trust or other enterprise against any liability asserted against him/her and incurred by him/her in any such capacity, or arising out of his/her status as such, whether or not the Corporation would have the power to indemnify him/her against that liability under the provisions of this subchapter. Such insurance is declared to be consistent with the public policy of this Commonwealth.

Article XII Amendments:

Bylaws may be adopted, amended or repealed by the vote of two-thirds majority of the Board Members entitled to cast at least a simple majority of the votes which all Board Members present are entitled to cast thereon at any regular or special meeting duly convened after notice to the Board Members of that purpose.

The Deutsch Institute

Sean McHale, M.S.
Director of Special Initiatives
Managing Director
846 Jefferson Avenue
P.O. Box 1368
Scranton, PA 18501
Phone: (570)207-1540
Fax: (570)207-9194

| DEUTSCH INSTITUTE APPLIED RESEARCH CENTER | | | | |
|---|-------------|------------|----------------|-------------|
| STATEMENT OF REVENUES AND EXPENSES | | | | |
| FOR THE YEARS ENDED JUNE 30, 2016 AND 2017 AND PROPOSED YEAR ENDING JUNE 30, 2018 | | | | |
| | Audited | Budget | "Draft" Actual | Proposed |
| | 7/1/2015 to | Adopted | 7/1/2016 to | 7/1/2017 to |
| | 6/30/2016 | 6/30/2017 | 6/30/2017 | 6/30/2018 |
| REVENUES: | | | | |
| Verve Vertu Program Revenues | \$ 119,257 | \$ 140,000 | \$ 142,444 | \$ 190,000 |
| Lackawanna-Susquehanna Recreation | 119,016 | 121,300 | 117,477 | 117,000 |
| Consumer Funded Activities | 44,202 | 45,000 | 53,100 | 55,000 |
| Verve Vertu Private Pay Revenues | 31,159 | 30,000 | 3,591 | 3,500 |
| Vacation Club Net Proceeds | 3,013 | 3,014 | 959 | 1,000 |
| Clearbook | 16,630 | 16,000 | 7,593 | - |
| Celebration of the Arts Camp | 10,324 | 10,500 | 8,974 | 8,000 |
| Luzerne G&A | 150 | - | 1,379 | 1,400 |
| Wayne County Recreation | 7,448 | 7,500 | 7,270 | 7,200 |
| Keystone Community Resources | 6,675 | 7,000 | 1,500 | - |
| The Advocacy Alliance for Care Givers | - | 11,000 | - | - |
| Other Grants: | | | | |
| Scranton Area Foundation (Year 2) | 5,000 | - | - | - |
| Schwartz/Mack Veterans Administration | 2,000 | - | - | - |
| Wells Fargo Advisors | 1,000 | - | - | - |
| Maslow Grant | 10,000 | 20,000 | 15,000 | 15,000 |
| UNICO Grant | - | 2,000 | - | - |
| Blue Ribbon Foundation/ CDBG Grant | 226 | - | - | - |
| Fundraising Revenue: | | | | |
| DeutschFest | - | - | 1,336 | - |
| Celebrity Brunch | - | - | 18,280 | 18,000 |
| Donations | 3,815 | - | 2,399 | 2,000 |
| Deutsch Institute Foundation | 25,500 | - | - | - |
| VA Hospital | 750 | 2,400 | 1,100 | - |
| Interest Income | 4 | 4 | 4 | 5 |
| Total Revenues | 406,169 | 415,718 | 382,406 | 418,105 |
| EXPENSES: | | | | |
| Salaries | 205,270 | 164,300 | 154,082 | 151,500 |
| Celebration of the Arts Camp Expenses | - | - | 1,684 | 5,000 |
| Consumer Activity Expenses | 37,575 | 37,600 | 57,707 | 54,000 |
| Employee Benefits | 35,436 | 26,100 | 20,379 | 22,400 |
| Outside Professional Fees | 3,009 | 3,000 | 3,239 | 4,000 |
| Verve Vertu Art Expenses | 20,550 | 20,500 | 21,823 | 22,000 |
| Rent | 16,500 | 18,000 | 17,650 | 19,100 |
| Payroll Taxes | 17,750 | 16,900 | 17,161 | 15,700 |
| Accounting Fees | 20,850 | 7,000 | 7,000 | 7,200 |
| Depreciation | 780 | - | - | - |
| Management Fees | 18,340 | 55,000 | 55,020 | 55,000 |
| Insurances | 5,964 | 6,000 | 6,195 | 6,300 |
| Staff Travel | 9,072 | 8,700 | 5,375 | 5,800 |
| Telephone | 4,374 | 4,400 | 2,217 | 2,200 |
| Temporary Help | 5,584 | 5,600 | 1,840 | 3,500 |
| Utilities | 2,677 | 2,700 | 3,014 | 3,000 |
| Office Supplies | 2,869 | 2,900 | 5,562 | 5,500 |
| Postage | 2,333 | 2,100 | 3,027 | 3,000 |
| Payroll Processing Fees | 1,456 | 1,500 | 1,283 | 1,300 |
| Equipment Rental | 1,224 | 1,200 | 1,583 | 1,700 |
| Meals and Entertainment | 1,120 | 1,100 | 221 | 400 |
| Business Gifts | 961 | 1,000 | 1,313 | 1,400 |
| Bank Charges | 1,235 | 900 | 770 | 900 |
| Salaries - Blue Ribbon Foundation/CDBG | 600 | - | - | - |
| Dues and Subscriptions | 684 | 800 | 653 | 700 |
| Fundraising Expenses: | | | | |
| DeutschFest | - | - | 100 | - |
| Celebrity Brunch | 212 | 300 | 6,224 | 6,200 |
| Repairs and Maintenance | - | - | 476 | 500 |
| Board Expenses | 126 | 200 | 63 | 200 |
| Licenses and Fees | 100 | 100 | - | - |
| Contributions to Others | - | - | 775 | 800 |
| Conferences | 85 | 85 | 807 | 1,000 |
| Program Supplies (L-S and Wayne) | - | - | 104 | 500 |
| Payroll Taxes - Blue Ribbon Foundation | 72 | - | - | - |
| Total Expenses | 416,809 | 387,985 | 397,349 | 400,800 |
| Net Operating Revenues (Deficit) | (10,640) | 27,733 | (14,943) | 17,305 |
| Other Revenue: Deutsch Ins. Foundation Contributions; Net Assets Released from Restrictions | 107,012 | - | - | - |
| Beginning Operating Balance | 63,531 | 159,903 | 159,903 | 144,960 |
| Ending Operating Balance | \$ 159,903 | \$ 187,636 | \$ 144,960 | \$ 162,265 |
| Note: | | | | |
| In Fiscal Year 2015-2016, Deutsch Institute Applied Research Center received donations from the Deutsch Institute Foundation totaling \$25,500. | | | | |

**LUZERNE-WYOMING COUNTIES
MENTAL HEALTH/DEVELOPMENTAL SERVICES**

AMENDMENT NO. 2

CONTRACT NO. 2017-043

This is an amendment to Contract No. 2017-043 for services provided under the Luzerne-Wyoming Counties Mental Health/Developmental Services during the time period stated by:

DEUTSCH INSTITUTE

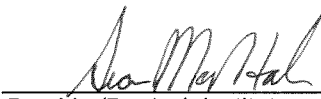
The purpose of this Amendment is to effect budgetary revisions which more realistically reflect actual Mental Health/Developmental Services costs for services provided hereunder.

Contract date extended effective 1/1/2017 to 12/31/2017

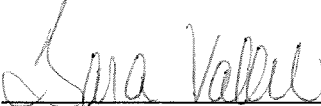
BUDGET REVISIONS

| <u>COST CENTER/SERVICES</u> | <u>Jan. 1 - June 30, 2017</u> | | <u>July 1 - Dec. 31, 2017</u> | | <u>Total</u> |
|--|-------------------------------|-----------------|-------------------------------|-----------------|-------------------------|
| | <u>From</u> | <u>To</u> | <u>From</u> | <u>To</u> | |
| <u>DS Community Based Services</u> Employment Srvs. - Educational | \$10,000 | \$10,000 | \$0 | \$10,000 | |
| Sub Totals: | <u>\$10,000</u> | <u>\$10,000</u> | <u>\$0</u> | <u>\$10,000</u> | |
| AMENDED CONTRACT TOTAL: | | | | | <u>\$ 20,000</u> |


All other budget levels for services not covered in this amendment shall remain as provided for on the main contract or prior agreement. All other terms and conditions remain as per contractual agreement. In witness thereof, the parties hereunto affix their signatures.



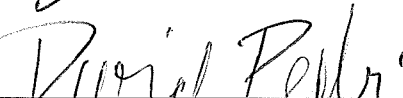
Provider/Deutsch Institute 6/7/17 Date



Deputy MH Administrator, Tara Vallet 6/20/17 Date



County Solicitor 6/30/17 Date



County Manager, C. David Pedri 6/30/17 Date

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION

FINANCIAL STATEMENTS

FOR THE YEARS ENDED JUNE 30, 2015 AND 2014

AND

INDEPENDENT AUDITORS' REPORT

AND

ADDITIONAL INFORMATION

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MURPHY, DOUGHERTY & COMPANY
Certified Public Accountants

1310 CHURCH STREET, SUITE 3000, ROUTE 690
MOSCOW, PA 18444

J. PAUL MURPHY, CPA
MICHAEL DOUGHERTY, CPA
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INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Deutsch Institute Adaptive Community Recreation

We have audited the accompanying financial statements of the Deutsch Institute Adaptive Community Recreation (the "Institute") (a nonprofit organization), which comprise the statements of financial position as of June 30, 2015 and 2014 and the related statements of activities, changes in net assets, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

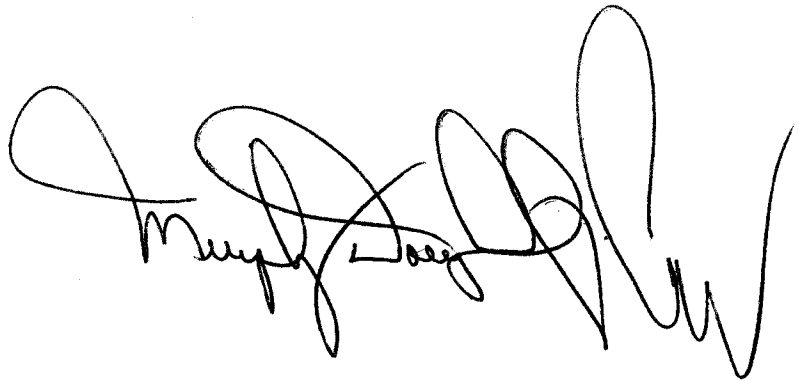
(DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION)
(INDEPENDENT AUDITOR'S REPORT-CONTINUED)

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Deutsch Institute Adaptive Community Recreation for the years ended June 30, 2015 and 2014, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary information contained on pages 10 and 11 is presented for the purpose of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements, or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

A large, stylized handwritten signature in black ink, likely belonging to the auditor, is positioned on the right side of the page. The signature is fluid and cursive, with a prominent loop at the end.

