			EXTENDED TO MAY 15, 2	018		
	0	ON	Return of Organization Exempt Fi			OMB No. 1545-0047
Form JJU Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private four						^{ns)} 2015
		of the Treasury enue Service	 Do not enter social security numbers on this form as Information about Form 990 and its instructions is a 	-	-	Open to Public Inspection
	Inspection					
	heck if		ar year, or tax year beginning JUL 1,2016 and er f organization		UN 30, 2017 D Employer identific	cation number
a	pplicab	ole:				
	Addr	ge THE	INNOCENCE PROJECT, INC.			
	Name Chan	ge Doing b	usiness as		32-0	077563
	Initial returr	n Number	,	oom/suite		
	Final returr termi	n_	ORTH STREET, SUITE 701		(212	·
	ated Amer	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	21,682,050.
	_returr]Appli	n INCOV	YORK, NY 10013 nd address of principal officer: CANDICE CARNAGE		H(a) Is this a group re	
	⊥tiòn pend		AS C ABOVE		for subordinates H(b) Are all subordinates in	
<u> </u>	- ay.ey	empt status:		527		list. (see instructions)
					H(c) Group exemption	
			X Corporation Trust Association Other ►	L Year		State of legal domicile: NY
		Summary				
e	1	Briefly describ	be the organization's mission or most significant activities: ${f DEDICA}$	ATED	TO EXONERAT	ING THE
anc			LLY CONVICTED AND REFORMING THE CR			
Activities & Governance	2		x 🕨 🛄 if the organization discontinued its operations or dispose	ed of more		
200	3					18
8	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5				<u>18</u> 85
ties	5					30
živi	6		of volunteers (estimate if necessary)			0.
Ă			business taxable income from Form 990-T, line 34			0.
		Net difference		Prior Year	Current Year	
đ	8	Contributions	and grants (Part VIII, line 1h)		14,885,515.	15,595,492.
Revenue	9		ce revenue (Part VIII, line 2g)		0.	0.
eve	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)		112,959.	237,619.
ш	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		29,305.	58,884.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		15,027,779.	15,891,995.
	13		milar amounts paid (Part IX, column (A), lines 1-3)		0.	<u> </u>
	14	-	to or for members (Part IX, column (A), line 4)		0.	0.
ses	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)	·····	<u>6,939,475</u> 65,000.	7,843,903. 64,117.
Expenses	10a	Total fundrais	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ▶ 1,093,398	8.	05,000.	04,117.
Ĕ	17	Other expension	es (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	3,875,965.	4,174,647.
	18		es Add lines 13-17 (must equal Part IX, column (A), line 25)		10,880,440.	12,082,667.
	19		expenses. Subtract line 18 from line 12		4,147,339.	3,809,328.
s or					ginning of Current Year	End of Year
sets alan	20	Total assets (I	Part X, line 16)		22,111,511.	26,837,374.
Net Assets or Fund Balances	21		(Part X, line 26)		1,221,470.	1,273,276.
			fund balances. Subtract line 21 from line 20		20,890,041.	25,564,098.
	art II	-				den en de den en de la Carta
			I declare that I have examined this return, including accompanying schedules a			/ knowledge and belief, it is
true,	corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of whic	cn preparer	nas any knowledge.	

Sign Here	CAN	re of officer DICE CARNAGE , print name and title	CHIEF	FINANCIAL	OFFICER	Date		
Paid Preparer	STACY		FD C D	Preparer's signature		01/19/18		PTIN P00974308 3-1144520
Use Only		SS 1818 MARKE	T STRE	ET, SUITE 2	2400	Firm's I Phone		979.8800
May the IRS discuss this return with the preparer shown above? (see instructions)								

632001 11-11-16 LHA For Paperwork Reduction Act Notice, see the separate instructions.

- orm	1 990 (2016) THE INNOCENCE PROJECT, INC. 32-0077563 Pa
Par	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE INNOCENCE PROJECT, INC. IS A NATIONAL NOT-FOR-PROFIT ORGANIZATION
	DEDICATED TO EXONERATING INNOCENT PEOPLE THROUGH DNA TESTING AND
	REFORMING THE CRIMINAL JUSTICE SYSTEM TO PREVENT WRONGFUL CONVICTIONS
	THE INNOCENCE PROJECT WAS ESTABLISHED IN 1992 AS A LEGAL CLINIC AT
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 3,859,881. including grants of \$) (Revenue \$
4d	LEGAL SERVICES (INCLUDES LEGAL, INTAKE AND SOCIAL WORK): THE INNOCEN
	PROJECT LEVERAGES THE FACT-FINDING SCIENCE OF DNA TESTING TO EXPOSE
	ERRORS IN THE CRIMINAL JUSTICE SYSTEM AND TO EXONERATE PEOPLE IN PRIS
	OR ON DEATH ROW FOR CRIMES THEY DID NOT COMMIT. TO DETERMINE WHICH
	CASES WE CAN ACCEPT, OUR STEADFAST INTAKE TEAM REVIEWS AN ESTIMATED
	2,400 LETTERS ANNUALLY FROM INCARCERATED PEOPLE REQUESTING
	INVESTIGATION INTO THEIR INNOCENCE CLAIMS. THE TEAM THEN COLLABORATES
	CLOSELY WITH OUR LEGAL TEAM TO DETERMINE WHETHER DNA TESTING CAN PROV
	INNOCENCE. ONCE CASES ARE ACCEPTED, OUR STAFF ATTORNEYS WORK WITH
	CARDOZO LAW SCHOOL CLINIC STUDENTS TO INVESTIGATE THE CASES, TO FIND
	BIOLOGICAL EVIDENCE AND TO GAIN ACCESS TO POST-CONVICTION TESTING
	THROUGH AGREEMENTS OR COURT ORDERS. WHEN DNA RESULTS PROVE OUR CLIENT
4b	(Code:) (Expenses \$1, 281, 633. including grants of \$) (Revenue \$)
	POLICY: THE INNOCENCE PROJECT WORKS WITH CONGRESS, STATE LEGISLATURE
	AND COURTS, EXECUTIVE AGENCIES, LOCAL LEADERS AND LAW ENFORCEMENT TO
	PASS LAWS, POLICIES AND RULES TO REVEAL AND PREVENT WRONGFUL
	CONVICTIONS. OUR POLICY PRIORITIES REFLECT THE LESSONS LEARNED FROM D
	EXONERATIONS AND ADDRESS THE CONTRIBUTORS TO WRONGFUL CONVICTIONS,
	WHICH INCLUDE: EYEWITNESS MISIDENTIFICATION, INVALIDATED AND IMPROPER
	FORENSIC SCIENCE, FALSE CONFESSIONS, INCENTIVIZED WITNESSES, GOVERNME
	MISCONDUCT, INADEQUATE DEFENSE, AND RACISM AND RACIAL BIAS. THE
	INNOCENCE PROJECT WORKS TO ENSURE FAIR ACCESS TO POST-CONVICTION DNA
	TESTING AND PRESERVATION OF BIOLOGICAL EVIDENCE FOR TESTING, AS WELL
	LEGAL MECHANISMS FOR INNOCENT PEOPLE SEEKING RELIEF THROUGH NEW NON-D
	EVIDENCE. WE ALSO ADVOCATE FOR LAWS THAT FAIRLY COMPENSATE EXONERATED
4c	
	SCIENCE AND RESEARCH: THE MISAPPLICATION OF FORENSIC SCIENCE
	CONTRIBUTED TO ALMOST HALF OF THE WRONGFUL CONVICTIONS THAT HAVE BEEN
	CLEARED THROUGH DNA TESTING IN THE UNITED STATES. TO ADDRESS THIS DIR
	ISSUE, THE INNOCENCE PROJECT CONTRACTS LOBBYISTS TO URGE CONGRESS AND
	EXECUTIVE AGENCIES TO SUPPORT RESEARCH THAT WILL VALIDATE FORENSIC
	DISCIPLINES AND SET SMART AND CONSISTENT STANDARDS AROUND THEIR USE I
	CRIMINAL INVESTIGATIONS AND IN COURT. WE'RE ALSO WORKING TO IMPROVE
	FORENSIC SCIENCE OVERSIGHT AND REVIEW AT THE STATE LEVEL. IN THE FISC
	YEAR ENDING JUNE 30, 2017, WE RESPONDED TO REQUESTS FROM THE DEPARTME
	OF JUSTICE FOR COMMENTS ON VARIOUS PROJECTS, INCLUDING PROPOSED
	GUIDANCE FOR UNIFORM STANDARDS FOR TESTIMONY AND REPORTING, AS WELL A
	METHODOLOGY FOR REVIEWING FORENSIC SCIENCE DISCIPLINES, AND A PROPOSE
4 ન	Other program services (Describe in Schedule O.)
40	
	(Expenses \$ 3,613,120. including grants of \$) (Revenue \$)
4e	Total program service expenses ► 9,524,746.
	Form 990 (
32002	2 11-11-16 SEE SCHEDULE O FOR CONTINUATION(S)
	2
10	119 758275 3167.000 2016.05030 THE INNOCENCE PROJECT, INC. 3167_0

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Form	990	(2016))

THE INNOCENCE PROJECT, INC.

