

Return of Organization Exempt From Income Tax

2015

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.Open to Public
Inspection

A For the 2015 calendar year, or tax year beginning	October 1, 2015, and ending	September 30, 2016
B Check if applicable:	C Name of organization Ability Resources, Inc	
<input type="checkbox"/> Address change	D Employer identification number 73-1000572	
<input type="checkbox"/> Name change	E Telephone number 918-592-1235	
<input type="checkbox"/> Initial return	F City or town, state or province, country, and ZIP or foreign postal code Tulsa, OK 74120-4223	
<input type="checkbox"/> Final return/terminated	G Gross receipts \$ 1,570,048	
<input type="checkbox"/> Amended return	H(a) Is this a group return for subsidiaries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Application pending	H(b) Are all coordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a file. (See instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)(4) <input type="checkbox"/> 501(c)(5) <input type="checkbox"/> 4947(e)(1) or <input type="checkbox"/> 527	J Website ► www.AbilityResources.org	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation: 1976	M State of legal domicile: OK

Part I Summary

1 Briefly describe the organization's mission or most significant activities: To assist people with disabilities in attaining and maintaining their personal independence through advocacy, education and service		
2 Check this box ► [] if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3 Number of voting members of the governing body (Part VI, line 1a)	3	10
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	17
6 Total number of volunteers (estimate if necessary)	6	30
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0
		Prior Year Current Year
8 Contributions and grants (Part VIII, line 1h)	474,883	436,783
9 Program service revenue (Part VIII, line 2g)	1,049,994	1,129,910
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,793	3,355
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11a)		
12 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,528,671	1,570,048
		Prior Year Current Year
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14 Benefits paid to or for members (Part X, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	743,346	620,026
16a Professional fundraising fees (Part IX, column (A), line 11c)		
b Total fundraising expenses (Part IX, column (D), line 25) ►	20,923	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	753,720	863,478
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,497,066	1,483,506
19 Revenue less expenses. Subtract line 18 from line 12	31,605	86,542
		Beginning of Current Year End of Year
20 Total assets (Part X, line 16)	512,450	630,500
21 Total liabilities (Part X, line 26)	87,439	89,082
22 Net assets or fund balances. Subtract line 21 from line 20	455,011	541,568

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. The preparation (other than official) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer

Date

02.14.17

Type or print name and title

MATTHEW NEWMAN TREASURER

Paid
Preparer
Use Only

Print/type preparer's name

Preparer's signature

Date

Check [] if self-employed
PTIN

Firm's name ►

Firm's EIN ►

Firm's address ►

Phone no.

May the IRS distract this return with the preparer shown above? (see instructions)

[] Yes [] No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III

- 1** Briefly describe the organization's mission:

To assist people with disabilities in attaining and maintaining their personal independence through advocacy, education and service.

- 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 those 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 \$ 1,047,954 including grants of \$ _____) (Revenue \$ _____)

Case Management - We coordinate needed community-based services so that individuals who are nursing home level of care and Medicaid eligible can remain in their homes as opposed to nursing home.

4b (Code: _____) (Expenses \$ 266,786 including grants of \$ _____) (Revenue \$ _____)

Independent Living /services - Independent Living Services are those services that help individuals gain effective control and direction of their lives. Services include information and referral, counseling, individual aid systems advocacy, skills training and other assistance as donations of used durable medical equipment.

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

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

4e Total program service expenses ► 1,314,740

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.
- 2 Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?
- 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.
- 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.
- 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.
- 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.
- 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.
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.
- 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.
- 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.
- 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.
 - 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.
 - 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.
 - 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.
 - e Did the organization report an amount for other liabilities in Part X, line 26? If "Yes," complete Schedule D, Part 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.
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.
- 12b 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.
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.
- 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.
- 15 Did the organization report on Part IX, column (A), line 6, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.
- 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.
- 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).
- 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 7c and 8a? If "Yes," complete Schedule G, Part II.
- 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.

	Yes	No
1	✓	
2	✓	
3		✓
4		✓
5	N/A	
6		✓
7		✓
8		✓
9		✓
10		✓
11a	✓	
11b		✓
11c		✓
11d		✓
11e		✓
11f		✓
12a	✓	
12b		✓
13		✓
14a		✓
14b		✓
15		✓
16		✓
17		✓
18		✓
19		✓

Part IV Checklist of Required Schedules (continued)

- 20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- 21** Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.
- 22** Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.
- 23** Did the organization answer "Yes" to Part VII, Section A, line 5, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.
- 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?
- 25a** **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? If "Yes," complete Schedule L, Part I.
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.
- 26** Did the organization report any amount on Part X, line b, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II.
- 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? If "Yes," complete Schedule L, Part III.
- 28** Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.
- 29** Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.
- 30** Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.
- 31** Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.
- 32** Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.
- 33** Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.
- 34** Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.
- 35a** Did the organization have a controlled entity within the meaning of section 512(b)(13)?
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.
- 36** **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.
- 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? If "Yes," complete Schedule R, Part VI.
- 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.

	Yes	No
20a	✓	
20b	N/A	
21	✓	
22	✓	
23	✓	
24a	✓	
24b	✓	
24c	✓	
24d	✓	
25a	✓	
25b	✓	
26	✓	
27	✓	
28a	✓	
28b	✓	
28c	✓	
29	✓	
30	✓	
31	✓	
32	✓	
33	✓	
34	✓	
35a		
35b	✓	
36	✓	
37	✓	
38	✓	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V