Moscow, Pennsylvania
February 15, 2016

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
STATEMENT OF FINANCIAL POSITION
JUNE 30, 2015 AND 2014

| | <u>2015</u> | <u>2014</u> |
|--|-----------------------|-----------------------|
| <u>ASSETS</u> | | |
| <u>CURRENT ASSETS</u> | | |
| Cash and cash equivalents | \$ 45,043 | \$ 27,358 |
| Accounts receivable | 41,944 | 24,635 |
| Prepaid expenses | <u>25,291</u> | <u>12,927</u> |
| Total Current Assets | <u>112,278</u> | <u>64,920</u> |
| <u>FIXED ASSETS</u> | | |
| Office furniture and fixtures | 15,785 | 15,785 |
| <u>LESS: Accumulated depreciation</u> | <u>(9,016)</u> | <u>(8,236)</u> |
| Net Fixed Assets | <u>6,769</u> | <u>7,549</u> |
| <u>OTHER ASSETS</u> | | |
| Interest in net assets of affiliate | <u>113,502</u> | <u>158,443</u> |
| TOTAL ASSETS | <u>\$ 232,549</u> | <u>\$ 230,912</u> |
| <u>LIABILITIES AND NET ASSETS</u> | | |
| <u>CURRENT LIABILITIES</u> | | |
| Due to Deutsch Institute Foundation | \$ 17,000 | \$ 17,000 |
| Accrued expenses and other current liabilities | <u>39,509</u> | <u>17,535</u> |
| Total Current Liabilities | <u>56,509</u> | <u>34,535</u> |
| <u>NET ASSETS</u> | | |
| Unrestricted | 62,538 | 37,934 |
| Temporarily restricted | <u>113,502</u> | <u>158,443</u> |
| Total Net Assets | <u>176,040</u> | <u>196,377</u> |
| TOTAL | <u>\$ 232,549</u> | <u>\$ 230,912</u> |

The accompanying notes are an integral part of these financial statements.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
STATEMENT OF ACTIVITIES
JUNE 30, 2015 AND 2014

| | <u>2015</u> | <u>2014</u> |
|--|------------------|------------------|
| <u>UNRESTRICTED SUPPORT AND REVENUES</u> | | |
| Grants | \$ 404,340 | \$ 228,307 |
| Special activities, contracts, and other revenues | 125,900 | 136,948 |
| Net assets released from restrictions for use in operations | 65,126 | 79,000 |
| Interest income | <u>5</u> | <u>1</u> |
| Total Support and Revenues | <u>595,371</u> | <u>444,256</u> |
| <u>EXPENSES</u> | | |
| Salaries | 218,221 | 194,775 |
| Program supplies and costs | 197,561 | 68,338 |
| Payroll taxes | 20,968 | 19,580 |
| Employee benefits | 34,460 | 29,072 |
| Rent | 20,500 | 19,325 |
| Professional services | 26,744 | 15,906 |
| Travel, lodging and conferences | 8,467 | 11,598 |
| Office supplies and postage | 9,569 | 14,339 |
| Telephone | 3,490 | 2,316 |
| Special activities | 22,713 | 35,075 |
| Depreciation | 780 | 481 |
| Insurance | 6,745 | 4,834 |
| Membership dues and publications | <u>549</u> | <u>270</u> |
| Total Expenses | <u>570,767</u> | <u>415,909</u> |
| <u>INCREASE (DECREASE) IN UNRESTRICTED</u> | | |
| NET ASSETS | <u>\$ 24,604</u> | <u>\$ 28,347</u> |

The accompanying notes are an integral part of these financial statements

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
STATEMENT OF CHANGES IN NET ASSETS
FOR THE YEARS ENDED JUNE 30, 2015 AND 2014

| | <u>UNRESTRICTED</u> | <u>TEMPORARILY RESTRICTED</u> | <u>TOTAL</u> |
|--|------------------------|-----------------------------------|-------------------------|
| NET ASSETS - JUNE 30, 2013 | <u>\$9,587</u> | <u>\$213,598</u> | <u>\$223,185</u> |
| Operating Income (LOSS) | 28,347 | -0- | 28,347 |
| Change in interest in net assets of affiliate | -0- | 23,845 | 23,845 |
| Net assets released from restrictions for use in operations | <u>-0-</u> | <u>(79,000)</u> | <u>(79,000)</u> |
| Change in Net Assets | <u>28,347</u> | <u>(55,155)</u> | <u>(26,808)</u> |
| NET ASSETS - JUNE 30, 2014 | <u>37,934</u> | <u>158,443</u> | <u>196,377</u> |
| Operating Income (LOSS) | 24,604 | | 24,604 |
| Change in interest in net assets of affiliate | -0- | 20,185 | 20,185 |
| Net assets released from restrictions for use in operations | <u>-0-</u> | <u>(65,126)</u> | <u>(65,126)</u> |
| Change in Net Assets | <u>24,604</u> | <u>(44,941)</u> | <u>(20,337)</u> |
| NET ASSETS - JUNE 30, 2015 | <u><u>\$62,538</u></u> | <u><u>\$113,502</u></u> | <u><u>\$176,040</u></u> |

The accompanying notes are an integral part of these financial statements.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
STATEMENT OF FINANCIAL POSITION
JUNE 30, 2015 AND 2014

| | <u>2015</u> | <u>2014</u> |
|--|------------------|------------------|
| <u>CASH FLOWS FROM OPERATING ACTIVITIES:</u> | | |
| Change in net assets | \$ (20,337) | \$ (26,808) |
| Adjustments to reconcile change in net assets to net cash used in operating activities: | | |
| Change in interest in net assets of affiliate | (20,185) | (23,845) |
| Depreciation | 780 | 481 |
| Changes in assets and liabilities: | | |
| (Increase) decrease in accounts receivable | (17,309) | 3,802 |
| (Increase) decrease in prepaid expenses | (12,364) | (7,920) |
| Increase (decrease) in accrued expenses and other current liabilities | <u>21,974</u> | <u>(23,261)</u> |
| Net Cash Used in Operating Activities | (47,441) | (77,551) |
| <u>CASH FLOWS FROM INVESTING ACTIVITIES:</u> | | |
| Capital fixed asset (purchases) disposals | <u>-</u> | <u>(8,030)</u> |
| Net Cash Provided (Used) by Investing Activities | <u>-</u> | <u>(8,030)</u> |
| <u>CASH FLOWS FROM FINANCING ACTIVITIES:</u> | | |
| Advances from the Deutsch Institute Foundation | 65,126 | 79,000 |
| Repayments to the Deutsch Institute Foundation | <u>-0-</u> | <u>-0-</u> |
| Net Cash Provided (Used) by Financing Activities | <u>65,126</u> | <u>79,000</u> |
| NET INCREASE (DECREASE) IN CASH | 17,685 | (6,581) |
| CASH, BEGINNING OF THE YEAR | <u>27,358</u> | <u>33,939</u> |
| CASH AT END OF YEAR | <u>\$ 45,043</u> | <u>\$ 27,358</u> |

The accompanying notes are an integral part of these financial statements.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
NOTES TO FINANCIAL STATEMENTS

NOTE 1 – NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations

Deutsch Institute Adaptive Community Recreation (the "Institute") is a not-for-profit corporation organized to provide recreational and community services to mentally and physically challenged individuals in Northeastern Pennsylvania. Revenues are generated primarily from local government agencies, all of which are located in Northeastern Pennsylvania.

Cash and Cash Equivalents

At June 30, 2015 and 2014, cash and cash equivalents consists of monies held in checking, and savings accounts

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles require management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual amounts could differ from those estimates.

Property and Equipment

Property and equipment are stated at cost. Depreciation is computed on the straight-line method based on the estimated economic lives of the assets.

Temporarily Restricted Net Assets

Temporarily restricted net assets include the Institute's interest in the unrestricted net assets of an affiliate. These net assets are temporarily restricted due to implied time restrictions.

Federal Income Taxes

The Institute is a not-for-profit corporation as described in Section 501(C) (3) of the Internal Revenue Code and is exempt from federal income taxes; however, the Institute must file an annual information return with the Internal Revenue Service.

Currently, the tax years open and subject to examination by the Internal Revenue Service are the 2012, 2013 and 2014 tax years. However, the Institute is not currently under audit nor has the Institute been contacted by any jurisdiction.

(NOTES TO FINANCIAL STATEMENTS – CONTINUED)

NOTE 2 – INTERRELATED ORGANIZATION

The Deutsch Institute Adaptive Community Recreation and the Deutsch Institute Foundation (the “Foundation”) are considered financially interrelated organizations which require the Institute to recognize its interest in the net assets of the Foundation. At June 30, 2015 and 2014 the net assets of the Foundation were \$113,502 and \$158,443.

NOTE 3 – ACCOUNTS RECEIVABLE

Accounts receivable consisted of the following at June 30:

| | <u>2015</u> | <u>2014</u> |
|--|------------------|------------------|
| Office of Community & Economic Development Grant | \$ - 0 - | 4,560 |
| Lackawanna-Susquehanna County Recreation Program | 21,728 | - 0 - |
| Luzerne Verve Vertu Program | 10,621 | 5,300 |
| Wayne County Recreation Program | - 0 - | 7,548 |
| Clearbrook | 1,636 | 1,567 |
| Celebration of the Arts | 7,584 | 4,640 |
| Other | <u>375</u> | <u>1,020</u> |
| TOTAL | <u>\$ 41,944</u> | <u>\$ 24,635</u> |

NOTE 4 – FUNCTIONAL ALLOCATION OF EXPENSES

The Institute provides recreational and community services to mentally and physically handicapped individuals. Expenses related to providing these services are as follows:

| | <u>2015</u> | <u>2014</u> |
|----------------------------|------------------|------------------|
| Program services | \$533,110 | \$380,508 |
| General and administrative | <u>37,657</u> | <u>35,401</u> |
| TOTAL | <u>\$560,767</u> | <u>\$415,909</u> |

NOTE 5 – CONCENTRATION OF CREDIT RISK

The Institute maintains its cash deposits in a financial institution located in Northeastern Pennsylvania. Deposits are insured by the Federal Deposit Insurance Corporation up to \$250,000.

(NOTES TO FINANCIAL STATEMENTS – CONTINUED)

NOTE 6 – COMMITMENTS

The Institute rents space for the Verve Vertu Art Center. The Verve Vertu moved in October 2013 to a new facility under an operating lease, with a term of three years. Rent expense for this lease was \$15,100 in 2015 and \$10,800 for 2014.

The Institute previously rented space for its main office under an operating lease that expired in September 2013. The rent expense was \$-0- in 2015 and \$1,675 in 2014 under this operating lease. In October 2013 the Institute moved its office to a new location that provides the Institute office space at no cost. The value of the contributed space is discussed further in Note 7.

At June 30, 2015, minimum rental payments due under the Verve Vertu facility lease are as follows:

Fiscal year ending June, 2015:

| | |
|------|-----------------|
| 2016 | \$15,300 |
| 2017 | <u>4,200</u> |
| | <u>\$19,500</u> |

NOTE 7 – CONTRIBUTIONS

Commencing October 2013, office space used by the Institute is provided at no charge by The Advocacy Alliance. The value of the space has been reflected in the accompanying financial statements at \$5,400 for 2015 and \$4,050 for 2014.