Pa	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	x
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	Х	
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	10		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13 14a		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	148		<u> </u>
u	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	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		<u> </u>
15	foreign organization report on Part IX, column (A), line 3, more than \$5,000 or grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u> </u>
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		x

Form **990** (2016)

632003 11-11-16

Form	000	(2016)	
Form	990	(2016)	

THE INNOCENCE PROJECT, INC.

Part IV Checklist of Required Schedules (continued)

20a Both e organization operate on a cm rom hospital facilities? If "Ves," complete Schedule H 20a BX 21 Did the organization received on yor of its audited francel statements to this return? 20b 21 Did the organization report more than SS:000 of grants or other assistance to any domestic organization or domestic powerment on Part K, columo M, Line TM "Ves," complete Schedule I, Part I and III 21 22 Did the organization report more than SS:000 of grants or other assistance to or for domestic organization's current and former officers, directors, trustees, key employees, and highest compensation of the organization's current and former officers or the Schedule I, Part I and III 22 X 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than S100,000 as of the isat day of the year, that was also ald attr Docombus 1, 2002 IF "Yes," complete Schedule I, Part I AN 24a X 24a Did the organization investary proceeds of tax-exempt bonds exempt and subcerval and within outstanding atmost time during the year? 24d X 25 Section SO(163, SO(164), SO(Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic individuals on Part IX, column (A), line 21 if Yes, "complete Schedule I, Parts I and II. 22 X 22 Did the organization neeport more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 21 if Yes, "complete Schedule I, Parts I and III. 22 X 23 Did the organization neever Yes' to Part VI. Science A, line 3, 4, or 5 about Compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees II "Yes," complete Schedule I. 23 X 24 Did the organization neever hyperbodi issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, flat was supported to 21, 2002? If Yes," answer lines 24b through 24d and complete Schedule I, Part I and III. 24a X 24 Did the organization near as an 'on behaf of' issuer for bonds outstanding at any time during the year? 24d X 25 Section 501(c)(3), ont 501(c)(4), and 501(c)(29) organizations, bo the organization engage in an excess benefit transaction with a disqualified person in a prior year. and that the transaction with a disqualified person in a prior year. and that the transaction with a disqualified person? If Yes,' complete Schedule L, Part I 25b X 26 Did the organization revolve a grant or other assistance to an officer, fustees, we penployee, substantial contruburor or employee theror, a grant selection com	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
domestic government on Part IX, column (A), line 17 /f */ss, 'complete Schedule I, Part I and II. 21 X 22 Dot the organization report meet hans 50,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27. If *Yes, 'complete Schedule I, Parts I and III. 22 X 23 Dot the organization narwer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former offices, directors, trustees, key employees, and higher to compensate demployees? If *Yes, 'complete Schedule I, Part II. 23 X 24 Dot the organization narwer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensate of the organization's current and former offices, directors, trustees, key employees, and higher to compare the other than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If *Yes, 'answer lines 24b through 24d and complete Schedule I, Part I. 24d X 250 Bot the organization invest any proceeds of tax-averupt bonds beyond a temporary period exception? 24d X 256 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization angle in an excess benefit transaction with a disqualified person during the year? / ***, 'complete Schedule I, Part I 25a X 250 Dot the organization organization orpot any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employees, highest complexes Schedule L, Part IV 25a X 250 Dot the organization negate and scienco multime member, or to a 35% co	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 2? If Yes, Yes To Part VI. Section A, line 3, d. of Sabot Compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If Yes, "complete Schedule J 22 X 240 Did the organization nave a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, fattware sisced after December 31, 2002? If Yes," answer lines 24 bthrough 24 did complete Schedule A. If Yeb, q to the asset of the December 31, 2002? If Yes," answer lines 24 bthrough 24 did complete Schedule A. If Yeb, q to the asset of the December 31, 2002? If Yes," answer lines 24 bthrough 24 did complete Schedule A. If Yeb, q to the asset of the December 31, 2002? If Yes," answer lines 24 bthrough 24 did complete Schedule A. If Yeb, q to the asset of the organization maintain an escrow account other than a refunding scrow at any time during the year? 246 28 Did the organization maintain an escrow account other than a refunding strony period exception? 246 246 28 Section 501(c)(3), ont 501(c)(4), and 501(c)(29) organizations. Did the organization ongage in an excess benefit transaction with a disqualified person in a prior year. And that the transaction ware math tengage in an excess benefit transaction with a disqualified persons? If Yes, "complete Schedule I, Part I 256 X 29 Did the organization report any mount on Part X, line 5, 6, or 22 to reacivables from or payables to any current or tormer officers, directors, trustees, key employees, or disqualified persons	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part X, column (A), line 27. If "Yes," complete Schedule I, Parts I and III. 22 X 23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule I, I'mo', go to line 25a 2a X 24 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 I, I'mo', go to line 25a 24b 24b 24 Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24b 25 Section 501(c)(3), 501(c)(4), and 501(c)(20) gorganizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a temperature on excess benefit transaction with a disqualified person in a prior year, and that the transaction nust at lengage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess benefit transaction with an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess benefit transaction		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes, "complete Schedule J. 24 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 suised after December 31, 2002? If 'Yes," answer lines 24b through 24d and complete Schedule K. If 'No', go to line 25a 24 Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24c X 25 Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24d 24d X 26 D the organization mixes an 'on behalf of' Issuer for bonds outstanding at any time during the year? 24d X 26 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 of mix proceeds any other organization are ported on any of the organization are ported or any of the organization pay amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, we amployees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part IV 25b X 27 Did the organization approximate, and stat section committee member, or to a 5% controlled onting or family member of a current or former officer, director, trustee, nerge engloyee II' 'Nes,' complete Schedule L, Part IV	22		22		x
and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J. 23 X 24a Do the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No', go to line 25a 24a X 24b Do the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b X 24a Do the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c X 25a Botthe organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d X 25a Section 5016(3), 5016(4), and 5016(220) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 24d X 25a Did the organization aware that it engaged in a excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a X 25b Did the organization aware that engage in an excess benefit transaction with a disqualified person during the year' of the rassistance to an officer, director, trustee, key employee, substantial contributor or employee thered, a ganta steelow complete Schedule L, Part IV 25a X 27b Did the organization any of these person? If 'Yes,' complete Schedule L, Part IV 26a X 2	23				
Schedule J 23 X 24a Dd the organization was a tax exempt bond issue with an cutstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No', go to line 25a 24a X 24 Did the organization investa my proceeds of tax-exempt bonds beyond a temporary period exception? 24b X 25 Did the organization investa my proceeds of tax-exempt bonds outstanding at any time during the year to defease any tax-evempt bonds? 24d X 25 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 in a proves and that the transaction has not been reported on any of the organization report sear, and that the transaction has not been reported on any of the organization payables to any current or former officers, directors, trustes, key employees, highest compressated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II 25a X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustes, key employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustes, ey employee, substantial complexes and the any of these persons? If 'Yes,' complete Schedule L, Part II 27 X 28 Mart to remore officer, director, trustes, or key employee? If 'Yes,' complete Schedule L, Part II 28a X <					
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If 'No', go to line 25a 24a X 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b X 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b X 24b Did the organization and that an escrow account other than a refunding escrow at any time during the year? 24d Z4d 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization in a point at the sanget on third the year, and that the transaction with a disqualified person during the year? Yes X 25b Did the organization avare that it engaged in an excess benefit transaction with a disqualified person during the year? Yes X 26 Did the organization avare that it engaged in an excess benefit transaction with a disqualified person? If 'Yes,'' complete Schedule L, Part I Zes X 27 Did the organization avare that it engaged in an excess benefit transaction with an a disqualified person? If 'Yes,'' complete Schedule L, Part I Zes X 27 Did the organization avare that engaged in an excess benefit transaction with an outpress of disc of the organization avare that engage in an excess benefit transaction with a disqualified person? If 'Yes,'' complete Schedule L, Part I			23	Х	
Schedule K. If "No", go to line 25a 24a X b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24b c Did the organization amintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c 24c 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization access 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-E27. If "Yes," complete Schedule L, Part I 25a X 25 Did the organization ace there reported on any of the organization's prior Forms 990 or 990-E27. If "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, rustees, key employees, highest compensated employees, or disqualified person? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable, conditions, and exceptions?) 27 X 28 Was the organization exert or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable, conditions, and exceptions?) 28a X 29 Did the organization receive cont thatisers? (If "Yes," complete Schedule L, Part IV 28a	24a				
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Form **990** (2016)

632004 11-11-16

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 57 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 85 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e- <i>file</i> (see instructions) 3a 2b X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3a 2b 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 3a 2a b If "Yes," enter the name of the foreign country:	e 5
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See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 5c 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization notify the donor of the value of the goods or services provided? 7a X 7 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7d 7d 7e X f Did the organization receive any funds, directly or indirectly or onder any sersonal benefit contract? 7e X f Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g	
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b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 9b	
10 Section 501(c)(7) organizations. Enter:	
a Initiation fees and capital contributions included on Part VIII, line 12 10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	
11 Section 501(c)(12) organizations. Enter:	
a Gross income from members or shareholders	
b Gross income from other sources (Do not net amounts due or paid to other sources against	
amounts due or received from them.)	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	
a Is the organization licensed to issue qualified health plans in more than one state?	_
Note. See the instructions for additional information the organization must report on Schedule O.	
b Enter the amount of reserves the organization is required to maintain by the states in which the	
organization is licensed to issue qualified health plans	
c Enter the amount of reserves on hand	x
	<u> </u>
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	1101

Form	990	(2016)
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Form 990	(2016)
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THE INNOCENCE PROJECT, INC.