- 1a** Enter the number reported in Box 3 of Form 1096. Enter -3- if not applicable **1a** 26 **1b** 0 **1c** v
- b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable **1b** 0 **1c** v
- c** Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? **1c** v
- 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 **2a** 17 **2b** v
- 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) **2b** v
- 3a** Did the organization have unrelated business gross income of \$1,000 or more during the year? **3a** v
- b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O **3b** N **A**
- 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)? **4a** v
- 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** v
- 5b** v
- 5c** N **A**
- 6a** Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? **6a** v
- b** If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **6b** N **A**
- 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? **7a** v
- b** If "Yes," did the organization notify the donor of the value of the goods or services provided? **7b** N **A**
- c** Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? **7c** v
- d** If "Yes," indicate the number of Forms 8282 filed during the year **7d** 1
- e** Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **7e** v
- f** Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7f** v
- g** If the organization received a contribution of qualified intellectual property, did the organization file Form 8839 as required? **7g** N **A**
- h** If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? **7h** N **A**
- 8 Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? **8** v
- 9 Sponsoring organizations maintaining donor advised funds.**
- a** Did the sponsoring organization make any taxable distributions under section 4966? **9a** v
- b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? **9b** v
- 10 Section 501(c)(7) organizations.** Enter:
- a** Initiation fees and capital contributions included on Part VIII, line 12 **10a** 1
- b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b** 1
- 11 Section 501(c)(12) organizations.** Enter:
- a** Gross income from members or shareholders **11a** 1
- b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b** 1
- 12a Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? **12a** N **A**
- b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b** 1
- 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? **13a** v
- 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 **13b** 1
- c** Enter the amount of reserves on hand **13c** 1
- 14a** Did the organization receive any payments for indoor tanning services during the tax year? **14a** v
- b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O **14b** N **A**

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

Section A. Governing Body and Management

- 1a Enter the number of voting members of the governing body at the end of the tax year.
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.
- 1b Enter the number of voting members included in line 1a, above, who are independent.
- 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?
- 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?
- 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
- 5 Did the organization become aware during the year of a significant diversion of the organization's assets?
- 6 Did the organization have members or stockholders?
- 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?
- b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?
- 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
 - a The governing body?
 - b Each committee with authority to act on behalf of the governing body?
- 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.

	1a	1b	Yes	No
2			✓	
3			✓	
4			✓	
5			✓	
6			✓	
7a			✓	
7b			✓	
8a			✓	
8b			✓	
9			✓	

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

- 10a Did the organization have local chapters, branches, or affiliates?
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?
- 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.
- 12a Did the organization have a written conflict of interest policy? If "No," go to line 13
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
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 Did the organization have a written whistleblower policy?
- 14 Did the organization have a written document retention and destruction policy?
- 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
 - b Other officers or key employees of the organization
 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?
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?

	Yes	No
10a	✓	
10b	N	A
11a	✓	
12a	✓	
12b	✓	
12c	✓	
13	✓	
14	✓	
15a	✓	
15b	✓	
16a	✓	
16b	N	A

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► Oklahoma
- 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: ► Carlotta Lawson, Ability Resources, Inc., 823 S. Detroit, Suite 110, Tulsa, OK 74120 (918)592-1235

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

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

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

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

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

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

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

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

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

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

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

(A) Name and Title	(B) Average Hours per Week (list any hours for related organizations using 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
		Officer or Director	Indepen- dent Trustee	Key Employee	Highly Compensated Employee	Other Employee	Honoraria and Consulting Fee			
(1) Carlotta Lawson Executive Director	45			✓				82,391	-0-	3,563
(2) Warren Smith Board President				✓				-0	-0-	-0-
(3) C. Hayden Ryan Board Secretary				✓				-0	-0-	-0-
(4) Mall Newman Board Treasurer				✓				0	-0-	-0-
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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
		Trustee or director	Officer	Key employee	Related organization	Executive compensation	Permitted activities			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										

1b Sub-total

c Total from continuation sheets to Part VII, Section A	►	82,391	3,563
d Total (add lines 1b and 1c)	►	82,391	3,563

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 ►

- 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		✓
4		✓
5		✓

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

- 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 ►

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related nr exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	78,593			
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	284,506			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	13,684			
	g Noncash contributions included in lines 1a-1f					
	h Total. Add lines 1a-1f ►		436,783			
Program Service Revenue		Business Code				
	2a Medicaid	900099	1,129,910			
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f ►		1,129,910			
	3 Investment income (including dividends, interest, and other similar amounts) ►					
	4 Income from investment of tax-exempt bond proceeds ►		3,355			
	5 Royalties ►					
		(i) Real	(ii) Personal			
	6a Gross rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ►					
	7a Gross amount from sales of assets other than inventory					
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss) ►					
Other Revenue						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 3c). See Part IV, line 18					
	b Less: direct expenses					
	c Net income or (loss) from fundraising events ►					
	9a Gross income from gaming activities. See Part IV, line 19					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities ►					
	10a Gross sales of inventory, less returns and allowances					
	b Less: cost of goods sold					
	c Net income or (loss) from sales of inventory ►					
	11a Miscellaneous Revenue	Business Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d ►					
12	Total revenue. See instructions. ►		1,570,048			

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 and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	82,391	64,265	15,654	2,472
7 Other salaries and wages	458,699	355,715	89,651	13,523
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	19,559	15,256	3,716	587
9 Other employee benefits	14,191	11,069	2,696	426
10 Payroll taxes	45,188	34,901	8,952	1,335
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	737,921	736,297	1,624	
13 Office expenses	8,434	7,609	716	109
14 Information technology				
15 Royalties				
16 Occupancy	81,982	66,149	14,201	1,632
17 Travel	1,163	3,708	395	60
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,437	5,793	644	
23 Insurance				
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 Reasonable Accommodations	191	191		
b Telephone	5,495	4,777	684	90
c Publications & Periodicals	707	548	159	
d Consumer Assistance	70	70		
e All other expenses (e.g. Fundraising, Misc.)	9,592	8,592	311	587
25 Total functional expenses. Add lines 1 through 24e	1,483,506	1,314,740	147,843	20,923
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 □ 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	145,282	1 200,639	
	2 Savings and temporary cash investments	296,649	2 329,981	
	3 Pledges and grants receivable, net	3		
	4 Accounts receivable, net	80,255	4 92,007	
	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 4966(c)(3)(B), and contributing employers and sponsoring organizations of section 501(j)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	151	6 364	
	7 Notes and loans receivable, net	7		
	8 Inventories for sale or use	8		
	9 Prepaid expenses and deferred charges	9,703	9 3,636	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 132,195		
	b Less: accumulated depreciation	10b 128,222	10c 3,973	
	11 Investments—publicly traded securities	11		
	12 Investments—other securities. See Part IV, line 11	12		
	13 Investments—program-related. See Part IV, line 11	13		
	14 Intangible assets	14		
	15 Other assets. See Part IV, line 14	15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	542,450	16 630,600		
Liabilities	17 Accounts payable and accrued expenses	87,439	17 89,032	
	18 Grants payable	18		
	19 Deferred revenue	19		
	20 Tax-exempt bond liabilities	20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	22		
	23 Secured mortgages and notes payable to unrelated third parties	23		
	24 Unsecured notes and loans payable to unrelated third parties	24		
	25 Other liabilities (including federal income tax payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	25		
	26 Total liabilities. Add lines 17 through 25	87,439	26 89,032	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	148,659	27 536,201	
	28 Temporarily restricted net assets	6,382	28 6,367	
	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	455,011	33 541,568	
	34 Total liabilities and net assets/fund balances	542,450	34 630,600	