NOTE 8 – RELATED PARTY TRANSACTIONS

The Institute received contributions from Deutsch Institute Foundation (the "Foundation"), an independent not-for-profit foundation established to solicit and collect contributions for the benefit of the Institute. Contributions transferred from the Foundation were \$65,126 in 2015 and \$79,000 in 2014.

In addition, the Institute receives non-interest bearing advances from the Foundation. The Institute owed the Foundation \$17,000 at June 30, 2015 and \$17,000 at June 30, 2014.

NOTE 9 – RECONCILIATION TO TITLE 4300 REGULATIONS

The Institute's financial statements for the years ended June 30, 2015 and 2014 are prepared in accordance with accounting principles generally accepted in the United States of America. The Pennsylvania Department of Public Welfare, Title 4300 Regulations require supplemental schedules to be prepared in accordance with their guidelines and to provide a reconciliation from GAAP basis to Title 4300 presentation. During the years ended June 30, 2015 and 2014 there were no reconciling items between presentations.

NOTE 10 – SUBSEQUENT EVENTS

Management has evaluated subsequent events through February 15, 2015 the date that the financial statements were available to be issued. No significant subsequent events have been identified that would require adjustment of or disclosure in the accompanying financial statements.

ADDITIONAL INFORMATION

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
SCHEDULE OF SUPPORT, REVENUES, AND EXPENSES
FOR THE YEAR ENDED JUNE 30, 2015

| | LS VOCATIONAL & RECREATION | WAYNE RECREATION | LUZERNE VERVE VERTU ART CENTER | LUZERNE GENERAL | CDBG | OTHER | TOTAL |
|--|----------------------------------|---------------------|--------------------------------------|--------------------|-----------|-----------|------------|
| <u>SUPPORT AND REVENUES</u> | | | | | | | |
| Grants | \$ 115,915 | \$ 14,124 | \$ 90,545 | \$ 155,316 | \$ 15,440 | \$ 13,000 | \$ 404,340 |
| Special activities, contracts, and other revenues | 22,342 | 5,803 | 48,148 | 18,932 | 0 | 30,675 | 125,900 |
| Net assets released from restrictions, for use in operations | | | | | | 65,126 | 65,126 |
| Interest | | | | | | 5 | 5 |
| Total Support and Revenues | 138,257 | 19,927 | 138,693 | 174,248 | 15,440 | 108,806 | 595,371 |
| <u>EXPENSES</u> | | | | | | | |
| Salaries | 67,503 | 11,969 | 88,825 | 23,473 | 12,120 | 14,331 | 218,221 |
| Program supplies and costs | 24,681 | 10,364 | 31,197 | 130,562 | 0 | 757 | 197,561 |
| Payroll taxes and employee benefits | 17,157 | 3,042 | 22,575 | 5,966 | 2,777 | 3,911 | 55,428 |
| Rent | 3,108 | 551 | 15,100 | 1,081 | 0 | 660 | 20,500 |
| Professional services | 7,929 | 1,553 | 11,626 | 3,776 | 0 | 1,860 | 26,744 |
| Travel, lodging and conferences | 3,237 | 1,059 | 0 | 2,971 | 1,150 | 50 | 8,467 |
| Office supplies and postage | 3,382 | 547 | 4,841 | 1,473 | 0 | 655 | 10,898 |
| Telephone | 1,035 | 203 | 1,517 | 493 | 0 | 242 | 3,490 |
| Special activities | 0 | 0 | 0 | 0 | 0 | 22,713 | 22,713 |
| Insurance | 2,208 | 392 | 2,907 | 769 | 0 | 469 | 6,745 |
| Total Expense | 130,240 | 29,680 | 178,588 | 170,564 | 16,047 | 45,648 | 570,767 |
| OPERATING INCOME (LOSS) | \$ 8,017 | \$ (9,753) | \$ (39,895) | \$ 3,684 | \$ (607) | \$ 63,158 | \$ 24,604 |

The accompanying notes are an integral part of these financial statements

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
SCHEDULE OF SUPPORT, REVENUES, AND EXPENSES
FOR THE YEAR ENDED JUNE 30, 2014

| | LS | WAYNE | LUZERNE | | | | |
|--|-------------------------|------------|------------------------|----------|-----------|------------|--|
| | VOCATIONAL & RECREATION | RECREATION | VERVE VERTU ART CENTER | CDBG | OTHER | TOTAL | |
| <u>SUPPORT AND REVENUES</u> | | | | | | | |
| Grants | \$ 121,889 | \$ 25,349 | \$ 66,379 | \$ 4,559 | \$ 10,131 | \$ 228,307 | |
| Special activities, contracts, and other revenues | 16,930 | 10,853 | 28,695 | 0 | 80,470 | 136,948 | |
| Net assets released from restrictions, for use in operations | | | | | 79,000 | 79,000 | |
| Interest | | | | | 1 | 1 | |
| Total Support and Revenues | 138,819 | 36,202 | 95,074 | 4,559 | 169,602 | 444,256 | |
| <u>EXPENSES</u> | | | | | | | |
| Salaries | 62,474 | 14,661 | 75,627 | 3,463 | 38,551 | 194,776 | |
| Program supplies and costs | 20,831 | 13,056 | 23,416 | | 11,035 | 68,338 | |
| Payroll taxes and employee benefits | 15,639 | 3,670 | 18,930 | 763 | 9,650 | 48,652 | |
| Rent | 3,092 | 726 | 13,600 | | 1,907 | 19,325 | |
| Professional services | 4,833 | 1,134 | 6,957 | | 2,982 | 15,906 | |
| Travel, lodging and conferences | 2,208 | 1,431 | 288 | 333 | 7,338 | 11,598 | |
| Office supplies and postage | 4,506 | 1,034 | 6,832 | | 2,718 | 15,090 | |
| Telephone | 756 | 177 | 916 | | 467 | 2,316 | |
| Special activities | 0 | 0 | 0 | 0 | 35,075 | 35,075 | |
| Insurance | 1,579 | 370 | 1,911 | | 974 | 4,834 | |
| Total Expense | 115,918 | 36,259 | 148,477 | 4,559 | 110,697 | 415,910 | |
| OPERATING INCOME (LOSS) | \$ 22,901 | \$ (57) | \$ (53,403) | \$ - | \$ 58,905 | \$ 28,346 | |

The accompanying notes are an integral part of these financial statements

MURPHY, DOUGHERTY & COMPANY
Certified Public Accountants

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INDEPENDENT AUDITORS' REPORT ON COST ALLOCATION PLAN

To the Board of Directors
Deutsch Institute Adaptive Community Recreation

We have audited the accompanying financial statements of the Deutsch Institute Adaptive Community Recreation (the "Institute") (a nonprofit organization), which comprise the statements of financial position as of June 30, 2015 and 2014 and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements, and have issued our report thereon dated February 15, 2016. In connection with our audit, we have audited the method used by the Institute to allocate costs as required by the Commonwealth of Pennsylvania, Department of Public Welfare, Title 4300 Regulations.

Management's Responsibility for the Financial Statements

Management is responsible for the cost allocation plan in accordance with the Commonwealth of Pennsylvania, Department of Public Welfare, Title 4300 Regulations.

Auditor's Responsibility

Our responsibility is to express an opinion on the cost allocation plan based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the cost allocation plan and the equitable distribution of indirect costs. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall cost allocation plan.

(DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION)
(INDEPENDENT AUDITOR'S REPORT-CONTINUED)

The Commonwealth of Pennsylvania, Department of Public Welfare, Title 4300 Regulations state "The overall objective of the allocation process is to distribute the indirect costs of the agency to its various services or cost categories in reasonable proportion with the benefits provided to those services or cost categories". The Regulations require that the method used result in a fair and equitable distribution of costs, which shall be in direct relation to actual benefits accruing to the services to which costs are charged.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the cost allocation plan of the Institute presents fairly, in all material respects, an equitable distribution of costs for the years ended June 30, 2015 and 2014 as required by the Commonwealth of Pennsylvania, Department of Public Welfare, Title 4300 Regulations.

This report is intended for the information and use of the board of directors, management, and applicable grantors and is not intended to be and should not be used by anyone other than these specified parties.

Moscow, Pennsylvania
February 15, 2016

A large, stylized handwritten signature in black ink, likely belonging to the auditor, is positioned to the right of the date and location.

**DEUTSCH INSTITUTE ADAPTIVE
COMMUNITY RECREATION**

FINANCIAL STATEMENTS

FOR THE YEAR ENDED

JUNE 30, 2016

AND

INDEPENDENT AUDITORS' REPORT

AND

SUPPLEMENTARY INFORMATION

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION

SCRANTON, PENNSYLVANIA

JUNE 30, 2016

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* * * * *

PRINCIPALS

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Charles L. Snyder (1958-1980)

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Deutsch Institute Adaptive
Recreation Community
Scranton, Pennsylvania

We have audited the accompanying financial statements of Deutsch Institute Adaptive Recreation Community a nonprofit organization, which comprise the statement of financial position as of June 30, 2016, and the related statements of activities, changes in net assets and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.


An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes

evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Deutsch Institute Adaptive Community Recreation as of June 30, 2016, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.



Kingston, Pennsylvania
November 10, 2016

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
STATEMENT OF FINANCIAL POSITION
JUNE 30, 2016

ASSETS

| | |
|-----------------------------|-------------------|
| CURRENT ASSETS | |
| Cash and Cash Equivalents | \$ 147,852 |
| Accounts Receivable | 54,056 |
| Prepaid Expenses | <u>4,667</u> |
| TOTAL CURRENT ASSETS | 206,575 |
| FURNITURE AND FIXTURES, NET | <u>5,989</u> |
| TOTAL ASSETS | <u>\$ 212,564</u> |

LIABILITIES AND NET ASSETS

| | |
|----------------------------------|-------------------|
| CURRENT LIABILITIES | |
| Accounts Payable | \$ 21,698 |
| Vacation Club Payable | 18,609 |
| Accrued Expenses | 6,000 |
| Accrued Salaries | 5,868 |
| Accrued Payroll Taxes | <u>486</u> |
| TOTAL CURRENT LIABILITIES | <u>52,661</u> |
| NET ASSETS | |
| Unrestricted | - |
| Undesignated | 53,526 |
| Board Designated | <u>106,377</u> |
| TOTAL NET ASSETS | <u>159,903</u> |
| TOTAL LIABILITIES AND NET ASSETS | <u>\$ 212,564</u> |

See Notes to Financial Statements.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2016

UNRESTRICTED SUPPORT AND REVENUES

| | |
|---|------------|
| Grants | \$ 168,808 |
| Special Activities, Contracts and Other Revenue | 274,943 |
| Net Assets Released from Restrictions | 107,012 |
| Interest Income | <u>4</u> |

| | |
|---------------------------|----------------|
| TOTAL SUPPORT AND REVENUE | <u>550,767</u> |
|---------------------------|----------------|