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	<u></u>	<u></u>	<u></u>		[
Sec	tion A. Governing Body and Management				N	Т
4			18		Yes	╁
Ia	Enter the number of voting members of the governing body at the end of the tax year	1a				I
	If there are material differences in voting rights among members of the governing body, or if the governing					I
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.		18			
	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 relationsh			-		1
_	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under			_		
	of officers, directors, or trustees, or key employees to a management company or other person?			3		
4	Did the organization make any significant changes to its governing documents since the prior Form			4		
5				5		
6			·····	6		
	more members of the governing body?			7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockholders, or				
				7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by the following:				ĺ
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal					
					Yes	
0a	Did the organization have local chapters, branches, or affiliates?		Γ	10a		
	If "Yes," did the organization have written policies and procedures governing the activities of such					
~	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
12	Has the organization provided a complete copy of this Form 990 to all members of its governing bo			11a	х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	before ming the		Πa		
				12a	х	
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	co to conflicte?		12a	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If		·····	120	- 23	
C				10-	х	
	in Schedule O how this was done		·····	12c	X	
13	Did the organization have a written whistleblower policy?			13	X	_
14	Did the organization have a written document retention and destruction policy?			14	Λ	
15	Did the process for determining compensation of the following persons include a review and appro	•	nt			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				37	
	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	Х	
	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 arrang	ement with a				
	taxable entity during the year?			16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	iate its participatio	n			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anization's				
	exempt status with respect to such arrangements?			16b		
iec	tion C. Disclosure					
7	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA,	CO,CT,FL,	GA,HI	,IL	,KS	5
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Section 501(c)((3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
		in in Schedule O)				
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or		oolicv. and	finan	cial	
-	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 b	ooks and records				
-0	CANDICE CARNAGE - (212) 364-5353					
	40 WORTH STREET, SUITE 701, NEW YORK, NY 10013					
				Form	990	_
12000	6 11-11-16 SEE SCHEDOLE O FOR FOLL LIST OF STATES			FUH	390	
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Part VII	Compensation of Office	s, Directors	, Trustees,	Key Emp	oloyees,	Highest	Compens	ated
	Employees, and Indeper	dent Contra	ctors					

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.

		T				прсі	1541			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per					is bot pr/trus		compensation	compensation	amount of
	week						ŕ	from	from related	other
	(list any hours for	direct				-		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or o	stee			Isated		(W-2/1099-MISC)	(W 2/1000 10100)	organization
	organizations	truste	al trustee		yee	mper		()		and related
	below	dual	ution;	5	mplo	est co o yee	er			organizations
	line)	Individual trustee or director	Institutional t	Officer	Key employee	Highest compensated employee	Former			-
(1) RODNEY ELLIS	6.00									
BOARD MEMBER/CHAIR		X		X				0.	0.	0.
(2) STEPHEN SCHULTE	3.00									
BOARD MEMBER/VICE CHAIR		X		X				0.	0.	0.
(3) JACK TAYLOR	2.00									
BOARD MEMBER/TREASURER		X		X				0.	0.	0.
(4) GORDON DUGAN	1.50									
BOARD MEMBER/ASST.TREASURE		X		Х				0.	0.	0.
(5) EKOW YANKAH	4.00									
BOARD MEMBER/EXECUTIVE CMT		Х						0.	0.	0.
(6) MARVIN ANDERSON	3.00									
BOARD MEMBER		Х						0.	0.	0.
(7) JASON FLOM	5.00									
BOARD MEMBER		Х						0.	0.	0.
(8) JOHN GRISHAM	2.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(9) DR. ERIC S. LANDER	0.50								_	_
BOARD MEMBER		Х						0.	0.	0.
(10) VERED RABIA	12.50									_
BOARD MEMBER		Х						0.	0.	0.
(11) STEVEN REISS	3.50									
BOARD MEMBER		Х						0.	0.	0.
(12) MATTHEW ROTHMAN	0.50									
BOARD MEMBER		х						0.	0.	0.
(13) CHARLES RAMSEY	0.50									
BOARD MEMBER		Х						0.	0.	0.
(14) DENISE FODERADO	2.00									
BOARD MEMBER		Х						0.	0.	0.
(15) ANDREW TANANBAUM	2.50									
BOARD MEMBER		х						0.	0.	0.
(16) JOHN KANEB	1.00							_	_	<u> </u>
BOARD MEMBER		Х						0.	0.	0.
(17) JESSICA A.ROTH	6.00									<u> </u>
BOARD MEMBER		Х						0.	0.	0.
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Form **990** (2016)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)			(C)			(D)	(E)			(F)	
Name and title	Average	(do				ר than	one	Reportable	Reportable		Est	imated	
	hours per	box	, unle	ss pe	erson	is bot	h an	compensation	compensation	ı –	am	ount of	
	week officer and a director/trustee)				from	from related			other				
	(list any hours for	recto						the	organizations		•	ensatio	on
	related	or di	ee			sated		organization	(W-2/1099-MISC	(ز		m the	
	organizations	'ustee	trust		ee	npens		(W-2/1099-MISC)			•	nizatio relateo	
	below	lual ti	tiona		yolqr	st cor yee	-					nizatior	
	line)	Individual trustee or director	In stitutional trustee	Office	(ey en	Highest compensated employee	Forme						
(18) AUDREY STRAUSS	1.50				-								
BOARD MEMBER		Х						0.		0.			0.
(19) MADELINE DELONE	40.00												
EXECUTIVE DIRECTOR/SECRETA				Х				241,463.		0.	32	2,25	4.
(20) CANDICE CARNAGE	40.00												
CHIEF FINANCIAL OFFICER				Х				144,562.		0.	16	5,90	4.
(21) REBECCA BROWN	40.00												_
POLICY DIRECTOR						X		141,802.		0.	16	5,66	0.
(22) AUDREY LEVITIN	40.00										~ ~ ~		•
DIRECTOR OF DEVELOPMENT						X		157,481.		0.	30),39	9.
(23) ANGELA AMEL	40.00							146 496			~		~
DIRECTOR OF OPERATIONS	40.00					X		146,426.		0.	29	9,80	6.
(24) MERYL SHWARTZ	40.00							171 524			20		2
DEPUTY DIRECTOR	40.00					X		171,534.		0.	30),80	2.
(25) PAUL CATES	40.00					v		147 466			1 (- 01	1
COMMUNICATIONS DIRECTOR						X		147,466.		0.	C	5,84	4.
the Crite tested								1,150,734.		0.	17:	3,66	<u>a</u>
1b Sub-total								0.		0.	<u> </u>	,00	<u></u>
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								1,150,734.		0.	17:	3,66	9.
2 Total number of individuals (including but n										-		,,	
compensation from the organization		1030	iiste	u u	000	C) WI	101						7
											· · ·	Yes	No
3 Did the organization list any former officer,	director. or tru	ustee	e. ke	ve	npla	ovee	or	highest compensated e	mplovee on				
line 1a? If "Yes," complete Schedule J for s					•			•		- 1	3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150			-					-	-		4	Х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch	pers	son .		-			5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated ind	depe	ende	ent c	cont	racto	ors	that received more than	\$100,000 of comp	pensa	ation fr	om	
the organization. Report compensation for the calendar year ending with or within the organization's tax year.													
(A)								(B)		~	(C)		
Name and business							_	Description of s	ervices	C	ompen	sation	
THE RABEN GROUP, 1640 RHO		JNI) A	701	Ľ,	NV		LEGISLATIVE			101	4 17	^
STE 600, WASHINGTON, DC 2	20036							CONSULTING				.,47	2.
							_						
							_						
2 Total number of independent contractors (i	ncludina but n	ot li	mite	d to	tho	se lis	stec	l d above) who received m	ore than				
\$100,000 of compensation from the organi	-					1		,					
											-	~~~	

632008 11-11-16

Form **990** (2016)