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 VII, column (A), line 12)	<input type="checkbox"/>	1,570,648
2	Total expenses (must equal Part IX, column (A), line 25)	<input type="checkbox"/>	1,483,506
3	Revenue less expenses. Subtract line 2 from line 1	<input type="checkbox"/>	86,542
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<input type="checkbox"/>	456,011
5	Net unrealized gains (losses) on Investments	<input type="checkbox"/>	
6	Donated services and use of facilities	<input type="checkbox"/>	
7	Investment expenses	<input type="checkbox"/>	
8	Prior period adjustments	<input type="checkbox"/>	
9	Other changes in net assets or fund balances (explain in Schedule O)	<input type="checkbox"/>	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<input type="checkbox"/>	541,568

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
- 2b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
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	✓	
2b	✓	
2c	✓	
3a		✓
3b	N	A

SCHEDULE A
(Form 990 or 990-EZ)**Public Charity Status and Public Support**

OMB No. 1545-0047

2015**Open to Public
Inspection**Department of the Treasury
Internal Revenue ServiceComplete 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.

Name of the organization

Ability Resources, Inc.

Employer identification number

73-1000572

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, 1976. See **section 509(a)(2)**. (Complete Part II.)
- 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 _____
 - g Provide the following information about the supported organization(s). _____

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-8 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)
(A)			Yes	No	
(B)					
(C)					
(D)					
(E)					
Total					

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.")	1,260,009	1,296,118	1,324,408	1,524,877	1,566,693	6,972,105
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	1,260,009	1,296,118	1,324,408	1,524,877	1,566,693	6,972,105
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 1, column (f)						9,981
6 Public support. Subtract line 5 from line 4						6,962,124

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	1,260,009	1,296,118	1,324,408	1,524,877	1,566,693	6,972,105
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	14,183	4,776	2,752	3,794	3,355	28,860
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						7,000,965
12 Gross receipts from related activities, etc. (see instructions)					12	4,368,117
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	37 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	41 %
16a 33½% support test—2015. If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33½% support test—2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% 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 \$6,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
B 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 8, 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 B, 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 13c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part II, line 17	18	%
19a 33½% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33½%, and line 17 is not more than 33½%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33½% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½%, and line 18 is not more than 33½%, 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

- | | Yes | No |
|--|-----|-----|
| 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. | 1 | 2 |
| 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 | 3b |
| 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. | 4a | 4b |
| 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. | 4c | 5a |
| 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. | 5b | 5c |
| 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. | 6 | 7 |
| 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. | 8 | 9a |
| 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. | 9b | 9c |
| 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). | 10a | 10b |
| b Type I or Type II only. Was any added or substituted supported organization part of a case already designated in the organization's organizing document? | 5a | 5b |
| c Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | 6 |
| 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 | 8 |
| 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 590 or 590-EZ). | 9a | 9b |
| 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 590 or 590-EZ). | 9c | 10a |
| 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 . | 10b | 10b |
| 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 . | 10a | 10b |
| 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 . | 10b | 10b |
| 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. | 10b | 10b |
| b Did the organization have any excess business holdings in the tax year? (Use Schedule G, Form 4720, to determine whether the organization had excess business holdings.) | 10b | 10b |

Part IV Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- 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?
 - A family member of a person described in (a) above?
 - 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

- 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.
- 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

- 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

- 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 890 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?
- 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).
- 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

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

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 uses. 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 5	
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 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 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, 8a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section D, 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.)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No. 1545-0042

2015

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

► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.**Name of the organization**

Ability Resources, Inc.

Employer identification number

73-1000572

Organization type (check one):**Filers of:****Section:**

Form 990 or 990-EZ

 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See Instructions.**General Rule**

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33½% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part I, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part V, line 2, of its Form 990; or check the box on line 14 of its Form 990-EZ, or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Ability Resources, Inc.

Employer identification number

23-1000572

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	John Steel Zink Foundation 1259 East 25th Place Tulsa, OK 74142	\$ 30,000.00	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	Aline and Henry Zarrow Foundation 401 S. Boston Ave. Ste 900 Tulsa, OK 74103-4012	\$ 10,000.00	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization

Employer identification number

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			(e) Transfer of gift
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			(e) Transfer of gift
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			(e) Transfer of gift
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			(e) Transfer of gift
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule B (Form 990, 990-EZ, or 990-PF), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/form990.

Note. Terms in bold are defined in the Glossary of the Instructions for Form 990.

Purpose of Schedule

Schedule B (Form 990, 990-EZ, or 990-PF) is used to provide information on contributions the organization reported on:

- Form 990, Return of Organization Exempt from Income Tax, Part VIII, Statement of Revenue, line 1;
- Form 990-EZ, Short Form Return of Organization Exempt from Income Tax, Part I, line 1; or
- Form 990-PF, Return of Private Foundation, Part I, line 1.