EXPENSES

| | |
|---------------------------------|---------------|
| Salaries | 205,870 |
| Program Supplies and Costs | 20,536 |
| Payroll Taxes | 17,822 |
| Employee Benefits | 35,437 |
| Vacation Expense | 37,586 |
| Rent | 16,500 |
| Management Fees | 18,340 |
| Professional Services | 20,850 |
| Travel, Lodging and Conferences | 10,277 |
| Office Supplies and Expense | 21,800 |
| Telephone | 4,374 |
| Depreciation | 780 |
| Insurance | 5,964 |
| Dues and Publications | 684 |
| Consumer Activities | <u>37,575</u> |

| | |
|----------------|----------------|
| TOTAL EXPENSES | <u>454,395</u> |
|----------------|----------------|

| | |
|-------------------------|------------------|
| NET INCREASE (DECREASE) | <u>\$ 96,372</u> |
|-------------------------|------------------|

See Notes to Financial Statements.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
STATEMENT OF CHANGES IN NET ASSETS
FOR THE YEAR ENDED JUNE 30, 2016

| | <u>Unrestricted</u> | <u>Temporarily Restricted</u> | <u>Total</u> |
|--|---------------------|-----------------------------------|-------------------|
| NET ASSETS AT JUNE 30, 2015 | \$ 62,538 | \$ 113,502 | \$ 176,040 |
| Prior Period Adjustment: | | | |
| To adjust for differences in due to and due from the Deutsch Foundation in prior year | <u>993</u> | <u>(6,490)</u> | <u>(5,497)</u> |
| NET ASSETS AT JUNE 30, 2015 AS RESTATED | 63,531 | 107,012 | 170,543 |
| Increase (Decrease) in Net Assets from Operation | (10,640) | - | (10,640) |
| Net Assets Released from Restriction for use in Operations | <u>107,012</u> | <u>(107,012)</u> | <u>-</u> |
| NET ASSETS AT JUNE 30, 2016 | <u>\$ 159,903</u> | <u>\$ -</u> | <u>\$ 159,903</u> |

See Notes to Financial Statements.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2016

| | |
|--|-------------------|
| CASH FLOWS FROM OPERATING ACTIVITIES | |
| Change in Net Assets | \$ (10,640) |
| Adjustments Required to Adjust Net Income to Net | |
| Cash Provided by Operating Activities: | |
| Depreciation | 780 |
| Prior Period Adjustments | (5,497) |
| Change in Interest in Net Assets of Affiliate | 113,502 |
| Increase (Decrease) In: | |
| Accounts Receivable | (12,112) |
| Prepaid Expenses | 20,624 |
| Increase (Decrease) In: | |
| Accounts Payable | 21,698 |
| Accrued Expenses | <u>(8,546)</u> |
| NET CASH PROVIDED BY OPERATING ACTIVITIES | <u>119,809</u> |
| CASH FLOWS FROM FINANCING ACTIVITIES | |
| Reduction in Debt Owed Affiliate | <u>(17,000)</u> |
| NET CASH USED BY FINANCING ACTIVITIES | <u>(17,000)</u> |
| NET INCREASE IN CASH | 102,809 |
| CASH AT BEGINNING OF YEAR | <u>45,043</u> |
| CASH AT END OF YEAR | <u>\$ 147,852</u> |

The Institute had no investing or financing activities in the fiscal year ending June 30, 2016.

See Notes to Financial Statements.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
NOTES TO FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2016

1. NATURE OF OPERATION, ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Nature of Operations:

Deutsch Institute Adaptive Community Recreation (the Institute) is a not for profit corporation organized to provide recreational and community services to mentally and physically challenged individuals in Northeastern Pennsylvania. Revenues are generated primarily from local governmental agencies all of which are located in Northeastern Pennsylvania. The Institute also receives contributions from the general public.

B. Basis of Accounting:

The Institute's financial statements have been prepared on the accrual basis of accounting, and accordingly, reflect all significant receivables, payables and other liabilities. Expenditures for furniture, fixtures and improvements are capitalized in accordance with the entities policies and depreciated over the expected normal life of the asset acquired.

C. Basis of Presentation:

Financial statement presentation follows the requirements of FASB ASC Topic 958 Paragraph 205, "Not for Profit Entities Presentation of Financial Statements". The Institute is required to report information regarding its financial position and activities according to three classes of assets: unrestricted net assets, temporarily restricted net assets and permanently restricted net assets. There were no temporarily restricted or permanently restricted net assets as of June 30, 2016.

D. Accounting for Contributions:

All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts that are designated for future periods or are restricted by the donor for specific purposes are reported as temporarily restricted or permanently restricted support that increased those net asset classes. A donor restriction expires when stipulated time restriction ends, or when a purpose restriction is accomplished. Upon expiration, temporarily restricted net assets are reclassified to unrestricted net assets and are reported in the statement of activities as net assets released from restriction.

E. Use of Estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
NOTES TO FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2016

F. Tax Exempt Status:

The Institute has been recognized as an exempt from income tax under Section 501 (c)(3) of the Internal Revenue Code and similar state statutes. The Institute has unexamined open tax years for 2013, 2014 and 2015.

G. Cash and Cash Equivalents:

For purposes of cash flows, the Institute considers all unrestricted highly liquid investments with maturity dates of three months or less when purchased to be cash equivalents. The Institute invested its cash in a money market and interest bearing checking account at June 30, 2016. Interest rates are variable.

H. Accounts Receivable:

Accounts receivable are reported at net realizable value. These accounts receivable are not secured with any form of collateral. Accounts are written off when they are determined to be uncollectible based upon management's assessment of individual accounts. No allowance for doubtful accounts has been recorded as management has deemed all receivables to be collectible.

I. Furniture and Fixtures:

Furniture and fixtures are stated at cost and are depreciated over their estimated useful lives using the straight method.

2. RELATED PARTY TRANSACTIONS

The Institute and the Deutsch Institute Foundation (the Foundation) were considered financially interrelated organizations and had inter-organization balances due to and from each other. During the current year the Foundation was dissolved and its assets in the amount of \$107,012 were turned over to the Institute. Upon receipt of these funds the Institute offset the restricted balances that were on the books, and recognized "Assets Released from Restriction" in the amount of \$107,012.

3. CONCENTRATION OF CREDIT RISK

Financial instruments, which potentially subject the Institute to concentration of credit consist of cash and cash equivalents. These accounts are placed with credit worthy, high quality financial institutions. Cash balances were below the federally insured amount of \$250,000 throughout the year and at June 30, 2016.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
NOTES TO FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2016

4. NET ASSETS DESIGNATED

Board designated unrestricted net assets in the amount of \$106,377 have been designated by the board to be used only at their discretion for emergency funding needed for operations.

5. ACCOUNTS RECEIVABLE

Accounts receivable consisted of the following amounts owed to the Institute at June 30, 2016.

| | |
|--|------------------|
| Luzerne County | \$ 11,585 |
| Verve Vertu | 22,129 |
| Lackawanna and Susquehanna Recreational Programs | <u>20,342</u> |
| TOTAL | <u>\$ 54,056</u> |

6. FURNITURE AND FIXTURES

Furniture and fixtures and leasehold improvements consist of the following items:

| | |
|--------------------------------|-----------------|
| Equipment | \$ 1,836 |
| Furniture and Fixtures | 7,755 |
| Leasehold Improvements | <u>6,194</u> |
| TOTAL PROPERTY AND EQUIPMENT | 15,785 |
| Less: Accumulated Depreciation | <u>(9,796)</u> |
| FURNITURE AND FIXTURES, NET | <u>\$ 5,989</u> |

7. ACCOUNTS PAYABLE

Accounts payable in the amount of \$21,698 consist of amounts owed to trade creditors for goods or services.

8. VACATION CLUB PAYABLE

Vacation club payable in the amount of \$18,609 represents amounts owed to conduct the clients vacation program.

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
NOTES TO FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2016

9. ACCRUED EXPENSE

Accrued expenses consist of amounts owed for salaries and related payroll taxes and for services received for which an invoice has not been received at June 30, 2016.

10. RENTS

The Institute rents space in Dallas, Pennsylvania from which the Verte Vetu art instruction is conducted. During the year ended June 30, 2016 a total of \$16,500 in rent was paid in accordance with a lease entered into on August 5, 2013. The lease ends on October 1, 2016. The annual rental commitment on this lease is \$5,600. A new lease was entered into on August 1, 2016 and ends on July 31, 2020 with one four year renewal option. The minimum future lease commitment under the new lease is:

| | | |
|------------|----|---------------|
| 2017 | \$ | 16,500 |
| 2018 | | 19,100 |
| 2019 | | 20,300 |
| 2020 | | 21,500 |
| Thereafter | | <u>1,800</u> |
| TOTAL | \$ | <u>79,200</u> |

11. RECONCILIATION TO CHAPTER 4300 REGULATIONS

The Institute's financial statements for the year ended June 30, 2016 are prepared in accordance with accounting principles generally accepted in the United States of America. The Pennsylvania Department of Public Welfare, Chapter 4300 Regulations require supplemental schedules to be prepared in accordance with their guidelines and to provide a reconciliation GAAP Basis to Chapter 4300 Presentation. During the year ended June 30, 2016 there were no reconciling items between presentations.

12. SUBSEQUENT EVENTS

Management has evaluated subsequent events through November 9, 2016 the date the financial statements were available to be issued. No significant subsequent events have been identified that would require adjustment to or disclosure in the accompanying financial statements.

13. PRIOR PERIOD ADJUSTMENTS

A prior period adjustment in the amount of (\$5,497) was made to correct the net assets at June 30, 2015 because due to and due from balances between the Institute and the Deutsch Foundation did not agree.

PRINCIPALS

Stephen N. Clemente, CPA
James F. Clemente, CPA, MT
Raymond P. McGlynn, CPA
Raymond J. Distasio Jr., CPA
Francis A. Melliand, CPA
David P. Rudis, CPA, CVA, CFF
Joseph P. Zekas, CPA
John M. Nonnemacher, CPA

PROFESSIONAL STAFF

Martin T. Flaherty, Jr., CPA
JoAnn M. Ferentz, CPA
David J. Kuranovich, CPA
Margaret A. Humenansky, CPA
Michael A. Chisarick
Peter J. Morren
Helene M. Chuckra
Althea B. Edwards

Scott W. Poplawski
Michael J. Langdon
John P. Dean

Elmo M. Clemente (1958-Present)
Charles L. Snyder (1958-1980)

**INDEPENDENT AUDITORS' REPORT ON COST ALLOCATION
PLAN ASSOCIATED WITH THE SCHEDULE OF SUPPORT,
REVENUES, AND EXPENSES**

To the Board of Directors
Deutsch Institute Adaptive Community Recreation

We have audited the accompanying financial statements of the Deutsch Institute Adaptive Community Recreation (the "Institute") (a nonprofit organization), which comprise the statement of financial position as of June 30, 2016 and the related statement of activities and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated November 10, 2016. In connection with our audit, we have audited the method used by the Institute to allocate costs as required by the Commonwealth of Pennsylvania, Department of Public Welfare, Chapter 4300 Regulations.