8

Form	n 990	0 (2016) THE INI	NOCENCE	PROJECT	, INC.		32-0077	563 Page 9
Pa	rt V							
		Check if Schedule O contain	s a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
, Gifts, Grants nilar Amounts	1 a	a Federated campaigns	1a					
Gra	I	b Membership dues	1b					
Am (c Fundraising events	1c	2,288,324.				
lar lar		d Related organizations	1d					
ini,		e Government grants (contribution	s) 1e					
r S	1	f All other contributions, gifts, grants, a	and					
Contributions, Gift and Other Similar		similar amounts not included above	1f	13,307,168.				
dđ	(g Noncash contributions included in lines 1a-	1f: \$					
aS	I	h Total. Add lines 1a-1f		🕨	15,595,492.			
				Business Code				
e	2 8	a						
ه ک	I	b						
s n		c						
Program Service Revenue		d						
2 B R		e						
Ϋ́	1	f All other program service revenue	e					
		g Total. Add lines 2a-2f						
	3	Investment income (including div						
		other similar amounts)			237,762.			237,762.
	4	Income from investment of tax-ex						
	5	Royalties		►				
		· · · · · · · · · · · · · · · · · · ·	(i) Real	(ii) Personal				
	6 8	a Gross rents						
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)		>				
			i) Securities	(ii) Other				
		assets other than inventory	, 5,336,820.					
	I	b Less: cost or other basis						
		and sales expenses	5,336,963.					
		c Gain or (loss)	-143.					
		d Net gain or (loss)			-143.			-143.
Ð		a Gross income from fundraising e						
Other Revenue		including \$ 2,288,32						
eve		contributions reported on line 1c						
r B		Part IV, line 18	а	212,900.				
the	I	b Less: direct expenses		453,092.				
0		c Net income or (loss) from fundrai		►	-240,192.			-240,192.
		a Gross income from gaming activi	0					
		Part IV, line 19						
	I	b Less: direct expenses						
		c Net income or (loss) from gaming						
		a Gross sales of inventory, less ret						
		and allowances						
	I	b Less: cost of goods sold						
		c Net income or (loss) from sales or						
ľ		Miscellaneous Revenue		Business Code				
ł	11 :			900099	215,919.	215,919.		
		b NETWORK DUES		900099	41,905.	41,905.		
	-	c MISCELLANEOUS INCOME		900099	41,252.	41,252.		
		d All other revenue			,	, ,		
		e Total. Add lines 11a-11d			299,076.			
	12	Total revenue. See instructions.			15,891,995.	299,076.	0.	-2,573.
632009						· · · · · ·		Form 990 (2016)

14310119 758275 3167.000 2016.05030 THE INNOCENCE PROJECT, INC. 3167_001

9

Form **990** (2016)

Part IX Statement of Functional Expenses

THE INNOCENCE PROJECT, INC.

-	Check if Schedule O contains a response			/ <u>^) </u>	
	not include amounts reported on lines 6b, 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,	441 204	246 061	F4 20C	40 047
	trustees, and key employees	441,304.	346,061.	54,396.	40,847
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	5 620 170	1 1 1 1 1 0	605 002	E01 0E0
7	Other salaries and wages	5,639,179.	4,422,128.	695,092.	521,959
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	214,042.	167,847.	26,383.	19,812
~	F	1,110,661.	870,957.	136,902.	102,802
9	Other employee benefits	438,717.	344,033.	54,077.	40,607
0 1	Payroll taxes Fees for services (non-employees):	430,717.	544,0550	54,0776	40,007
a b	Management	5,489.	5,489.		
	Legal Accounting	25,500.	5,1051	25,500.	
d		399,976.	399,976.	2373000	
e		64,117.			64,117
f	Investment management fees				• - /
, g					
9	column (A) amount, list line 11g expenses on Sch O.)	639,744.	491,928.	147,816.	
12	Advertising and promotion				
13	Office expenses	412,152.	289,844.	32,639.	89,669
14	Information technology	-	-		
15	Royalties				
16	Occupancy	795,260.	624,345.	98,423.	72,492
17	Travel	574,973.	534,323.	26,717.	13,933
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	319,876.	274,203.	20,350.	25,323
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	219,193.	172,085.	27,127.	19,981
23	Insurance	72,731.	57,100.	9,001.	6,630
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)				
а	amount, list line 24e expenses on Schedule 0.) EXONERATION PROGRAM EXP	238,262.	238,162.		100
a b	DNA AND FORENSIC TESTS	234,682.	234,682.		±00
с С	BANK AND FILING FEES	92,132.	165.	33,824.	58,143
d	RESEARCH AND PROGRAM MA	32,000.	31,387.	53.	560
	All other expenses	112,677.	20,031.	76,223.	16,423
25	Total functional expenses. Add lines 1 through 24e	12,082,667.	9,524,746.	1,464,523.	1,093,398
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)				

632010 11-11-16

14310119 758275 3167.000

10 2016.05030 THE INNOCENCE PROJECT, INC. 3167_001

Form **990** (2016)

Form 990 (2016)