Who Must File

Every organization must complete and attach Schedule B to its Form 990, 990-EZ, or 990-PF, unless it certifies that it does not meet the filing requirements of this schedule by taking the following action:

- Answering "No" on Form 990, Part IV, Checklist of Required Schedules, line 2, or
- Checking the box on
 - Form 990-EZ, line H; or
 - Form 990-PF, Part I, Analysis of Revenue and Expenses, line 2.

See the separate instructions for these lines on those forms.

If an organization is not required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Accounting Method

When completing Schedule B (Form 990, 990-EZ, or 990-PF), the organization must use the same accounting method it checked on Form 990, Part XII, Financial Statements and Reporting, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

Public Inspection

Note. Do not include social security numbers of contributors as this information may be made public.

- Schedule B is open to public inspection for an organization that files Form 990-PF
- Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ,
- For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors are not required to be made available for public inspection. All other information, including the amount of contributions, the description of **noncash contributions**, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it should not include its Schedule B (Form 990, 990-EZ, or 990-PF) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that do not require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the Instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

Contributors to be Listed on Part I

A contributor (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report **governmental units** as contributors.

Contributions

Contributions reportable on Schedule B (Form 990, 990-EZ, or 990-PF) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions do not include fees for the performance of services. See the Instructions for Form 990, Part VIII, line 1, for more detailed information on contributions.

General Rule

Unless the organization is covered by one of the *Special Rules* below, it must list in Part I every contributor who, during the year, gave the organization, directly or indirectly, money, securities, or any other type of property that total \$5,000 or more for the organization's tax year. In determining the total amount,

separate and independent gifts of less than \$1,000 can be disregarded.

Include each contribution included on Form 990, Part VIII, line 1, in calculating a contributor's total contributions and determining whether that contributor must be reported on Schedule B under this General Rule (or one of the following Special Rules, if applicable). For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property in Part VIII, line 1, it must include the value of that contribution in calculating whether the contributor meets the General Rule (or one of the Special Rules, if applicable), even if the organization did not receive the property during the tax year.

Special Rules

Section 501(c)(3) organizations that file Form 990 or 990-EZ. For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(f)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)) listed in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h(A), or Form 990-EZ, line 1. An organization that claims the benefit of this special rule must either (1) establish on Schedule A (Form 990 or 990-EZ), Part II, that it met the 33 1/3% support test for the current year or prior year; or (2) check the box on Schedule A (Form 990 or 990-EZ), Part I, line 7 or 8, and the box on Schedule A, Part II, line 13, as a section 170(b)(7)(A) organization in its first five years.

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during the tax year. Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that were not for an exclusively religious, charitable, etc., purpose, list in Part I each contributor who contributed \$6,000 or more during the tax year, as described under *General Rule*, earlier.

For contributions to a section 501(c)(7), (B), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

However, if a section 501(c)(7), (8), or (10) organization did not receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently was not required to complete Parts I through III with respect to these contributions, it need only check the third *Special Rules* box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

Specific Instructions



Do not attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II, and III of Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part (for example, Page 2 of 5, Part II).

Part I. In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number consecutively. In column (b), enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization does not know the donor's identity. In column (c), enter the amount of total contributions for the tax year for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a cash contribution came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution

includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an employee's cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "Noncash" box in column (d) for any contribution of property other than cash during the tax year, and complete Part II of this schedule. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property on Form 990, Part VIII, line 1g, it must check the "Noncash" box and complete Part II even if the organization did not receive the property during the tax year.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that are not reported on Form 8872, Political Organization Report of Contributions and Expenditures, do not need to be reported in Part I if the organization paid the amount specified by section 527(b)(1). In this case, enter "Pd. 527(b)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

Part II. In column (a), show the number that corresponds to the contributor's name in Part I. In column (b), describe the noncash contribution received by the organization during the tax year, regardless of the value of that noncash contribution. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, marked quotations for securities) by listing its **fair market value (FMV)**. If the organization immediately sells **securities** contributed to the organization (including through a broker or agent), the contribution still must be reported as a gift of property (rather than cash) in the amount of the net proceeds plus the broker's fees and expenses. See the Instructions for Form 990, Part VII, line 1g, which provide an example to illustrate this point. If the property is not immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and

asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When FMV cannot be readily determined, use an appraisal or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization, but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any **qualified conservation contributions** and contributions of **conservation easements** listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, Statement of Revenue.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 9283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

SCHEDULE C
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

2015**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

- Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5760 (elect or under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5760 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization _____ Employer identification number _____

AbilityResources, Inc. _____

73-1000572

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ► \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-. _____	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. _____
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____
(4)	_____	_____	_____	_____
(5)	_____	_____	_____	_____
(6)	_____	_____	_____	_____

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures <i>(The term "expenditures" means amounts paid or incurred.)</i>		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and 1d)		
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
If the amount on line 1e, column (a) or (b) is:		The lobbying nontaxable amount is:	
Not over \$500,000		20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000		\$176,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000		\$1,000,000.	
g	Grassroots nontaxable amount (enter 25% of line 1f)		
h	Subtract line 1g from line 1a. If zero or less, enter -0-		
i	Subtract line 1f from line 1e. If zero or less, enter -0-		
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting sector 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

4-Year Averaging Period Under section 501(h)

**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)**

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

- 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:
 - a Volunteers?
 - b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?
 - c Media advertisements?
 - d Mailings to members, legislators, or the public?
 - e Publications, or published or broadcast statements?
 - f Grants to other organizations for lobbying purposes?
 - g Direct contact with legislators, their staffs, government officials, or a legislative body?
 - h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?
 - i Other activities?
- 1 Total. Add lines 1c through 1i.
- 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?
 - b If "Yes," enter the amount of any tax incurred under section 4912
 - c If "Yes," enter the amount of any tax incurred by organization managers under section 4912
 - d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

		(a)	(b)
Yes	No	Amount	
			0
			0

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

- 1 Were substantially all (90% or more) dues received nondeductible by members?
- 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?
- 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?