Management's Responsibility for the Financial Statements

Management is responsible for the cost allocation plan in accordance with the Commonwealth of Pennsylvania, Department of Public Welfare, Chapter 4300 Regulations.

Auditors' Responsibility

Our responsibility is to express an opinion on the cost allocation plan based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the cost allocation plan and the equitable distribution of indirect costs. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall cost allocation plan.

The Commonwealth of Pennsylvania, Department of Public Welfare, Chapter 4300 Regulations state "The overall objective of the allocation process is to distribute the indirect costs of the agency to its various services or cost categories in reasonable proportion with the benefits provided to those services or cost categories". The Regulations require that the method used result in a fair and equitable distribution of costs, which shall be in direct relation to actual benefits accruing to the services to which costs are charged.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the cost allocation plan of the Institute presents fairly, in all material respects, an equitable distribution of costs for the year ended June 30, 2016 as required by the Commonwealth of Pennsylvania, Department of Public Welfare, Chapter 4300 Regulations.

This report is intended for the information and use of the Board of Directors, management, and applicable grantors and is not intended to be and should not be used by anyone other than these specified parties.

A handwritten signature in cursive script, reading "Snyder & Clemente".

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION
SCHEDULE OF SUPPORT, REVENUE, AND EXPENSE BY COST CENTERS
FOR THE YEAR ENDED JUNE 30, 2016

| | LS Recreation | Wayne Recreation | Verte Vertu Art Center | Luzerne General | Schwartz Mack VA | Blue Ribbon Foundation | Other | Total |
|--|------------------|---------------------|---------------------------|--------------------|---------------------|---------------------------|------------------|------------------|
| SUPPORT AND REVENUE | | | | | | | | |
| Grants | \$ 146,978 | \$ 19,604 | \$ - | \$ - | \$ 2,000 | \$ 226 | \$ - | \$ 168,808 |
| Special Activities, Contracts and Other Revenue | - | - | 162,961 | 39,351 | - | - | 72,631 | 274,943 |
| Net Assets Released from Restriction for Use in Operation | - | - | - | - | - | - | 107,012 | 107,012 |
| Interest | - | - | - | - | - | - | 4 | 4 |
| TOTAL SUPPORT AND REVENUE | 146,978 | 19,604 | 162,961 | 39,351 | 2,000 | 226 | 179,647 | 550,767 |
| EXPENSES | | | | | | | | |
| Salaries | 70,547 | 6,470 | 83,458 | 28,293 | - | 600 | 16,502 | 205,870 |
| Program Supplies and Costs | - | - | 20,536 | - | - | - | - | 20,536 |
| Payroll Taxes | 5,856 | 537 | 7,165 | 2,309 | - | 72 | 1,883 | 17,822 |
| Employee Benefits | 12,740 | 1,207 | 10,950 | 6,799 | - | - | 3,741 | 35,437 |
| Vacation Expense | - | - | - | - | - | - | 37,586 | 37,586 |
| Rent | - | - | 16,500 | - | - | - | - | 16,500 |
| Management Fees | - | - | - | - | - | - | 18,340 | 18,340 |
| Professional Services | - | - | - | - | - | - | 20,850 | 20,850 |
| Travel, Lodging and Conferences | 3,548 | 668 | 998 | 4,900 | - | - | 163 | 10,277 |
| Office Supplies and Expense | 685 | 38 | 6,948 | 2,316 | 200 | - | 11,620 | 21,800 |
| Telephone | - | - | 838 | - | - | - | 3,536 | 4,374 |
| Depreciation | - | - | 413 | - | - | - | 367 | 780 |
| Insurance | - | - | - | - | - | - | 5,964 | 5,964 |
| Dues and Publications | - | - | - | 250 | - | - | 434 | 684 |
| Consumer Activities | - | - | 45 | 1,575 | - | - | 486 | 37,575 |
| | 24,705 | 10,764 | | | | | | |
| TOTAL EXPENSES | 118,081 | 19,684 | 147,851 | 46,442 | 200 | 672 | 121,472 | 454,395 |
| NET OPERATING INCOME (LOSS) | \$ 28,897 | \$ (80) | \$ 15,110 | \$ (7,091) | \$ 1,800 | \$ (446) | \$ 58,175 | \$ 96,372 |

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2014**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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.

A For the 2014 calendar year, or tax year beginning 7/1/2014 and ending 6/30/2015

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

C Name of organization DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECR
Doing business as _____
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
837 JEFFERSON AVENUE
City or town State ZIP code
SCRANTON PA 18510
Foreign country name Foreign province/state/county Foreign postal code

D Employer identification number 23-2106611

E Telephone number (570) 848-1968

F Name and address of principal officer:
Karen Belli 835 Jefferson Ave., Scranton, PA 18510

G Gross receipts \$ 595,371

H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) If "No," are 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.deutschinstitute.org

K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶ Nonprofit organization of form 1979

M State of legal domicile: PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: To provide recreational and social services to mentally and physically handicapped individuals in NE Pennsylvania to help achieve social interaction between handicapped individuals

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 3) 21

4 Number of independent voting members of the governing body (Part VI, line 4) 21

5 Total number of individuals employed in calendar year 2014 (Part VIII, line 5) 12

6 Total number of volunteers (estimate if necessary) 0

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 |
|--|----------------|----------------|
| 8 Contributions and grants (Part VIII, line 1h) <u>356,996</u> | <u>356,996</u> | <u>544,454</u> |
| 9 Program service revenue (Part VIII, line 2g) <u>87,259</u> | <u>87,259</u> | <u>50,913</u> |
| 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) <u>1</u> | <u>1</u> | <u>4</u> |
| 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>0</u> | <u>0</u> | <u>0</u> |
| 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) <u>444,256</u> | <u>444,256</u> | <u>595,371</u> |
| 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) <u>0</u> | <u>0</u> | <u>0</u> |
| 14 Benefits paid to or for members (Part IX, column (A), line 4) <u>0</u> | <u>0</u> | <u>0</u> |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) <u>243,427</u> | <u>243,427</u> | <u>273,649</u> |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) <u>0</u> | <u>0</u> | <u>0</u> |
| 16b Total fundraising expenses (Part IX, column (D), line 25) <u>506</u> | <u>506</u> | <u>506</u> |
| 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) <u>172,482</u> | <u>172,482</u> | <u>297,118</u> |
| 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) <u>415,909</u> | <u>415,909</u> | <u>570,767</u> |
| 19 Revenue less expenses. Subtract line 18 from line 12 <u>28,347</u> | <u>28,347</u> | <u>24,604</u> |

| | Beginning of Current Year | End of Year |
|--|---------------------------|----------------|
| 20 Total assets (Part X, line 16) <u>72,469</u> | <u>72,469</u> | <u>119,047</u> |
| 21 Total liabilities (Part X, line 26) <u>34,535</u> | <u>34,535</u> | <u>56,509</u> |
| 22 Net assets or fund balances. Subtract line 21 from line 20 <u>37,934</u> | <u>37,934</u> | <u>62,538</u> |

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: Karen Belli Date: 2-16-

Type or print name and title: Karen Belli

Print/Type preparer's name: Michael Dougherty Preparer's signature: [Signature] Date: 2/15/2016 Check ☐ if self-employed PTIN: P01282735

Firm's name: Murphy, Dougherty & Company Firm's EIN: 23-2792213

Firm's address: 1310 Church Street, Moscow, PA 18444 Phone no.: (570) 848-2866

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

For Preparation Reduction Act Notice, see the separate instructions.

Form 990 (2014)

Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III. ☐

1 Briefly describe the organization's mission:
 To provide recreational and social services to mentally and physically handicapped individuals in NE Pennsylvania to help achieve social interaction between handicapped individuals

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

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

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

4a (Code:) (Expenses \$ 533,111 including grants of \$) (Revenue \$)
 Provides recreational and social services to mentally and physically handicapped individuals in NE Pennsylvania to help achieve social interaction between handicapped individuals

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

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

4d Other program services. (Describe in Schedule O.)
 (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses **533,111**

Part IV Checklist of Required Schedules

| | Yes | No |
|---|-----|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | X | |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | | X |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | | X |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | | X |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | | X |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | | X |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | | X |
| 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | | X |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | | X |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | X | |
| b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | | X |
| c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | | X |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | | X |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | X | |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | | X |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | | X |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | | |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | | X |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | | X |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | | X |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions). | | X |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | | X |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | | X |
| 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | | X |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |

Part IV Checklist of Required Schedules (continued)

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

Part V**Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V. ☐

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

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

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. 1a 21 | | |
| If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | |
| b Enter the number of voting members included in line 1a, above, who are independent. 1b 21 | | |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 | | X |
| 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 | | X |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 | | X |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 | | X |
| 6 Did the organization have members or stockholders? 6 | | X |
| 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a | | X |
| b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b | | X |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a The governing body? 8a | X | |
| b Each committee with authority to act on behalf of the governing body? 8b | X | |
| 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 | | X |

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed. ▶ PA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

JOHANNA BELT

570 348-1968

837 JEFFERSON AVENUE, SCRANTON, PA 18510

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII. ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below 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 | | | |
| (1) August Barhight Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (2) Peg Barhight Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (3) Mary Claire Boylan Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (4) Maria Fox Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (5) Marjorie George Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (6) Elaine Geroulo Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (7) Arnold Goldfuss Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (8) Michael Kelly Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (9) Sr. Mariam Pfeifer Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (10) Mary Rinaldi Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (11) Edwin Velez Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (12) Daniel Simrell Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (13) Angela Vauter Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (14) Brian Williams Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |

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 | | | |
| (15) Brenna M. Kelly Director | 2.00 0.00 | X | | | | | | | 0 | 0 |
| (16) Debra A. Kester Director | 2.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (17) William Gerrity President | 2.00 0.00 | | | X | | | | 0 | 0 | 0 |
| (18) James Keller VP | 2.00 0.00 | | | X | | | | 0 | 0 | 0 |
| (19) Roseann Novembrino VP | 2.00 0.00 | | | X | | | | 0 | 0 | 0 |
| (20) Patrick Albert Treasurer | 2.00 0.00 | | | X | | | | 0 | 0 | 0 |
| (21) James Wasilewski Secretary | 2.00 0.00 | | | X | | | | 0 | 0 | 0 |
| (22) Karen Belli Exec Director | 37.50 0.00 | | | | X | X | | 47,216 | 0 | 13,027 |
| (23) | | | | | | | | | | |
| (24) | | | | | | | | | | |
| (25) | | | | | | | | | | |
| 1b Sub-total | | | | | | | | 47,216 | 0 | 13,027 |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 0 | 0 | 0 |
| d Total (add lines 1b and 1c) | | | | | | | | 47,216 | 0 | 13,027 |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

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

| | Yes | No |
|---|-----|----|
| 3 | | X |
| 4 | | X |
| 5 | | X |

Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|----------------------------------|--------------------------------|---------------------|
| | | 0 |
| | | 0 |
| | | 0 |
| | | 0 |
| | | 0 |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