11 2016.05030 THE INNOCENCE PROJECT, INC. 3167_001

32-0077563 Page 11

5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employees' beneficiary organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 7, 803. 9 Prepaid expenses and deferred charges 222, 147. 10a 2, 548, 724. b Less: accumulated depreciation 10a 1 Investments - publicly traded securities 9, 816, 734. 11 Investments - publicly traded securities. 9, 816, 734. 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 257, 288. 15 257, 288. 16 Total assets. Add lines 1 through 15 (must equal line 34) 22, 111, 511. 16 26, 837, 374			Check if Schedule O contains a response or pot	to an	line in this Part Y			
Beginning of year End of year 1 Cash - non-interest bearing 1, 132, 717. 1 375, 507 2 Savings and temporary cash investments 1, 132, 717. 1 375, 507 3 Pledges and grants receivable, net 1, 711, 819. 2 5, 903, 712. 4 Accounts receivable, net 5, 172, 619. 3 4, 395, 921 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 5 6 Loans and other receivables from other disqualified persons (as defined under section 4956(r)(I), persons described in section 4956(r)(S(B), and contributing employees' beneficiary organizations of section 501(c)(9) voluntary employees and sponsoring organization of section 501(c)(9) voluntary employees and sponsoring organizetates section 510(c) 0, 1, 255, 270, 288. 16				5 10 all	יוויט וו נווס דמונא			
1 Cash - non-interest-bearing 1,132,717.1 375,507 2 Savings and temporary cash investments 4,711,819.2 5,903,712 3 Pledges and grants receivable, net 5,172,619.3 4,395,921 4 Accounts receivable, net 5,172,619.3 4,395,921 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(r)(3)), persons described in section 4968(c)(3)(9) voluntary employers and sponsoring organizations of section 501(c)(9) voluntary employers baneficiary organizations (see inst). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7,803.8 11,888 9 Prepaid expenses and deferred charges 222,147.9 198,666 10a 2,548,724. 790,384.10c 691,954 11 Investments - publicly traded securities 9,816,734.11 15,001,915 12 Investments - porgan-related. See Part IV, line 11 13 14 13 Investments - porgan-related. See Part IV, line 11 13 14 14 Intangible assets 717,196.17.34.11								
2 Savings and temporary cash investments 4,711,819,2 5,903,712 3 Pledges and grants receivable, net 5,172,619,3 4,395,921 4 Accounts receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(/10)), persons described in section 5016()8) voluntary employees beneficiary organizations of section 5016()8) voluntary employees beneficiary organizations of section 5016()8) voluntary employees and sponsoring organizations of section 5016()8) voluntary employees and equipment: cost or other basis. Complete Part II of Schedule D 7 6 10a 2,548,7224 9 198,686 10a 1,856,7700. 790,384. too: 691,954 11 Investments. other securities. See Part IV, line 11 11 12 10,01,915 12 Investments. order securities. See Part IV, line 11 12 257,288. 15 257,288. 15 Other assets. Add lines 1 through 15 (must equal line 34) 22,117,151. 16 26,837,374 16 Total assets. Add lines 1 through 16 (must equal line 34) 22,177,288. 15 257,288. 17 Accounts payable		4	Cash - non-interest-bearing				1	
3 Pledges and grants receivable, net 5, 172, 619. 3 4, 395, 921 4 Accounts receivable, net 5 5 5 Loars and other receivable from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loars and other receivables from other disqualified persons (as defined under section 4958(f(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(b)(9) voluntary employers and sponsoring organizations (see instr). Complete Part II of Sch L 6 7 Notes and loars receivable, net 7 8 8 Prepaid expenses and deferred charges 222, 147. 9 198, 686 10a 2, 548, 724. 6 7 790, 384. 10c 691, 954 11 Investments - publicly traded securities 9, 816, 734. 11 15, 001, 915 12 Investments - outplicky traded securities 9, 816, 734. 11 15, 001, 915 13 Investments - publicky traded securities 9, 816, 734. 11 14 14 150 ther assets. See Part IV, line 11 13 14 14 15 Other assets. See Part IV, line 11 12			Savings and temporary cash investments					
4 Accounts receivable, net 4 503 5 Laars 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(c)(3)(8), and contributing employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7, 803. 8 11,888 9 Prepaid expenses and deferred charges 2222,147. 9 198,686 10a La, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,548,724. 6 1 Investments - publicly traded securities 9,816,734. 11 15,001,915 12 Investments - other securities. See Part IV, line 11 13 14 14 15,001,915 13 Investments - other securities. See Part IV, line 11 13 14 16 257,288. 16 257,288. 16 257,288. 16 257,288. 16 257,288. 16 26,837,374 14 Intangubie and accrued expenses 717,196. 17						5,172,619.	3	
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gg trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 5 G Loars and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employees and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loars receivable, net 7 8 Inventories for sale or use 7, 803. 9 Prepaid expenses and deferred charges 2222,147. 9 Jepsid expenses and deferred charges 2222,147. 9 Investments - publicly traded securities. 10a 2,548,724. 10a 1,856,770. 790,384. 10c 691,954 11 Investments - publicly traded securities. 9,816,734. 11 15,001,915 12 Investments - program-related. See Part IV, line 11 13 14 14 14 15 Other assets. See Part IV, line 11 12 22,1111,511. 16 26,837,374 19 Deferred revenue 19 20 21 22 22 22 17 Accounts payable and accrued explaes							-	
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gg employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 7, 803. 8 11, 888 9 Prepaid expenses and deferred charges 222, 147. 9 198, 686 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2, 548, 724. b Less: accumulated depreciation 10a 1, 856, 770. 790, 384. 10c 691, 954 11 Investments - publicly traded securities 9, 816, 734. 11 15, 001, 915 12 12 Investments - orgram-related. See Part IV, line 11 13 14 14 13 Investments - program-related. See Part IV, line 11 13 14 14 14 Intangible assets 5 257, 288 15 257, 288 16 Total assets. Add lines 11 Hrough 15 (must equal line 34) 222, 111, 511. 16 26, 837, 374 17 Accounts payable and accrued expenses 717, 196. 17 824, 472 18 19 20 22 21 22 <tr< td=""><td></td><td>ľ</td><td>•</td><td>•</td><td>,</td><td></td><td></td><td></td></tr<>		ľ	•	•	,			
gg employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 7,803. 8 11,888 9 Prepaid expenses and deferred charges 222,147. 9 198,686 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,548,724. b Less: accumulated depreciation 10b 1,856,770. 790,384. 10c 691,954 11 Investments - publicly traded securities 9,816,734. 11 15,001,915 12 12 Investments - program-related. See Part IV, line 11 12 13 14 14 Intangible assets 14 257,288. 15 257,288 16 Total assets. Add lines 1 through 15 (must equal line 34) 22,111,511. 16 26,837,374 17 Accounts payable and accrued expenses 717,196. 17 824,472 18 Grants payable 18 20 21 Escrew or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other				`				
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9 Prepaid expenses and deferred charges 222,147. 9 198,686 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,548,724. 9 90,384. 10c 691,954 b Less: accumulated depreciation 10b 1,856,770. 790,384. 10c 691,954 11 Investments - publicly traded securities 9,816,734. 11 15,001,915 12 Investments - program-related. See Part IV, line 11 13 14 14 Intragible assets 14 14 15 Other assets. See Part IV, line 11 13 14 16 Total assets. Acid lines 1 through 15 (must equal line 34) 22,111,511. 16 26,837,374 17 Accounts payable and accrued expenses 717,196. 17 824,472 18 19 Deferred revenue 19 20 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 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable	As					7,803.	-	11,888.
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,548,724. b Less: accumulated depreciation 10b 1,856,770. 790,384. 10c 691,954 11 Investments - publicly traded securities 9,816,734. 11 15,001,915 12 Investments - other securities. See Part IV, line 11 12 13 14 Intargible assets 14 15 Other assets. See Part IV, line 11 257,288. 15 257,288 16 Total assets. Add lines 1 through 15 (must equal line 34) 22,111,511. 16 26,837,374 17 Accounts payable and accrued expenses 717,196. 17 824,472 18 Grants payable 18 19 19 20 21 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 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities not included on lies 17:24). Comp						222,147.		198,686.
basis. Complete Part VI of Schedule D b Less: accumulated depreciation b Less: accumulated depreciation complete Part IV, line 11 complete Part IV, line 11 complete Part II of Schedule L complete Part II of Schedu				I		•	-	
b Less: accumulated depreciation 10b 1,856,770. 790,384. 10c 691,954 11 Investments - publicly traded securities 9,816,734. 11 15,001,915 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 14 14 15 Other assets. See Part IV, line 11 257,288. 15 257,288. 16 Total assets. Add lines 1 through 15 (must equal line 34) 22,111,511. 16 26,837,374 17 Accounts payable and accrued expenses 717,196. 17 824,472 18 Grants payable 18 19 20 20 21 21 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 23 22 23 22 Unsecured notes and loans payable to unrelated third parties 24 24 24 23 Secured mortgages and notes payable to related third parties 24 24 24 24 <				10a	2,548,724.			
11 Investments - publicly traded securities 9,816,734. 11 15,001,915 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 13 14 14 Intanjble assets 14 13 15 Other assets. See Part IV, line 11 13 14 16 Total assets. Add lines 1 through 15 (must equal line 34) 22,111,511. 16 26,837,374 17 Accounts payable and accrued expenses 717,196. 17 824,472 18 19 Deferred revenue 19 20 20 21 22 21 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 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 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax		Ь		10b	1,856,770.	790,384.	10c	691,954.
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17 Accounts payable and accrued expenses 717,196.17 824,472 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 504,274.25 448,804 26 Total liabilities. Add lines 17 through 25 1,221,470.26 1,273,276 Organizations that follow SFAS 117 (ASC 958), check here X		16				22,111,511.	16	26,837,374.
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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 504,274.25 448,804 26 Total liabilities. Add lines 17 through 25 1,221,470.26 1,273,276 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and X and X	es	22	Loans and other payables to current and former	officer	s, directors, trustees,			
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 504,274.25 448,804 26 Total liabilities. Add lines 17 through 25 1,221,470.26 1,273,276 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and X and X	Ē		key employees, highest compensated employee	s, and	disqualified persons.			
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parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 504,274.25 448,804 26 Total liabilities. Add lines 17 through 25 1,221,470.26 1,273,276 Organizations that follow SFAS 117 (ASC 958), check here ► X and		24	Unsecured notes and loans payable to unrelated	I third p	parties		24	
Schedule D 504,274.25 448,804 26 Total liabilities. Add lines 17 through 25 1,221,470.26 1,273,276 Organizations that follow SFAS 117 (ASC 958), check here X and		25	Other liabilities (including federal income tax, pay	ables	to related third			
26 Total liabilities. Add lines 17 through 25 1,221,470.26 1,273,276 Organizations that follow SFAS 117 (ASC 958), check here ► X and 1			parties, and other liabilities not included on lines	17-24)	. Complete Part X of			440.004
Organizations that follow SFAS 117 (ASC 958), check here X and						504,274.		
		26				1,221,470.	26	1,2/3,2/6.
complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶□ and complete lines 30 through 34. 29 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds					k here ► 🔽 and			
27 Unrestricted net assets 19,243,374.27 23,760,464 28 Temporarily restricted net assets 1,646,667.28 1,783,634 29 Organizations that do not follow SFAS 117 (ASC 958), check here 29 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	sec					10 242 274		22 700 464
28 Temporarily restricted net assets 1,040,007.28 1,703,034 29 Permanently restricted net assets 29 0 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 29 and complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32	ano							
29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶□ 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	Bal					1,040,00/.		1,703,034.
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6 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds	ц		-	SC 958	s), check here ▶			
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	S S							
Y 31 Yald-in or capital surplus, or land, building, or equipment fund 31 Y 32 Retained earnings, endowment, accumulated income, or other funds 32	set							<u> </u>
TATISZ Hetaineg earnings, engowment, accumulated income, or other fungs [32]	As				F			<u> </u>
Z 33 Total net assets or fund balances 20,890,041. 33 25,564,098	Net					20 890 041		25,564,098.
								26,837,374.
		34	TOTAL HADIITIES AND NET ASSETS/TUND DAIANCES			<u> </u>	34	Form 990 (2016)

Form **990** (2016)

	990 (2016) THE INNOCENCE PROJECT, INC.	32-0	077563	Paç	ge 12
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,891		
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,082		
3	Revenue less expenses. Subtract line 2 from line 1	3	3,809		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20,890),0	41.
5	Net unrealized gains (losses) on investments	5	864	<u>1,7</u>	29.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	25,564	1,0	98.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b	Х	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2016)

632012 11-11-16

SCHEDULE A

(Form	990 or	990-EZ
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Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Open to Public
Inspection