	Yes	No
1		
2		
3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

- 1 Dues, assessments and similar amounts from members
- 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).
 - a Current year
 - b Carryover from last year
 - c Total
- 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?
- 5 Taxable amount of lobbying and political expenditures (see instructions)

1	
2a	
2b	
2c	
3	
4	
5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Part IV Supplemental Information (continued)

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

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

► Attach to Form 990.

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

OMB No. 1545-0841

2015**Open to Public
Inspection**

Name of the organization

Ability Resources, Inc.

Employer identification number

73-1000572

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

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

- | | (a) Donor advised funds | (b) Funds and other accounts |
|--|-------------------------|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate value of contributions to (during year) | | |
| 3 Aggregate value of grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? □ Yes □ 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? □ Yes □ No | | |

Part II Conservation Easements.

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

- | | Held at the End of the Tax Year |
|---|---------------------------------|
| 2a Total number of conservation easements | |
| 2b Total acreage restricted by conservation easements | |
| 2c Number of conservation easements on a certified historic structure included in (a) | |
| 2d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | |
- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of and for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \$
- 4 Number of states where property subject to conservation easement is located ► \$
- 5 Does the organization have a written policy regarding the periodic monitoring, inspecting, handling of violations, and enforcement of the conservation easements it holds? □ Yes □ No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(b)(4)(B)(ii)? □ Yes □ No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- i Revenue included on Form 990, Part VIII, line 1 ► \$
- ii Assets included in Form 990, Part X ► \$
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 ► \$
- b Assets included in Form 990, Part X ► \$

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

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

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|----|--------|
| 1c | <hr/> |
| 1d | <hr/> |
| 1e | <hr/> |
| 1f | <hr/> |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

1a	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
b Contributions	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
c Net investment earnings, gains, and losses	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
d Grants or scholarships	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
e Other expenditures for facilities and programs	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
f Administrative expenses	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
g End of year balance	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

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

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

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

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

- (i) unrelated organizations
 (ii) related organizations

Yes	No
3a(i)	<hr/>
3a(ii)	<hr/>
3b	<hr/>

- b If "Yes" on line 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" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

1a	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
b Buildings	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
c Leasehold improvements	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
d Equipment	<hr/>	<hr/>	<hr/>	132,195	128,322
e Other	<hr/>	<hr/>	<hr/>	<hr/>	3,973

Total. Add lines 1a through 5e. (Column (d) must equal Form 990, Part X, column (B), line 10a.) ►

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 1fb. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		

Total. (Column (b) must equal Form 990, Part X, col. (B), line 12.) ►

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Column (b) must equal Form 990, Part X, col. (B), line 12.) ►

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B), line 15.) ►

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Column (b) must equal Form 990, Part X, col. (B), line 25.) ►

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

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

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

1 Total revenue, gains, and other support per audited financial statements	1	1,570,048
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	1,570,048
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	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,570,048

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

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

1 Total expenses and losses per audited financial statements	1	1,483,506
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	1,483,506
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	1,483,506

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)

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue ServiceComplete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.**2015****Open to Public
Inspection**Name of the organization
Ability Resources, Inc.

► 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.

Employer identification number

73-1000572

Part V - 3a

We do not have unrelated business income of \$1,000 or more.

Part VI - Section B11b

Electronic copies of the Form 990 are sent to the Finance Committee for review and presented to the full Board of Directors at the next regularly scheduled board meeting.

Part VI - Section B12C

All board members, staff and volunteers are required to review and sign the conflict of interest policy on a fiscal year basis. All Board

Member conflicts of interest must be immediately disclosed to the Executive Committee of the Board of Directors who shall determine

whether a conflict of interest exists and, if so the Board shall vote to authorize or reject the transaction or take any other action deemed necessary to address the conflict and protect the best interests of Ability Resources.

Part VI - Section B15b

Executive Director has been employed by the agency over 29 years. The Executive Committee of the Board of Directors or Board President conducts an annual performance appraisal. Based on the result of that review, the Executive Committee decides whether to award an increase in salary and the percentage of the increase. The percentage is determined by percentage of increase awarded to other staff and the constraint of the budget. Board chair signs off on any salary increase.

Part VI - Section C19

Annual Reports appear on our website. Copies of By-Laws and other governing documents and policies are available on site or in writing or electronic format to anyone requesting this information.

Part IX - Line 11g

Other consists of: Consulting/Contract Services \$ 23,212

Independent Contractor Pay of \$ 714,699 for 26 Independent Contractors.

Part XI - Line 6

Other Changes in Net Assets of Fund Balance consists of Interest Income in Restricted Assets of \$ 15

Name of the organization:

Employer identification number

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule O (Form 990 or 990-EZ), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/form990.

Purpose of Schedule

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Do not use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization is not required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Specific Instructions

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return is not filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time. **Do not use** this schedule to provide the late-filing statement.

Amended return. If the organization checked the *Amended return* box on Form 990, *Heading*, item B, or Form 990-EZ, *Heading*, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a), but "No" to line H(b), use a separate

attachment to list the name, address, and EIN of each affiliated organization included in the group return. **Do not use** this schedule. See the Instructions for Form 990, *I. Group Return*.

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990:

1. *Part III, Statement of Program Service Accomplishments.*

- "Yes" response to line 2.
- "Yes" response to line 3.
- Other program services on line 4d.

2. *Part V, Statements Regarding Other IRS Filings and Tax Compliance.*

- "No" response to line 3b.
- "Yes" or "No" response to line 13a.
- "No" response to line 14b.

3. *Part VI, Governance, Management, and Disclosure.*

a. Material differences in voting rights among members of the governing body in line 1a.

b. Delegation of governing board's authority to executive committee in line 1a.

c. "Yes" responses to lines 2 through 7b.

d. "No" responses to lines 8a, 8b, and 10b.

e. "Yes" response to line 9.

f. Description of process for review of Form 990, if any, in response to line 11b.

g. "Yes" response to line 12c.

h. Description of process for determining compensation in response to lines 15a and 15b.

i. If applicable, in response to line 16, an explanation as to why the organization checked the "Other" box or did not make any of Forms 1128, 1024, 990, or 990-T publicly available.

j. Description of public disclosure of documents in response to line 19.