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

| | | | (A) 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 | 0 | | | |
| | b | Membership dues | 0 | | | |
| | c | Fundraising events | 0 | | | |
| | d | Related organizations | 65,126 | | | |
| | e | Government grants (contributions) | 460,428 | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 18,900 | | | |
| | g | Noncash contributions included in lines 1a-1f: \$ 5,400 | | | | |
| | h | Total. Add lines 1a-1f | 544,454 | | | |
| Program Service Revenue | Business Code | | | | | |
| | 2a | Special Activities | 50,913 | 50,913 | | |
| | b | | 0 | | | |
| | c | | 0 | | | |
| | d | | 0 | | | |
| | e | | 0 | | | |
| | f | All other program service revenue | 0 | | | |
| | g | Total. Add lines 2a-2f | 50,913 | | | |
| Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) | 4 | 4 | | |
| | 4 | Income from investment of tax-exempt bond proceeds | 0 | | | |
| | 5 | Royalties | 0 | | | |
| | | (i) Real (ii) Personal | | | | |
| | 6a | Gross rents | 0 | | | |
| | b | Less: rental expenses | 0 | | | |
| | c | Rental income or (loss) | 0 | | | |
| | d | Net rental income or (loss) | 0 | | | |
| | 7a | Gross amount from sales of assets other than inventory | 0 | | | |
| | | (i) Securities (ii) Other | | | | |
| | b | Less: cost or other basis and sales expenses | 0 | | | |
| | c | Gain or (loss) | 0 | | | |
| | d | Net gain or (loss) | 0 | | | |
| | 8a | Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18 | 0 | | | |
| | b | Less: direct expenses | 0 | | | |
| | c | Net income or (loss) from fundraising events | 0 | | | |
| | 9a | Gross income from gaming activities. See Part IV, line 19 | 0 | | | |
| | b | Less: direct expenses | 0 | | | |
| c | Net income or (loss) from gaming activities | 0 | | | | |
| 10a | Gross sales of inventory, less returns and allowances | 0 | | | | |
| b | Less: cost of goods sold | 0 | | | | |
| c | Net income or (loss) from sales of inventory | 0 | | | | |
| Miscellaneous Revenue | | Business Code | | | | |
| 11a | | | 0 | | | |
| b | | | 0 | | | |
| c | | | 0 | | | |
| d | All other revenue | | 0 | | | |
| e | Total. Add lines 11a-11d | | 0 | | | |
| 12 | Total revenue. See instructions | | 595,371 | 50,917 | 0 | 0 |

Part IX Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 | Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21 | 0 | | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | 0 | | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | 0 | | | |
| 4 | Benefits paid to or for members | 0 | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 46,916 | 42,222 | 4,692 | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0 | | | |
| 7 | Other salaries and wages | 171,305 | 154,175 | 17,130 | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 0 | | | |
| 9 | Other employee benefits | 34,460 | 31,014 | 3,446 | |
| 10 | Payroll taxes | 20,968 | 18,871 | 2,097 | |
| 11 | Fees for services (non-employees): | | | | |
| a | Management | 0 | | | |
| b | Legal | 0 | | | |
| c | Accounting | 16,288 | 14,655 | 1,628 | |
| d | Lobbying | 0 | | | |
| e | Professional fundraising services. See Part IV, line 17 | 0 | | | |
| f | Investment management fees | 0 | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) | 10,461 | 9,415 | 1,046 | |
| 12 | Advertising and promotion | 0 | | | |
| 13 | Office expenses | 10,118 | 8,600 | 1,012 | 506 |
| 14 | Information technology | 0 | | | |
| 15 | Royalties | 0 | | | |
| 16 | Occupancy | 20,500 | 18,450 | 2,050 | |
| 17 | Travel | 8,467 | 7,620 | 847 | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | | | |
| 19 | Conferences, conventions, and meetings | 0 | | | |
| 20 | Interest | 0 | | | |
| 21 | Payments to affiliates | 0 | | | |
| 22 | Depreciation, depletion, and amortization | 780 | 702 | 78 | 0 |
| 23 | Insurance | 6,745 | 6,071 | 674 | |
| 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 | Insurance | 0 | | | |
| b | Special Activity | 21,013 | 18,912 | 2,101 | |
| c | Program Supplies | 199,261 | 199,261 | | |
| d | Telephone | 3,490 | 3,141 | 349 | |
| e | All other expenses | 0 | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 570,767 | 533,111 | 37,150 | 506 |
| 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 type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X. ☐

| | | (A) Beginning of year | | (B) End of year |
|--|--|--------------------------|-----------|--------------------|
| Assets | 1 Cash—non-interest-bearing | 27,358 | 1 | 45,043 |
| | 2 Savings and temporary cash investments | | 2 | |
| | 3 Pledges and grants receivable, net | 0 | 3 | 0 |
| | 4 Accounts receivable, net | 24,635 | 4 | 41,944 |
| | 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 | 0 | 7 | 0 |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 12,927 | 9 | 25,291 |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 8,130 | | |
| | b Less: accumulated depreciation | 10b 1,201 | 10c 7,549 | 6,769 |
| | 11 Investments—publicly traded securities | 0 | 11 | 0 |
| | 12 Investments—other securities. See Part IV, line 11 | 0 | 12 | 0 |
| | 13 Investments—program-related. See Part IV, line 11 | 0 | 13 | 0 |
| | 14 Intangible assets | 0 | 14 | 0 |
| | 15 Other assets. See Part IV, line 11 | 0 | 15 | 0 |
| 16 Total assets. Add lines 1 through 15 (must equal line 26) | 72,469 | 16 | 119,047 | |
| Liabilities | 17 Accounts payable and accrued expenses | 17,535 | 17 | 39,509 |
| | 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 | 0 | 23 | 0 |
| | 24 Unsecured notes and loans payable to unrelated third parties | 0 | 24 | 0 |
| | 25 Other liabilities (including federal income tax payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | 17,000 | 25 | 17,000 |
| | 26 Total liabilities. Add lines 17 through 25 | 34,535 | 26 | 56,509 |
| 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 | 37,934 | 27 | 62,538 |
| | 28 Temporarily restricted net assets | | 28 | |
| | 29 Permanently restricted net assets | | 29 | |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | |
| | 30 Capital stock or trust principal, or current funds | | 30 | |
| | 31 Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| 33 Total net assets or fund balances | 37,934 | 33 | 62,538 | |
| 34 Total liabilities and net assets/fund balances | 72,469 | 34 | 119,047 | |

Part XI Reconciliation of Net AssetsCheck 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 | 595,371 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 570,767 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 24,604 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 37,934 |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 62,538 |

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII. ☐

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2014

**Open to Public
Inspection**

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION

Employer identification number

23-2106611

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations: 0
- g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions)) | (iv) Is the organization listed in your governing document? | | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|---|---|----|---|---|
| | | | Yes | No | | |
| (A) | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | 0 | 0 |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 225,869 | 212,955 | 235,424 | 255,946 | 460,428 | 1,390,622 |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0 |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0 |
| 4 Total. Add lines 1 through 3 | 225,869 | 212,955 | 235,424 | 255,946 | 460,428 | 1,390,622 |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). | | | | | | |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 1,390,622 |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
|---|----------|----------|----------|----------|----------|--------------------------|
| 7 Amounts from line 4 | 225,869 | 212,955 | 235,424 | 255,946 | 460,428 | 1,390,622 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 30 | 21 | 10 | 1 | 4 | 66 |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | 0 |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | 31,000 | 75,684 | 40,300 | 97,000 | 78,626 | 322,610 |
| 11 Total support. Add lines 7 through 10 | | | | | | 1,713,298 |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 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 | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|---|-------------------------------------|--------|
| 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) | 14 | 81.17% |
| 15 Public support percentage from 2014 Schedule A, Part II, line 14 | 15 | 81.38% |
| 16a 33 1/3% support test—2014. 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. The organization qualifies as a publicly supported organization | <input checked="" type="checkbox"/> | |
| b 33 1/3% support test—2013. 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. The organization qualifies as a publicly supported organization | <input type="checkbox"/> | |
| 17a 10%-facts-and-circumstances test—2014. 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. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | <input type="checkbox"/> | |
| b 10%-facts-and-circumstances test—2013. 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. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | <input type="checkbox"/> | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | <input type="checkbox"/> | |

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) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | 0 |
| 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 | | | | | | 0 |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | 0 |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0 |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0 |
| 6 Total. Add lines 1 through 5 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | 0 |
| 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 | | | | | | 0 |
| c Add lines 7a and 7b | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 Public support. (Subtract line 7c from line 6.) | | | | | | 0 |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | 0 |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | 0 |
| c Add lines 10a and 10b | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | 0 |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | 0 |
| 13 Total support. (Add lines 9, 10c, 11 and 12.) | 0 | 0 | 0 | 0 | 0 | 0 |
| 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 <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|--|-----------|-------|
| 15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) | 15 | 0.00% |
| 16 Public support percentage from 2013 Schedule A, Part III, line 15 | 16 | 0.00% |

Section D. Computation of Investment Income Percentage

| | | |
|---|-----------|-------|
| 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) | 17 | 0.00% |
| 18 Investment income percentage from 2013 Schedule A, Part III, line 17 | 18 | 0.00% |

19a 33 1/3% support tests—2014. 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—2013. 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

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

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

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b A family member of a person described in (a) above?
- c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in **Part VI**.

| | Yes | No |
|-----|-----|----|
| 11a | | |
| 11b | | |
| 11c | | |

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 | | (A) Prior Year | (B) Current Year (optional) |
|--|---|----------------|-----------------------------|
| 1 Net short-term capital gain | 1 | | |
| 2 Recoveries of prior-year distributions | 2 | | |
| 3 Other gross income (see instructions) | 3 | | |
| 4 Add lines 1 through 3 | 4 | 0 | 0 |
| 5 Depreciation and depletion | 5 | | |
| 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 Other expenses (see instructions) | 7 | | |
| 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | 0 | 0 |

| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|---|----|----------------|-----------------------------|
| 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| a Average monthly value of securities | 1a | | |
| b Average monthly cash balances | 1b | | |
| c Fair market value of other non-exempt-use assets | 1c | | |
| d Total (add lines 1a, 1b, and 1c) | 1d | 0 | 0 |
| e Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 2 Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 Subtract line 2 from line 1d | 3 | 0 | 0 |
| 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). | 4 | 0 | 0 |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | 0 | 0 |
| 6 Multiply line 5 by .035 | 6 | 0 | 0 |
| 7 Recoveries of prior-year distributions | 7 | 0 | 0 |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 | 0 | 0 |

| Section C - Distributable Amount | | Current Year |
|---|---|--------------|
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | 0 |
| 2 Enter 85% of line 1 | 2 | 0 |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | 0 |
| 4 Enter greater of line 2 or line 3 | 4 | 0 |
| 5 Income tax imposed in prior year | 5 | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | 0 |

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

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

| Section D - Distributions | | Current Year | |
|---------------------------|--|--------------|-------|
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | | |
| 4 | Amounts paid to acquire exempt-use assets | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | 0 |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. | | |
| 9 | Distributable amount for 2014 from Section C, line 6 | | 0 |
| 10 | Line 8 amount divided by Line 9 amount | | 0.000 |

| Section E - Distribution Allocations (see instructions) | | (i) Excess Distributions | (ii) Underdistributions Pre-2014 | (iii) Distributable Amount for 2014 |
|---|---|-----------------------------|--|---|
| 1 | Distributable amount for 2014 from Section C, line 6 | | | 0 |
| 2 | Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) | | | |
| 3 | Excess distributions carryover, if any, to 2014: | | | |
| a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | From 2013 | | | |
| f | Total of lines 3a through e | 0 | | |
| g | Applied to underdistributions of prior years | | 0 | |
| h | Applied to 2014 distributable amount | | | 0 |
| i | Carryover from 2009 not applied (see instructions) | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | 0 | | |
| 4 | Distributions for 2014 from Section D, line 7: \$ 0 | | | |
| a | Applied to underdistributions of prior years | | 0 | |
| b | Applied to 2014 distributable amount | | | 0 |
| c | Remainder. Subtract lines 4a and 4b from 4. | 0 | | |
| 5 | Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions). | | 0 | |
| 6 | Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions). | | | 0 |
| 7 | Excess distributions carryover to 2015. Add lines 3j and 4c. | 0 | | |
| 8 | Breakdown of line 7: | | | |
| a | | | | |
| b | | | | |
| c | | | | |
| d | Excess from 2013 | 0 | | |
| e | Excess from 2014 | 0 | | |

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" to 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.