OMB No. 1545-0047

20

16

Department of the Treasury Internal Revenue Service

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

Internal Revenue Service	🕨 🕨 Ir
Name of the organizat	ion

Nam	e of t	he organization							identification number	r
_				PROJECT, INC					2-0077563	_
Par	τı	Reason for Public (Charity Status (A	All organizations must co	omplete th	is part.) Se	e instruction	S.		
The c	organ	ization is not a private found	lation because it is: (For lines 1 through 12, o	heck only	one box.)				
1		A church, convention of ch	urches, or associatio	on of churches described	d in sectio	on 170(b)(*	1)(A)(i).			
2		A school described in section	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990 or 9	90-EZ).)				
3		A hospital or a cooperative	hospital service orga	anization described in s e	ection 170	(b)(1)(A)(i	ii).			
4 [A medical research organiz	ation operated in co	njunction with a hospita	l described	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:								
5 [An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a g	overnmental i	unit describ	bed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local gov	• •	nental unit described in a	section 17	70(b)(1)(A)	(v).			
	Х	An organization that norma						he general	public described in	
• •		section 170(b)(1)(A)(vi). (C			ionia gov	orran		ine general		
8		A community trust describe		1)(A)(vi) (Complete Par	+ II)					
9		An agricultural research org				nd in coniu	unction with a	land grant	collogo	
9 1			•					-	-	
		or university or a non-land-g	grant college of agric		Enter the	name, cit	y, and state o	r the colleg		
.		university:								
10		An organization that norma								
		activities related to its exen		• •	. ,					۱t
		income and unrelated busir		(less section 511 tax) fr	om busine	sses acqu	ired by the o	ganization	after June 30, 1975.	
r		See section 509(a)(2). (Cor	mplete Part III.)							
11		An organization organized a	and operated exclus	ively to test for public sa	afety. See	section 50	09(a)(4).			
12		An organization organized a	and operated exclus	ively for the benefit of, to	o perform	the functio	ons of, or to c	arry out the	e purposes of one or	
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section &	5 09(a)(3). C	Check the box in	
		lines 12a through 12d that	describes the type o	f supporting organizatio	n and con	nplete lines	s 12e, 12f, an	d 12g.		
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its sup	ported org	ganization(s),	typically by	<i>y</i> giving	
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	supporting	
		organization. You must o	omplete Part IV. Se	ections A and B.						
b		Type II. A supporting org	-		tion with it	s support	ed organizatio	on(s), by ha	ivina	
		control or management o	-				-		-	
		organization(s). You mus						igo ino oup	portou	
~		Type III functionally inte	-		in connec	tion with	and functiona	lly integrate	ed with	
U		its supported organization						iny integrate	ca with,	
A		л е		· ·	-		-	rtad araani	(a)	
d	L	J Type III non-functionally						-		
		that is not functionally int			•		-	d an attent	iveness	
		requirement (see instruct								
е		Check this box if the orga					а Туре I, Туре	II, Type III		
		functionally integrated, or	••	nally integrated support	ing organi	zation.				
		er the number of supported o	•							
g		vide the following information			(iv) to the error	nization listed				_
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10		nization listed ng document?	(v) Amount of	-	(vi) Amount of other	- \
		organization		above (see instructions))	Yes	No	support (see ir	istructions)	support (see instructions	3)
Tata										_
Total										_

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16 Schedule A (Form 990 or 990-EZ) 2016 13

Schedule A (Form 990 or 990-EZ) 2016 THE INNOCENCE PROJECT, INC.

32-0077563 Page 2

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.)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	8799588.	10532633.	19247376.	14885515.	15595492.	69060604.		
2	Tax revenues levied for the organ-								
	ization'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	8799588.	10532633.	19247376.	14885515.	15595492.	69060604.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						9185941.		
6	Public support. Subtract line 5 from line 4.						59874663.		
Sec	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
7	Amounts from line 4	8799588.	10532633.	19247376.	14885515.	15595492.	69060604.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources	1,827.	2,919.	3,822.	113,837.	237,762.	360,167.		
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.)	157,535.	243,436.	166,203.	255,114.	299,076.			
11	Total support. Add lines 7 through 10						70542135.		
12	Gross receipts from related activities,	etc. (see instructi	ons)			12			
13	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth ta	ax year as a sectio	on 501(c)(3)			
_	organization, check this box and stop	here					▶∟		
Sec	ction C. Computation of Publ	ic Support Pe	rcentage						
	Public support percentage for 2016 (I					14	84.88 %		
	Public support percentage from 2015					15	87.60 %		
1 6a	6a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and								
	stop here. The organization qualifies								
b	b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
	and stop here. The organization qual								
17a	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check t	his box and stop ł	1ere. Explain in Pa	rt VI how the orga	nization		
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supporte	d organization		▶∟		
b	10% -facts-and-circumstances tes	t - 2015. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets the	ne "facts-and-circu	ımstances" test, c	heck this box and	stop here. Explair	n in Part VI how the	e		
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publi	icly supported orga	anization	▶∐		
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instructior	ns ►		
					Scho	dule A (Form 990	or 990-E7) 2016		

Schedule A (Form 990 or 990-EZ) 2016

632022 09-21-16

Schedule A (Form 990 or 990-EZ) 2016 THE INNOCENCE PROJECT, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	((e) 2016	(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 per- formed, 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 bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization'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							
	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received							
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
с	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
ec	tion B. Total Support							
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6						,	
	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							
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
3	Total support. (Add lines 9, 10c, 11, and 12.)							
4	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth ta	ax year as a sectio	n 501	c)(3) organiz	zation,
		-		· · ·	-			
Sec	ction C. Computation of Publi							
	Public support percentage for 2016 (I			column (f))		15		9
	Public support percentage from 2015					16		9
	ction D. Computation of Invest	,	/			<u> </u>		
Sec	-					17		9
	Investment income percentage for ZU					18		9
7	Investment income percentage for 20 Investment income percentage from 2	2015 Schedule A	Part III line 17					,
17 18	Investment income percentage from 2			on line 14 and line			6 and line 1	17 is not
17 18	Investment income percentage from 2 33 1/3% support tests - 2016. If the	organization did n	not check the box	on line 14, and line	e 15 is more than 3	33 1/39		
17 18 19a	Investment income percentage from 2 33 1/3% support tests - 2016. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2015. If the	organization did n nd stop here. The organization did n	not check the box organization qua not check a box or	on line 14, and line lifies as a publicly s n line 14 or line 19a	e 15 is more than 3 supported organiz a, and line 16 is mo	ation ore tha	n 33 1/3%,	and
17 18 19a b	Investment income percentage from 2 33 1/3% support tests - 2016. If the more than 33 1/3%, check this box an 33 1/3% support tests - 2015. If the line 18 is not more than 33 1/3%, check	organization did n nd stop here. The organization did n ock this box and s i	not check the box organization qua not check a box or top here. The org	on line 14, and line lifies as a publicly s n line 14 or line 19a anization qualifies	a 15 is more than 3 supported organiz a, and line 16 is mo as a publicly supp	33 1/39 ation ore tha orted o	n 33 1/3%, organization	and ►□
17 18 19a b 20	Investment income percentage from 2 33 1/3% support tests - 2016. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2015. If the	organization did n nd stop here. The organization did n ock this box and s i	not check the box organization qua not check a box or top here. The org	on line 14, and line lifies as a publicly s n line 14 or line 19a anization qualifies	15 is more than 3 supported organiz a, and line 16 is more as a publicly supp his box and see instantion	ation ore tha orted o	n 33 1/3%, organization	and ►□

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990-EZ) 2016 THE INNOCENCE PROJECT, INC. Part IV Supporting Organizations (continued)

			Vee	Na
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
	A family member of a person described in (a) above?	11b		
	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 .	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	_		
-	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	stion E. Type III Functionally Integrated Supporting Organizations	5		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
' a	The organization satisfied the Activities Test. <i>Complete line 2</i> below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)	
2	Activities Test. Answer (a) and (b) below.	lottorio	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	
	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.	2a		
h		<u>2</u> a		
b	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			
		26		
0	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а		A -		
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	~		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
63202	5 09-21-16 Schedule A (Form 9	90 or 99	9U-EZ)	2016
	\perp /			

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain test as a qualifying trust on Nov. 20, 1970 (explain test as a qualifying trust on Nov. 20, 1970 (explain test as a qualifying test as a qualifying test as a qualifying tes as a qualifying test as a q