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

a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.

b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).

5. Explanation for Part IX, *Statement of Functional Expenses*, line 11g (other fees

for services), including the type and amount of each expense included in line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

6. Explanation for Part IX, *Statement of Functional Expenses*, line 24e (all other expenses), including the type and amount of each expense included in line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

7. *Part XI, Reconciliation of Net Assets.* Explain any other changes in net assets or fund balances reported on line 9.

8. *Part XII, Financial Statements and Reporting.*

a. Change in accounting method or description of other accounting method used on line 1.

b. Change in committee oversight review from prior year on line 2c.

c. "No" response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions:

1. *Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.*

a. Description of other revenue, in response to line 8.

b. List of grants and similar amounts paid, in response to line 10.

c. Description of other expenses, in response to line 16.

d. Explanation of other changes in net assets or fund balances, in response to line 20.

2. *Part II, Balance Sheets.*

a. Description of other assets, in response to line 24.

b. Description of total liabilities, in response to line 26.

3. Description of other program services in response to Part III, *Statement of Program Service Accomplishments*, line 31.

4. *Part V, Other Information.*

a. "Yes" response to line 33.

b. "Yes" response to line 34.

c. Explanation of why organization did not report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.

Other. Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Do not include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this schedule will be made available for public inspection.

73-1000672
10/01/2015 - 09/30/2016
Sorted: General - category

ABILITY RESOURCES, INC. [ABR100]
Depreciation Expense
Financial

10/01/2015 - 09/30/2016

GL Asset #	Description	Date in Service	Method	Life	Cost / Other Basis	Beg. Accum. Depreciation	Current Depreciation	Total Depreciation
Depreciated Assets								
AT DEMO EQUIP								
1071800	EMERSON TV/CRTR-A112	3/22/1992	SL	7.000	450.00	0.00	45.00	450.00
1071800	2. REMOTE CONTROLS	3/5/1993	SL	5.000	87.00	0.00	6.70	87.00
1071800	ARKENSTONE OPEN BOOK DELUXE AT-A112	5/24/1993	SL	7.000	5,750.00	0.00	575.00	5,750.00
1071800	DISPLAY RACK AT-A112	3/2/1994	SL	5.000	389.00	0.00	39.00	389.00
1071800	MATERIAL DISPLAY PACK AT221	3/16/1994	SL	5.000	386.00	0.00	38.60	386.00
1071800	APPRO OVER HEAD PROJECTOR AT311	6/22/1994	SL	5.000	434.00	0.20	42.40	434.00
Subtotal: AT DEMO EQUIP					7,529.00	7,529.00	0.00	7,529.00
Less dispositions and exchanges:								
Net for: AT DEMO EQUIP								
AT LOAN EQUIP								
1072600	REC'D ASSY/PLAYER	6/30/1993	SL	5.000	198.00	0.00	0.00	198.00
Subtotal: AT LOAN EQUIP					198.00	198.00	0.00	198.00
Less dispositions and exchanges:								
Net for: AT LOAN EQUIP								
Computer Equipment								
1070038	Netbook 1 @ Oese	9/29/2010	SL	5.000	416.07	416.07	0.20	416.07
1070038	Netbook 2 @ Oese	9/29/2010	SL	5.000	416.07	416.07	0.20	416.07
1070038	Netbook 3 & Case	9/29/2010	SL	5.000	416.07	416.07	0.20	416.07
1070030	Batchadbird Model#	9/29/2010	SL	6.000	108.51	108.51	0.00	108.51
1070030	File Server from PC Connection	8/21/2012	SL	5.000	86.20	532.92	172.34	725.76
1070030	Honeywell Port AC	5/1/2014	M	5.000	379.08	387.39	0.20	721.96
1070030	22" Dell Monitor	5/1/2014	M	5.000	325.54	168.29	62.50	210.25
1070030	3.0plex Mini Towers	5/1/2014	M	5.000	251.54	144.65	33.77	231.78
1070030	Sonic Wall Software	6/26/2014	M	5.000	280.97	160.76	65.68	238.46
Subtotal: Computer Equipment					4,975.34	3,323.94	701.69	4,023.63
Less dispositions and exchanges:								
Net for: Computer Equipment								
EQUIPMENT-DONATIONS								
1073610	MS Back Office SOFTWARE	1/1/2002	SL	7,300.00	1,409.40	1,409.40	0.00	1,409.40
1073610	RECEPTION DESK 123	5/30/2003	SL	5,300.00	796.32	728.00	0.00	798.00
Subtotal: EQUIPMENT-DONATIONS					2,207.00	2,207.00	0.06	2,207.00
Less dispositions and exchanges:								
Net for: EQUIPMENT-DONATIONS								
FEDERAL EQUIPMENT								
1070100	PROJECTION SCREEN 112"	9/29/1993	SL	2.000	80.00	80.00	0.00	80.00
1070100	RECEPTION DESK 123	3/30/1997	SL	10,000.00	787.84	235.89	0.00	787.84
1070100	HON SWIVEL CHAIR 127	9/30/1997	SL	10,000.00	151.35	151.35	0.00	235.84
Subtotal: FEDERAL EQUIPMENT								151.35