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION

Employer identification number

23-2106611

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to 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" to Form 990, Part IV, line 6.

| | |
|--|--|
| 1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Preservation of a certified historic structure | |
| 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. | |
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |
| 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year | |
| 4 Number of states where property subject to conservation easement is located | |
| 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year | |
| 7 Amount of expenses incurred in monitoring, inspecting, 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)? | <input type="checkbox"/> Yes <input type="checkbox"/> 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" to 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 in 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 in 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 **d** ☐ Loan or exchange programs
b ☐ Scholarly research **e** ☐ Other _____
c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" to 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 | 0 |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | 0 |

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 | 0 | 0 | 0 | 0 | 0 |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 0 | 0 | 0 | 0 | 0 |

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

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

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

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

- (i) unrelated organizations
(ii) related organizations

| | Yes | No |
|---------------|-----|----|
| 3a(i) | | |
| 3a(ii) | | |
| 3b | | |

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" 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) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | 0 | 0 | | 0 |
| b Buildings | 0 | 0 | 0 | 0 |
| c Leasehold improvements | 0 | 6,194 | 619 | 5,575 |
| d Equipment | 0 | 1,836 | 642 | 1,194 |
| e Other | 0 | 0 | 0 | 0 |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) | | | | 6,769 |

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to 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 | 0 | |
| (2) Closely-held equity interests | 0 | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | 0 | |

Part VIII Investments—Program Related.

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

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|--|----------------|--|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ | 0 | |

Part IX Other Assets.

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

| (a) Description | (b) Book value |
|--|----------------|
| (1) | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ | 0 |

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 20.

| 1. (a) Description of liability | (b) Book value | |
|--|----------------|--|
| (1) Federal income taxes | 0 | |
| (2) Due to affiliated entity | 17,000 | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | 17,000 | |

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" to Form 990, Part IV, line 12a.

| | | | | |
|----------|--|-----------|-----------|---------|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 595,371 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | 0 |
| 3 | Subtract line 2e from line 1 | | 3 | 595,371 |
| 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 | | |
| c | Add lines 4a and 4b | | 4c | 0 |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | | 5 | 595,371 |

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

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

| | | | | |
|----------|---|-----------|-----------|---------|
| 1 | Total expenses and losses per audited financial statements | | 1 | 570,767 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | 0 |
| 3 | Subtract line 2e from line 1 | | 3 | 570,767 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | 0 |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | | 5 | 570,767 |

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.

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Part XIII

Supplemental Information *(continued)*

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Employer identification number

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION

23-2106611

Form 990, Part VI, Section B, Line 11b: The 990 is distributed to the Board for review and

approval.

Form 990, Part VI, Section B, Line 15a: The Board reviews and approves the Executive

Director's salary

Form 990, Part VI, Section C, Line 19: Financial statements are available to the public upon

written request

CLIENT COPY

Name of the organization

DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION

Employer identification number

23-2106611

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Short Form

Form **990-EZ**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150

2015Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.**A** For the 2015 calendar year, or tax year beginning **07/01/15**, and ending **06/30/16****B** Check if applicable:☐ Address change☐ Name change☐ Initial return☒ Final return/terminated☐ Amended return☐ Application pending**C** Name of organization**DEUTSCH INSTITUTE FOUNDATION**

Number and street (or P.O. box, if mail is not delivered to street address)

835 JEFFERSON AVE

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

SCRANTON**PA 18510****D** Employer identification number**23-2529779****E** Telephone number**570-348-1968****F** Group Exemption

Number ▶

G Accounting Method: ☐ Cash ☒ Accrual Other (specify) ▶**I** Website: ▶ **N/A****J** Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

▶ \$ **25,491****Part I** Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

☒

| | | | | |
|------------|--|--|--------|----------|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received | 1 | 1,270 |
| | 2 | Program service revenue including government fees and contracts | 2 | |
| | 3 | Membership dues and assessments | 3 | |
| | 4 | Investment income | 4 | 89 |
| | 5a | Gross amount from sale of assets other than inventory | 5a | |
| | b | Less: cost or other basis and sales expenses | 5b | |
| | c | Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) | 5c | |
| | 6 | Gaming and fundraising events | | |
| | a | Gross income from gaming (attach Schedule G if greater than \$15,000) | 6a | |
| | b | Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) | 6b | 24,132 |
| c | Less: direct expenses from gaming and fundraising events | 6c | 5,556 | |
| d | Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) | 6d | 18,576 | |
| 7a | Gross sales of inventory, less returns and allowances | 7a | | |
| b | Less: cost of goods sold | 7b | | |
| c | Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) | 7c | | |
| 8 | Other revenue (describe in Schedule O) | 8 | | |
| 9 | Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 | 9 | 19,935 | |
| Expenses | 10 | Grants and similar amounts paid (list in Schedule O) | 10 | 8,500 |
| | 11 | Benefits paid to or for members | 11 | |
| | 12 | Salaries, other compensation, and employee benefits | 12 | |
| | 13 | Professional fees and other payments to independent contractors | 13 | |
| | 14 | Occupancy, rent, utilities, and maintenance | 14 | |
| | 15 | Printing, publications, postage, and shipping | 15 | |
| | 16 | Other expenses (describe in Schedule O) | 16 | 1,560 |
| | 17 | Total expenses. Add lines 10 through 16 | 17 | 10,060 |
| Net Assets | 18 | Excess or (deficit) for the year (Subtract line 17 from line 9) | 18 | 9,875 |
| | 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | 19 | 113,502 |
| | 20 | Other changes in net assets or fund balances (explain in Schedule O) | 20 | -123,377 |
| | 21 | Net assets or fund balances at end of year. Combine lines 18 through 20 | 21 | 0 |

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2015)

Form 990-EZ (2015)

DEUTSCH INSTITUTE FOUNDATION**23-2529779**Page **2****Part II Balance Sheets** (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II ☒

| | (A) Beginning of year | (B) End of year |
|--|-----------------------|-----------------|
| 22 Cash, savings, and investments | 97,724 | 22 |
| 23 Land and buildings | 0 | 23 |
| 24 Other assets (describe in Schedule O) | 17,128 | 24 |
| 25 Total assets | 114,852 | 25 0 |
| 26 Total liabilities (describe in Schedule O) | 1,350 | 26 0 |
| 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) | 113,502 | 27 0 |

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☒

What is the organization's primary exempt purpose?

See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

| | | |
|---|--------------------------|-----------|
| 28 | | |
| (Grants \$) If this amount includes foreign grants, check here | <input type="checkbox"/> | 28a |
| 29 | | |
| (Grants \$) If this amount includes foreign grants, check here | <input type="checkbox"/> | 29a |
| 30 | | |
| (Grants \$) If this amount includes foreign grants, check here | <input type="checkbox"/> | 30a |
| 31 Other program services (describe in Schedule O) | | |
| (Grants \$ 8,500) If this amount includes foreign grants, check here | <input type="checkbox"/> | 31a 8,500 |
| 32 Total program service expenses (add lines 28a through 31a) | <input type="checkbox"/> | 32 8,500 |

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV ☐

| (a) Name and title | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|-------------------------------------|--|--|---|--|
| SANDRA GALDIERI CHAIR | 2.00 | 0 | 0 | 0 |
| ROSEANN NOVEMBRINO VICE CHAIR | 2.00 | 0 | 0 | 0 |
| MICHAEL KELLY TREASURER | 2.00 | 0 | 0 | 0 |
| JAMES WASILEWSKI SECRETARY | 2.00 | 0 | 0 | 0 |
| SR. MARIAM PFEIFER, IHM DIRECTOR | 2.00 | 0 | 0 | 0 |
| AUGIE BARHIGHT DIRECTOR | 2.00 | 0 | 0 | 0 |
| MARIA FOX DIRECTOR | 2.00 | 0 | 0 | 0 |
| JACK MARTIN DIRECTOR | 2.00 | 0 | 0 | 0 |
| JOAN MURRAY ROBINSON DIRECTOR | 2.00 | 0 | 0 | 0 |
| JOYCE TRESSLER DIRECTOR | 2.00 | 0 | 0 | 0 |
| BRENNA KELLY DIRECTOR | 2.00 | 0 | 0 | 0 |
| MARYCLAIRE BOYLAN DIRECTOR | 2.00 | 0 | 0 | 0 |

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

| | Yes | No |
|---|---------------------|----|
| 33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O | | X |
| 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) | | X |
| 35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? | | X |
| b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O | | |
| c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III | | X |
| 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N | X | |
| 37a Enter amount of political expenditures, direct or indirect, as described in the instructions | | |
| b Did the organization file Form 1120-POL for this year? | | X |
| 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? | | X |
| b If "Yes," complete Schedule L, Part II and enter the total amount involved | | |
| 39 Section 501(c)(7) organizations. Enter: | | |
| a Initiation fees and capital contributions included on line 9 | | |
| b Gross receipts, included on line 9, for public use of club facilities | | |
| 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955 | | |
| b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | | X |
| c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 | | |
| d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization | | |
| e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T | | X |
| 41 List the states with which a copy of this return is filed | None | |
| 42a The organization's books are in care of | DEUTSCH INSTITUTE | |
| | 837 JEFFERSON AVE | |
| Located at | SCRANTON PA ZIP + 4 | |
| | 18510 | |
| b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | X |
| If "Yes," enter the name of the foreign country: | | |
| See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | |
| c At any time during the calendar year, did the organization maintain an office outside the U.S.? | | X |
| If "Yes," enter the name of the foreign country: | | |
| 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year | | |
| | 43 | |
| 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ | | X |
| b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ | | X |
| c Did the organization receive any payments for indoor tanning services during the year? | | X |
| d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | | |
| 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) | | X |

Form 990-EZ (2015)

DEUTSCH INSTITUTE FOUNDATION

23-2529779

Page 4

- 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

| | Yes | No |
|----|-----|----|
| 46 | | X |

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

- 47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

| | Yes | No |
|-----|-----|----|
| 47 | | X |
| 48 | | X |
| 49a | | X |
| 49b | | |

- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

- 49a Did the organization make any transfers to an exempt non-charitable related organization?