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

ection	A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Ne	et short-term capital gain	1		
2 Re	ecoveries of prior-year distributions	2		
3 Ot	her gross income (see instructions)	3		
4 Ac	dd lines 1 through 3	4		
5 De	epreciation and depletion	5		
6 Pc	ortion of operating expenses paid or incurred for production or			
со	llection of gross income or for management, conservation, or			
ma	aintenance of property held for production of income (see instructions)	6		
7 Ot	her expenses (see instructions)	7		
8 Ac	Ijusted 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 Ag	gregate fair market value of all non-exempt-use assets (see			
ins	structions for short tax year or assets held for part of year):			
a Av	rerage monthly value of securities	1a		
b Av	rerage monthly cash balances	1b		
c Fa	ir market value of other non-exempt-use assets	1c		
d To	tal (add lines 1a, 1b, and 1c)	1d		
e Di	scount claimed for blockage or other			
fac	ctors (explain in detail in Part VI):			
2 Ac	equisition indebtedness applicable to non-exempt-use assets	2		
3 Su	ubtract line 2 from line 1d	3		
4 Ca	ash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
se	e instructions)	4		
5 Ne	et value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Mu	ultiply line 5 by .035	6		
7 Re	ecoveries of prior-year distributions	7		
8 Mi	inimum Asset Amount (add line 7 to line 6)	8		
Section	C - Distributable Amount			Current Year
1 Ac	ljusted net income for prior year (from Section A, line 8, Column A)	1		
2 En	ter 85% of line 1	2		
3 Mi	nimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 En	ter greater of line 2 or line 3	4		
5 Inc	come tax imposed in prior year	5		
6 Di	stributable Amount. Subtract line 5 from line 4, unless subject to			
en	nergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integra	ated Type III supporting or	panization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2016

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Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
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	he organization is responsive	e	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
-	From 2013			
-	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$ Applied to underdistributions of prior years			
	Applied to 2016 distributions of phoryears			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
J	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
U	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
a				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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Part VI	(Form 990 or 990-EZ) 2016 THE Supplemental Informatic	DR. Provide the explanation	nations required b	by Part II, line 10; Pa	rt II, line 17a or 17b; Part	III, line 12;
	Part IV, Section A, lines 1, 2, 3b, line 1; Part IV, Section D, lines 2 Section D, lines 5, 6, and 8; and	and 3; Part IV, Section	n E, lines 1c, 2a, 2	2b, 3a, and 3b; Part	V, line 1; Part V, Section I	3, line 1e; Part \
	(See instructions.)					
2028 09-21-1	0				Schedule A (Form	000 or 000 E7

SCHEDULE C	Political Campaign and Lobbying Activities	╞
(Form 990 or 990-EZ)	For Organizations Exempt From Income Tax Under section 501(c) and section 527	

Department of the Treasury Internal Revenue Service

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.

16 20 **Open to Public** Inspection

OMB No. 1545-0047

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 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (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	

Nan	ne of orga	nization				Emplo	yer identification	on number
			OCENCE PROJECT, I				32-0077	563
Pa	art I-A	Complete if the org	panization is exempt unde	r section 501(c)	or is a section 5	527 or	ganization.	
1	Provide a	a description of the organiz	ation's direct and indirect political	l campaign activities i	n Part IV.			
2	Political	campaign activity expendit	ures			.►\$		
3	Voluntee	r hours for political campai	ign activities					
	art I-B	Complete if the org	panization is exempt unde	r section 501(c)((3).			
1	Enter the	e amount of any excise tax	incurred by the organization unde	r section 4955		▶\$_		
			incurred by organization manager					
3	If the org	anization incurred a sectio	n 4955 tax, did it file Form 4720 fo	or this year?			Yes	L No
4a	Was a co	prrection made?					Ves	No No
_	/	describe in Part IV.						
	art I-C		anization is exempt unde		-	-		
1		• •	d by the filing organization for sect	-		.►\$_		
2	Enter the	e amount of the filing organ	ization's funds contributed to othe	er organizations for se	ection 527			
	•					▶\$_		
3	Total exe	empt function expenditures	s. Add lines 1 and 2. Enter here an	d on Form 1120-POL,				
4			1120-POL for this year?					L No
5			nployer identification number (EIN)		-			
	•	, 0	tion listed, enter the amount paid	00				
			omptly and directly delivered to a	· · ·		separate	e segregated fui	nd or a
	political	. ,	additional space is needed, provic		IV.			
		(a) Name	(b) Address	(c) EIN	(d) Amount paid t		(e) Amount of	
					filing organizatio funds. If none, ent		contributions re promptly and	
							delivered to a	separate
							political orga	
							If none, en	lei -U

For Paperwork Reduction Act Notice,	0 or 990-EZ.	Schedule C	(Form 990 or 990-EZ) 2016	

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Schedule C ((Form 990 or 990-EZ)	2016 THE	INNOCENCE	PROJECT,	INC.	3
Part II-A	Complete if th	e organiza	tion is exempt	under section	501(-)(3)	and filed Form 576

Pa		led Form 5768 (el	ection under								
	section 501(h)).										
A C	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).										
BC	B Check 🕨 🔲 if the filing organization checked box A and "limited control" provisions apply.										
	(The ter		oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals						
1a	Total lobbying expendit	ures to influence pub	lic opinion (grass roots lobbying)	371.							
			gislative body (direct lobbying)	592,025.							
с			d 1b)	592,396.							
d			<i>.</i>	11,490,273.							
е	Total exempt purpose e		s 1c and 1d)	12,082,669.							
f			unt from the following table in both columns.	754,133.							
	If the amount on line 1e,		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 no	ot over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.								
	Over \$1,500,000 but no										
	Over \$17,000,000										
g	Grassroots nontaxable	188,533.									
h	Subtract line 1g from lir	ne 1a. If zero or less, e	enter -0-	0.							
i	Subtract line 1f from lin	e 1c. If zero or less, e	nter -0-	0.							
j	If there is an amount ot	her than zero on eithe	r line 1h or line 1i, did the organization file Form 4720								
	reporting section 4911	tax for this year?			Yes 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 Exponditures During 4-Year Averaging Beriod

	Lobbying Expen	ditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	649,729.	650,406.	694,022.	754,133.	2,748,290.
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					4,122,435.
c Total lobbying expenditures	442,229.	456,766.	561,464.	592,396.	2,052,855.
d Grassroots nontaxable amount	162,432.	162,602.	173,506.	188,533.	687,073.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,030,610.
f Grassroots lobbying expenditures	11,021.	8,702.	1,204.	371.	21,298.

Schedule C (Form 990 or 990-EZ) 2016

632042 11-10-16

Schedule C (Form 990 or 990-EZ) 2016 THE INNOCENCE PROJECT, INC.

32-0077563 Page 3

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 e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k)
of the	obbying activity.	Yes	No	Amo	ount
1 a	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: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
i	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5	i), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		. 1		
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 campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5	i), or se	ection	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OR	(b) Par	t III-A, lir	ne 3, is
1	Dues, assessments and similar amounts from members		. 1		
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).				
а	Current year		2a		
	Carryover from last year				
	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 exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		. 4		
5	Taxable amount of lobbying and political expenditures (see instructions)				
Par	t IV Supplemental Information				
Provi	de 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 a	and 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2016

632043 11-10-16

	HEDULE D n 990)	Complete if the org	al Financial Statements anization answered "Yes" on Form 990, 1, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		OMB No. 1545-0047					
	ment of the Treasury	Open to Public Inspection								
Internal Revenue Service Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer ic										
THE INNOCENCE PROJECT, INC. 32-0077563										
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete										
	organizatio	n answered "Yes" on Form 990, Part IV, lin	ne 6.							
			(a) Donor advised funds	(b) Fur	nds and other accounts					
1		nd of year								
2		of contributions to (during year)								
3 4		of grants from (during year)								
4 5		at end of year	l I writing that the assets held in donor advised	funds						
Ū	-		exclusive legal control?		Yes No					
6			advisors in writing that grant funds can be use							
	for charitable purp	poses and not for the benefit of the donor o	or donor advisor, or for any other purpose co	nferring						
_	impermissible priv				Yes No					
Pa			ganization answered "Yes" on Form 990, Par	t IV, line 7	7					
1		servation easements held by the organizat		- 11	stand land and					
		n of land for public use (e.g., recreation or e of natural habitat	education) Preservation of a historic							
		n of open space			Siluciale					
2		• •	fied conservation contribution in the form of a	a conserv	ation easement on the last					
	day of the tax yea				Held at the End of the Tax Year					
а	Total number of c	onservation easements		2 a						
b										
с			ructure included in (a)							
d			after 8/17/06, and not on a historic structure							
3		nal Register	leased, extinguished, or terminated by the or	2d	h during the tex					
3	vear	valion easements modified, transferred, re	leased, extinguished, or terminated by the or	ganizatio	in during the tax					
4		where property subject to conservation ea	sement is located ►							
5		tion have a written policy regarding the pe								
	violations, and ent	forcement of the conservation easements i	it holds?		Yes No					
6	Staff and voluntee	er hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservations	vation ea	sements during the year					
	▶									
7	. .	ses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	n easeme	ents during the year					
Q	►\$	aution assement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(P)(i)						
8					Yes No					
9			ion easements in its revenue and expense sta							
		-	tion's financial statements that describes the							
	conservation ease									
Pa		_	f Art, Historical Treasures, or Othe	er Simi	lar Assets.					
		f the organization answered "Yes" on Form								
1 a	•		SC 958), not to report in its revenue statemer							
		s, or other similar assets held for public exit to the to its financial statements that descri	hibition, education, or research in furtherance	o publi	service, provide, in Part XIII,					
b			SC 958), to report in its revenue statement ar	id balanc	e sheet works of art historical					
5	-		ducation, or research in furtherance of public							
	relating to these it			,						
	-				\$					
					\$					
2	If the organization	received or held works of art, historical tre	asures, or other similar assets for financial ga							
	-	unts required to be reported under SFAS 1			•					
a					\$					
b	ASSETS INCIDED IN	1 FUITH 990, Part X		🕨	Φ					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 632051 08-29-16