ABILITY RESOURCES, INC. [ABR0100]
Depreciation Expense
Financial

10/01/2015 - 08/31/2016

Gl. Asser	S	Description	Date In	Method	Life	Cost / Other Basis	Beg. Accum.	Depreciation	Current Depreciation	Total Depreciation
Depreciated Assets										
FEDERAL EQUIPMENT										
1070100		WORK STATION CHAIRS 2B	9/30/1997	SL	10,000C	20,40	2011-15	0.00	0.00	2011-15
1910100		TABLE MAKER ELEC 123	3/30/1997	SL	10,000C	250.14		0.00	0.00	250.14
1070000		DESK FOR GE-DN & CT	12/31/2013	SL	7,000C	4,725.54	3,652.78			3,937.28
Less dispositions and exchanges:										
Net for FEDERAL EQUIPMENT										
OFFICE EQUIPMENT										
1070000		00850 FORMS RACK 205	6/24/1993	SL	5,000	86.00		0.00	0.00	86.00
1070000		TWO RACK CASES 222	7/21/1990	SL	7,000	123.60	133.00			153.00
1070000		CHAMPION ACTING 236	12/42/1995	SL	5,000	84.00	64.00	0.20	0.20	844.00
1070100		INSTRUCTIONAL TAPE ON THE ADA	1/1/1992	SL	7,000C	21,110.00	21,110.00			21,110.00
1070000		LEGAL FILE CABINET 183	4/1/1992	SL	7,000C	140.00	140.00			140.00
1070000		LEGAL FILE CABINET 182	4/7/1992	SL	7,000C	140.00	140.00			140.00
1070000		LEGAL FILE CABINET 185	4/1/1992	SL	7,000C	140.00	140.00			140.00
1070000		4 DRAWER LEGAL FILE CABINET 216	3/8/1994	SL	5,000C	142.00	142.00			142.00
1070200		LATERAL FILE GENERAL CABINET 2-3	9/21/1995	SL	10,000C	258.00	258.00			344.00
1070000		STORAGE CABINET 740	12/10/1998	SL	5,000C	205.00	205.00			258.00
1070300		PENNSIEVATOR 248	10/1/1997	SL	5,000C	504.32	504.32			505.00
1070000		PENTIUM 1130 SERVER (2)	12/18/2000	SL	5,000C	2,988.20	2,988.20			584.32
1070000		NETWORK	1/3/2001	SL	5,000C	868.00	868.00			2,688.99
1070020		COMPUTER EQUIPMENT	1/18/2001	SL	5,000C	1,085.61	1,085.61			1,085.61
1070020		TRAVELMATE 343 LAPTOP	3/3/2001	SL	5,000C	978.85	978.85			978.85
1070000		DELL COMPUTER	1/11/2002	SL	5,000C	1,710.35	1,710.35			1,710.35
1070100		PROJECTOR	1/30/2000	SL	5,000C	16,076.09	16,076.09			18,076.09
1070000		GESTERMAYER DIGITAL 3245 COPIER	7/8/2004	SL	5,000C	1,058.89	1,058.89			1,058.89
1070030		Office 2003 & Norton Utilities	10/1/2006	SL	5,000C	1,045.00	1,045.00			1,045.00
1070000		Acer Aspire 5530 Computer (front Dell)	12/26/2006	SL	5,000C	490.00	490.00			490.00
1070000		Phxma IP-4300 Router for ECU	2/28/2007	SL	5,000C	858.91	858.91			858.91
1070010		Seagate DVD Burner	2/27/2007	SL	5,000C	86.99	86.99			86.99
1070010		5 pen drives	3/9/2007	SL	5,000C	780.00	780.00			790.00
1070000		Computer Monitor - Tech Support	10/12/2007	SL	5,000C	99.97	99.97			99.97
1070200		Computer Monitor - Carl's Law Office	12/19/2007	SL	5,000C	189.90	189.90			189.90
1070000		Dell Computer - Carl's Law Office	9/3/2008	SL	5,000C	379.81	379.81			379.81
1070100		Dell Computer 740	2/1/2009	SL	5,000C	572.79	572.79			572.79
1070000		Dell Optiplex 755	2/1/2009	SL	5,000C	872.46	872.46			872.46
1070000		Peak Uptime - HMC Cplex 760 MiniTower	8/12/2009	SL	5,000C	859.76	859.76			859.76
1070100		13 - HMC Optidex 740 MiniTower-Energ	8/12/2009	SL	5,000C	1,014.91	1,014.91			1,014.91
1070200		8 M Office FURNITURE	8/24/2009	SL	7,000C	10,710.52	10,710.52			10,710.52
1070000		1 L & M Office Furn desk 2	8/24/2009	SL	7,000C	1,778.10	1,778.10			1,778.10
1070000		1 L & M Office Furn desk 3	8/24/2009	SL	7,000C	1,631.20	1,631.20			1,631.20
1070000		1 L & M Office Furn desk 4	8/24/2009	SL	7,000C	1,051.20	1,051.20			1,051.20
1070000		1 L & M Office Furn desk 5	8/24/2009	SL	7,000C	1,651.20	1,651.20			1,651.20
1070000		1 L & M Office Furn desk 7	8/24/2009	SL	7,000C	2,243.08	2,243.08			2,243.08
1070000		1 L & M Office Furn desk 8	8/24/2009	SL	7,000C	1,437.02	1,437.02			1,437.02
1070000			8/24/2009	SL	7,000C	1,631.20	1,631.20			1,631.20

73-1000572
10/01/2015 - 08/30/2016
Sorted: General - category

ABILITY RESOURCES, INC. [ABR100]
Depreciation Expense
Financial

10/01/2015 - 08/30/2016

GL Asset S Description Date in ServLoc Method Life Cost / Other Basis Beg. Accum. Depreciation Current Depreciation Total Depreciation