- b If "Yes," was the related organization a section 527 organization?

- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

| (a) Name and title of each employee | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|-------------------------------------|--|---|---|--|
| None | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

- f Total number of other employees paid over \$100,000

- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

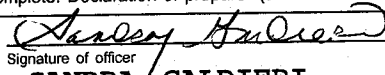
| (a) Name and business address of each independent contractor | (b) Type of service | (c) Compensation |
|--|---------------------|------------------|
| None | | |
| | | |
| | | |
| | | |
| | | |
| | | |

- d Total number of other independent contractors each receiving over \$100,000

- 52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

☒ Yes ☐ No

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  Date 2/15/17
Signature of officer
SANDRA GALDIERI CHAIR
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name Preparer's signature Date Check ☐ if self-employed PTIN
Firm's name This tax return prepared by a non-paid preparer.
Firm's address
Firm's EIN
Phone no.

May the IRS discuss this return with the preparer shown above? See instructions

☐ Yes ☐ No

Form 990-EZ (2015)

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

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.

OMB No. 1545-0047

2015Open to Public
Inspection**DEUTSCH INSTITUTE FOUNDATION**

Employer identification number

23-2529779**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

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

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

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above (see instructions)) | (iv) Is the organization listed in your governing document? | | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|--|-------------------|--|---|----|---|---|
| | | | Yes | No | | |
| (A) DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RESEARCH | 23-2106611 | 7 | X | | 131,877 | 0 |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | 131,877 | 0 |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) 2015 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | | | | | | |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public support. Subtract line 5 from line 4. | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) 2015 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 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 ► <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|---|----|---|
| 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) | 14 | % |
| 15 Public support percentage from 2014 Schedule A, Part II, line 14 | 15 | % |
| 16a 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. The organization qualifies as a publicly supported organization ► <input type="checkbox"/> | | |
| 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. The organization qualifies as a publicly supported organization ► <input type="checkbox"/> | | |
| 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. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/> | | |
| b 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. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/> | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/> | | |

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 ► <input type="checkbox"/> | | | | | | |

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 ► <input type="checkbox"/> | | |
| 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 ► <input type="checkbox"/> | | |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/> | | |

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b A family member of a person described in (a) above?
- c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in **Part VI**.

| | Yes | No |
|-----|-----|----|
| 11a | | X |
| 11b | | X |
| 11c | | X |

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

| | Yes | No |
|---|-----|----|
| 1 | X | |
| 2 | X | |
| 3 | | X |

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 | X | |
| 2b | | X |
| 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 | | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|--|----------------|-----------------------------|
| 1 | Net short-term capital gain | 1 | |
| 2 | Recoveries of prior-year distributions | 2 | |
| 3 | Other gross income (see instructions) | 3 | |
| 4 | Add lines 1 through 3 | 4 | |
| 5 | Depreciation and depletion | 5 | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | |
| 7 | Other expenses (see instructions) | 7 | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | |
| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI): | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). | 4 | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by .035 | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |
| Section C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 | Enter 85% of line 1 | 2 | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 | Enter greater of line 2 or line 3 | 4 | |
| 5 | Income tax imposed in prior year | 5 | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | |
| 7 | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions). | | |

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 | Excess from 2014 | | | |
| e | Excess 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.)

Part IV, Section E, Line 2a - Explanation of Supported Organizations
ORGANIZATION SOLICITS, RECEIVES AND DISTRIBUTES FUNDS TO SUPPORT THE
DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION FOR THE HANDICAPPED WHICH
AIDS THE MENTALLY AND PHYSICALLY HANDICAPPED.

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

2015Open to Public
Inspection

Name of the organization

DEUTSCH INSTITUTE FOUNDATION

Employer identification number

23-2529779**Part I****Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

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

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 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| Total | | | | | | |

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.

Schedule G (Form 990 or 990-EZ) 2015

DEUTSCH INSTITUTE FOUNDATION**23-2529779**Page **2**

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

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events |
|---|--|---------------|--------------|------------------|---------------------------------|
| | | BRUNCH | | None | (add col. (a) through col. (c)) |
| | | (event type) | (event type) | (total number) | |
| Revenue | 1 Gross receipts | 16,491 | | | 16,491 |
| | 2 Less: Contributions | | | | |
| | 3 Gross income (line 1 minus line 2) | 16,491 | | | 16,491 |
| Direct Expenses | 4 Cash prizes | | | | |
| | 5 Noncash prizes | | | | |
| | 6 Rent/facility costs | | | | |
| | 7 Food and beverages | | | | |
| | 8 Entertainment | | | | |
| | 9 Other direct expenses | 4,339 | | | 4,339 |
| | 10 Direct expense summary. Add lines 4 through 9 in column (d) | | | | 4,339 |
| 11 Net income summary. Subtract line 10 from line 3, column (d) | | | | 12,152 | |

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

Schedule G (Form 990 or 990-EZ) 2015

DEUTSCH INSTITUTE FOUNDATION

23-2529779

Page 3

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

Name ▶

Address ▶

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer
 ☐ Employee
 ☐ Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

23-2529779

DEUTSCH
INSTITUTE
FOUNDATION

Part I **Liquidation, Termination, or Dissolution.** Complete this part if the organization answered "Yes" on Form 990, Part IV, line 31, or Form 990-EZ, line 36. Part I can be duplicated if additional space is needed.

[illegible]

2 Did or will any officer, director, trustee, or key employee of the organization:

10. **Become a director or trustee of a successor or transferee organization?**

h. Become an employee of, or independent contractor for, a successor or transferee organization?

c. Become a direct or indirect owner of a successor or transferee organization?

d. Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?

If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III. ▶

| | Yes | No |
|----|-----|----|
| 2a | | X |
| 2b | | X |
| 2c | | X |
| 2d | | X |

Part I Liquidation, Termination, or Dissolution (continued)

Note. If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B), line 16 (Total assets), and line 26 (Total liabilities), should equal -0-.

- 3 Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III
- 4a Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?
- b If "Yes," did the organization provide such notice?
- 5 Did the organization discharge or pay all of its liabilities in accordance with state laws?
- 6a Did the organization have any tax-exempt bonds outstanding during the year?
- b If "Yes" to line 6a, did the organization discharge or defease all of its tax-exempt bond liabilities during the tax year in accordance with the Internal Revenue Code and state laws?
- c If "Yes" on line 6b, describe in Part III how the organization defeased or otherwise settled these liabilities. If "No" on line 6b, explain in Part III.

| | Yes | No |
|----|-----|----|
| 3 | X | |
| 4a | | X |
| 4b | | |
| 5 | X | |
| 6a | | X |
| 6b | | |

Part II Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered "Yes" on Form 990, Part IV, line 32, or Form 990-EZ, line 36. Part II can be duplicated if additional space is needed.

| 1 | (a) Description of asset(s) distributed or transaction expenses paid | (b) Date of distribution | (c) Fair market value of asset(s) distributed or amount of transaction expenses | (d) Method of determining FMV for asset(s) distributed or transaction expenses | (e) EIN of recipient | (f) Name and address of recipient | (g) IRC section of recipient(s) (if tax-exempt) or type of entity |
|---|--|--------------------------|---|--|----------------------|---|---|
| | TRANSFER OF ASSETS | 06/30/16 | 123,377 | BOOK VALUE | 23-2106611 | DEUTSCH INSTITUTE ADAPTIVE COMMUNIT 835 JEFFERSON AVE SCRANTON PA 18510 | 501(C)(3) |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

2 Did or will any officer, director, trustee, or key employee of the organization:

- a Become a director or trustee of a successor or transferee organization?
- b Become an employee of, or independent contractor for, a successor or transferee organization?
- c Become a direct or indirect owner of a successor or transferee organization?
- d Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?
- e If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III

| | Yes | No |
|----|-----|----|
| 2a | | X |
| 2b | | X |
| 2c | | X |
| 2d | | X |

Part III **Supplemental Information.** Provide the information required by Part I, lines 2e and 6c, and Part II, line 2e.
Also complete this part to provide any additional information.

Area with horizontal dotted lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZComplete 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.

OMB No. 1545-0047

2015Open to Public
Inspection

DEUTSCH INSTITUTE FOUNDATION

Employer identification number

23-2529779

Form 990-EZ, Part I, Line 10 - Grants/Similar Amts Paid to Organizations

| Name and Address | Class of Activity | Date of Gift | Desc. of Property | Cash Contrib. | Noncash Contrib. | Book Value | BV Expl. | FMV Expl. |
|--|-------------------|--------------|-------------------|---------------|------------------|------------|----------|-----------|
| DEUTSCH INSTITUTE ADAPTIVE COMMUNIT PROGRAMS | | | | | | | | |
| 835 JEFFERSON AVE | | | | | | | | |
| SCRANTON, PA 18510 | | | | | | | | |
| | | | | \$ | 8,500 | \$ | | 0 |
| | | | | \$ | 0 | | | |

Form 990-EZ, Part I, Line 16 - Other Expenses

| Description | Amount |
|---------------------------|-----------------|
| Expenses | |
| BANK FEES | \$ 10 |
| BUSINESS REGISTRATION FEE | \$ 100 |
| OFFICE EXPENSE | \$ 1,450 |
| Total | \$ 1,560 |

Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

| Description | Amount |
|--|-------------|
| Other Decreases | \$ -123,377 |
| DISSOLUTION OF DEUTSCH INSTITUTE FOUNDATION WITH ALL NET ASSETS BEING CONTRIBUTED TO THE DEUTSCH INSTITUTE ADAPTIVE COMMUNITY RECREATION WHICH AIDS THE MENTALLY AND PHYSICALLY HANDICAPPED. | |

Name of the organization

DEUTSCH INSTITUTE FOUNDATION

Employer identification number

23-2529779

Form 990-EZ, Part II, Line 24 - Other Assets

| Description | Beg. of Year | End of Year |
|---------------------|--------------|-------------|
| DUE FROM AFFILIATE | \$ 17,000 | \$ 0 |
| INTEREST RECEIVABLE | \$ 128 | \$ 0 |
| Total | \$ 17,128 | \$ 0 |

Form 990-EZ, Part II, Line 26 - Other Liabilities

| Description | Beg. of Year | End of Year |
|---------------------------------------|--------------|-------------|
| Accounts Payable and Accrued Expenses | \$ 1,350 | \$ 0 |

Form 990-EZ, Part III - Primary Exempt Purpose

SOLICIT, RECEIVE AND DISTRIBUTE FUNDS TO SUPPORT THE DEUTSCH INSTITUTE
ADAPTIVE COMMUNITY RECREATION FOR THE HANDICAPPED WHICH AIDS THE MENTALLY
AND PHYSICALLY HANDICAPPED.

Form 990-EZ, Part III, Line 31 - All Other Accomplishment

THE FOUNDATION SUPPORTS THE INSTITUTE PER THE FOUNDATION'S MISSION
STATEMENT