Depreciated Assets

OFFICE EQUIPMENT

070000	L & M Office Ftm. desk 11	8/24/2009	SL	2,000	1,631.20	341.16	1,631.20
070000	L & M Office Ftm. desk 15	8/24/2009	SL	7,000	1,631.20	437.02	1,631.20
070000	L & M Office Ftm. desk 16	8/24/2009	SL	7,000	1,631.20	437.02	1,631.20
070000	L & M Office Ftm. desk 17	8/24/2009	SL	7,000	1,631.20	437.02	1,631.20
1070000	L & M Office Ftm. desk 19	8/24/2009	SL	7,000	1,631.20	437.02	1,631.20
1070000	L & M Office Ftm. desk 20	8/24/2009	SL	7,000	1,631.20	437.02	1,631.20
1070000	L & M Office Ftm. desk 22	8/24/2009	SL	7,000	1,631.20	437.02	1,631.20
1070000	L & M Office Ftm. desk 23	8/24/2009	SL	7,000	1,631.20	437.02	1,631.20
1070000	ZTE California Telephone System	8/23/2010	SL	5,000	1,631.20	437.02	1,631.20
1070000	Cellular Travel Router	9/28/2010	SL	5,000	1,685.31	194.19	1,685.31
1070000	Cahfönthtadeuniter	3/28/2010	SL	5,6010	1,685.31	0.00	1,685.31
1070000	Desks for DN & CT	12/10/2010	SL	7,000	3,473.98	7234.48	3,473.98
1070000	CLS DeskFurniture	4/14/2010	SL	7,000	3,400.26	2,352.09	3,400.26
1070000	Storage Cabinet for Lisa Turner	9/7/2010	SL	7,000	3,524.00	441.80	3,524.00
1070000	Swendline Shredder	9/26/2010	SL	5,000	3,524.00	441.80	3,524.00
1070000	2 Monitors Dell UltraSharp 24.0 inch	9/30/2010	N	5,000	865.53	569.76	865.53
1070000	2 Desktops Dell Triplex 3019	9/30/2010	M	5,000	1,127.16	174.58	1,127.16
1072800	2 Laptops- Dell Insiron 15R NoteBook	9/30/2013	N	5,000	1,085.13	714.02	1,085.13
1072800	Antec Configuration/Migration of Systems	1/21/17/2015	M	5,000	1,050.00	364.90	1,050.00
1070000	HP Laserjet Pro Printer	6/6/2014	M	5,000	389.99	202.80	389.99

Subtotal: OFFICE EQUIPMENT 103,605.37 86,311.23
Less dispositions and exchanges: 0.00 0.00
Net for OFFICE EQUIPMENT 103,605.37 96,311.23 5,060.73
OTHER EQUIPMENT

1080000	Private Trace DLX X WHEELCHAIR	1/1/2012/2009	SL	7,500	725.00	725.00	725.00
1080000	Quicke 2 Wheelchair	1/20/2014	SL	7,000	1,850.00	0.00	1,850.00
1080000	Quicke 2 Wheelchair	1/20/2014	SL	7,000	1,850.00	0.00	1,850.00
1080000	Invacare Trace DLX Wheelchair	1/20/2014	SL	7,352.00	725.00	0.00	725.00

Subtotal: OTHER EQUIPMENT 5,150.30 5,150.00 0.00
Less dispositions and exchanges: 0.00 0.00 0.00
Net for OTHER EQUIPMENT 5,150.30 5,150.00 0.00

1070000	HIGH BACK CHAIR GRAY	1/1/2012/2009	SL	7,000	0.00	0.00	0.00
1070000	HIGH BACK CHAIR GRAY	1/1/2012/2009	SL	7,000	193.50	2.00	193.50
1070000	COMPUTER DESK 2221	2/21/1996	SL	40,000	215.79	215.79	215.79
1271000	Computer Monitor - Case Management	4/7/2008	SL	5,000	422.13	422.13	422.13
1370000	Office Chair - Margaret Pavletich	4/28/2008	SL	7,000	107.69	0.00	107.69
1370000	De I Cripdex 71G	2/1/2008	SL	5,000	872.46	872.46	872.46

Subtotal: RWJ EQUIPMENT 1,973.04 1,973.04 0.00
Less dispositions and exchanges: 0.00 0.00 0.00
Net for RWJ EQUIPMENT 1,973.04 1,973.04 0.00

73-1000672
10/01/2015 - 09/30/2016
Sorted: General - Category

ABILITY RESOURCES, INC. [ABR100]
Depreciation Expense
Financial

10/01/2015 - 09/30/2016

Gl Asset	\$ Acct.	Description	Date In Service	Method	Life	Cost / Other Basis	Beg. Accum. Depreciation	Current Depreciation	Total Depreciation
Depreciated Assets									
SSA EQUIPMENT									
071000	BOOKSHELF 382	12/28/1988	SL	SL	5(YEAR)	115.00	115.00	0.00	115.00
Subtotal: SSA EQUIPMENT						115.00	115.00	0.00	115.00
Less dispositions and exchanges:									
Net for SSA EQUIPMENT						0.00	0.00	0.00	0.00
Subtotal:						115.00	115.00	0.00	115.00
Less dispositions and exchanges:									
Grand Total:						132,194.81	121,784.62	6,437.48	128,222.10
						0.00	0.00	0.00	0.00
						132,194.81	21,784.62	6,437.48	128,222.10

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73-1000572
10/01/2015 - 05/31/2016
Sorted: General Category

ABILITY RESOURCES, INC. [AB10100]
Net Book Value - Depreciation
Financial

10/01/2015 - 05/31/2016

Beginning Balance	Additions	Deletions	Ending Balance	Beg. Accrued Depreciation	Current Depreciation	Deletion Reductions	Total Reductions
Depreciated Assets							
AT DEMO EQUIP							
Subtotal: AT DEMO EQUIP	7,526.00	0.00	7,526.00				
AT LOAN EQUIP							
Subtotal: AT LOAN EQUIP	198.00	0.00	198.00				
Computer Equipment							
Subtotal: Computer Equipment	4,976.34	0.00	4,976.34				
EQUIPMENT DONATIONS							
Subtotal: EQUIPMENT DONATIONS	2,207.00	0.00	2,207.00				
FEDERAL EQUIPMENT							
Subtotal: FEDERAL EQUIPMENT	6,442.06	0.30	6,442.06				
OFFICE EQUIPMENT							
Subtotal: OFFICE EQUIPMENT	103,605.37	0.30	103,605.37				
OTHER EQUIPMENT							
Subtotal: OTHER EQUIPMENT	5,150.00	0.00	5,150.00				
PWJ EQUIPMENT							
Subtotal: PWJ EQUIPMENT	1,873.04	0.00	1,873.04				
SSA EQUIPMENT							
Subtotal: SSA EQUIPMENT	115.00	0.00	115.00				
Grand Totals:	182,196.81	0.00	182,196.81				
				121,784.68	5,437.48	3.00	129,222.10