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Schedule D (Form 990) 2016

Partial Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets::::::::::::::::::::::::::::::::::	Sche	dule D (Form 990) 2016 THE INN	OCENCE PROJ	JECT	, INC.				32-00	7756	3 _{Pa}	age 2
clearek at that apply: a Pole exhibition b Scholarly research c Prevelate exhibition d Loan or exchange programs e Other c Prevelate exciption of the organization is collections and explain how they further the organization is exempt purpose in Part XIII. 5 Uning the year, did the organization is collection? Image: Collection? Part V Escrow and Custodial Arrangements. Complete if the organization collection? Image: Collection? 14 Is the organization analyset, frustee, custodian or other intermediary for contributions or other assets not included on form 990, Part X, line 21. Image: Collection? 15 If the organization analyset, frustee, custodian or offer intermediary for contributions or other assets not included on form 990, Part X, line 21. Image: Collection? 16 Distributions during the year 1mage: Collection? Image: Collection? 28 Distributions during the year 1mage: Collection? Yes: Mob 9 If Yes: explain the arrangement in Part XIII. Check here if the explanation included on Part XIII Previde Additions during the year 16 Ending balance 1a, 068, 706, 14, 001, 629, 3, 082, 449, 1, 2, 039, 158, 1, 089, 109, 109, 109, 100, 100, 100, 100, 10	Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	torical Tr	easures, c	or Othe	er Simil	ar Asse	ts (contir	nued)	
b Scholary research e Other	3		on, and other records	s, check	k any of the	following that	t are a si	gnificant	use of its	collectio	n item	S
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV. Ine 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodial arrangements. Compute if the organization answered "Yes" on Form 990, Part X v. Ine 9, or Yes No 1a Is the organization an agent, trustee, custodial arrangement in Part XIII and complete the following table: Yes No 1b If "Yes," explain the arrangement in Part XIII and complete the following table:	а	Public exhibition	d	Lι	Loan or exc	hange progra	ims					
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, dit do organization sciol corrective 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 answered 'Yes' on Form 990, Part IV. Ine 9, or reported an amount on Form 990, Part X, Ine 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part X2 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part X2 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part X2 Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability? In the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability? If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Beginning of year balance Is does 7065, 14, 601, 622, 3, 082, 443, 1, 809, 103, 1, 809, 109, 109, 109, 109, 109, 109, 109, 1	b	Scholarly research	e		Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets	с	Preservation for future generations										
to be sold to raise funds rather than to be maintained as part of the organization accelection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part V, line 9, or reported an amount on Form 980, Part X, line 21. Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X, line 21. Ves No b If 'Yes, ' explain the arrangement in Part XIII and complete the following table: Amount Yes No c Beginning balance 1d Amount Id <	4	Provide a description of the organization's co	ollections and explain	how th	ey further t	he organizatio	on's exer	mpt purp	ose in Parl	XIII.		
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. Ia Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X // Image. A state of the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X // Image. A state of the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Admount Image: Part V // Image: Part X// Image: Part	5	During the year, did the organization solicit o	r receive donations o	of art, his	storical trea	sures, or othe	er similar	assets		_		_
Teported an amount on Form 990, Part X, line 21. 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 Yes No c Beginning balance 1d Amount Id Id <th></th> <th>No</th>												No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X7 Ves No b If "ves," explain the arrangement in Part XIII and complete the following table: Amount Amount c Beginning balance 1c Amount 1d d Additions during the year 1d 1d 1d 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account tabitity? Yes No b If "ves," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Image: the provide on Part XIII Image: the provide on Part XIII Image: the provide on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1, 809, 109.2, 449.1, 1, 809, 109.2, 449.1, 1, 809, 109.2, 449.1, 1, 809, 109.2, 449.1, 1, 809, 109.2, 449.1, 1, 809, 109.2, 449.1, 1, 809, 109.2, 449.1, 1, 809, 109.2, 449.1, 1, 809, 109.2, 449.2, 1, 809, 109.2, 449.2, 1, 809, 109.2, 449.2, 1, 809, 109.2, 449.2, 1, 809, 109.2, 449.2, 1, 809, 109.2, 449.2, 1, 809, 109.2, 449.2, 1, 809, 109.2, 449.2, 1, 809, 10	Par			te if the	organizatio	n answered "	'Yes" on	Form 990), Part IV,	ine 9, or		
on Form 990, Part X? Yes No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance Id d Additions during the year Id e Distributions during the year Id g 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 IV, line 10. Image: Complete if 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 IV, line 10. Image: Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Image: Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. c Net investment earnings, gains, and losses Image: Complete if the organization instanted percentage of the current year end balance (line 1g, column (a) held as: Image: Complete if the organization instanted percentage of the current year end balance (line 1g, column (a) held as: Board designated or quasizations 100.00 % Monitorative expenses Image: Complete if the organization is set as required on Schedule P? c Temporarily restricted endowment > % Monitorative expensization is 2a, 2b, and 2c should												
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount a Beginning balance It It Distributions during the year It Distributions during the year It It Distributions during the year It Distributions during the year It Distributions during the year It Dif thes: "axplain 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 X, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. Part years back (e) Four years back (or four year bac	1a									-		-
c Beginning balance Id d Additions during the year Id e Distributions during the year Id 2 Distributions during the year If 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 nawsered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Check here if the explanation answered "Yes" on Form 990. Part XIII. Image: Chec									L	Yes		No
c Beginning balance Ic Id d Additions during the year Id Id Distributions during the year Ie If 2a Distributions during the year Ie If Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. Ie Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. Ie Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. Ie b Grants or scholarships Ie Ie Ie c Other expenditures for facilities Ie Ie Ie Ie and programs Ie	b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing t	able:							
d Additions during the year 1d e Distributions during the year 1e 1 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part N, line 10. Image: Complete if the organization answered 'Yes' on Form 990, Part N, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back 1a Grants or scholarships (a) Current year (b) Prior year (c) Two years back (e) Four years back 1d Grants or scholarships (a) Current year (b) Prior year (c) Two years back (e) Four years back 2 For do year balance 21, 620, 304, 18, 068, 706, 14, 801, 629, 3, 082, 449, 1, 809, 109. (c) Four year and programs 2 Forwide the estimated percentage of the current year end balance (line 1g, column (a)) held as: (b) Prior year (c) Four year 2 Forwide the estimated percentage of the current year end balance (f) or elated organizations (f) related organizations (f) related organizations <td< th=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>Amoun</td><td>t</td><td></td></td<>										Amoun	t	
e Distributions during the year 1e f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Ves No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (d) Three years back (e) Four years back 1a Beginning of year balance 18,068,706,14,801,629,3,082,449,1,090,109,1,809,109,1 1,809,109,1 b Contributions 3,551,598,3,267,077,111,719,180,1,273,340,0 1,809,109,1 c Other expenditures for facilities												
f Ending balance 11 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Ves", explain the arrangement in Part XII. Check here if the explanation has been provided on Part XII. Image: Second												
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 K, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 18,068,706,14,801,629,3,082,449,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,809,109,1,800,109,1,809,109,1,800,100,1,800,109,1,800,109,1,800,109,1,800,10	е											
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 900, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior years (c) Two years back. (d) Finer years 1a Beginning of year balance (a) Current year (c) Two years back. (d) Finer years (e) Four years back. (e) Four										1		
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (c) Fuor years (c) Two years back (c) Two years back (c) Two years back (c) Two years		-						• • • • • • • • • • • • • • • • • • • •	L	Yes		No
Image: constraint of the expenditures of facilities and programs (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back Image: constraint of the expenditures of facilities and programs 3,551,598. 3,267,077. 11,719,180. 1,273,340. Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image: constraint of the expenditures for facilities and programs Image	_								<u></u>			
1a Beginning of year balance 18,068,706. 14,801,629 3,082,449 1,809,109. 1,809,109. b Contributions 3,551,598. 3,267,077. 11,719,180. 1,273,340. c Net investment earnings, gains, and losses	Par	LV Endowment Funds. Complete in	-							() [h a a lu
b Contributions 3,551,598. 3,267,077. 11,719,180. 1,273,340. c Net investment earnings, gains, and losses			())	. ,	,			.,				
c Net investment earnings, gains, and losses		r								L	,009,	109.
d Grants or scholarships Chter expenditures for facilities and programs 1 f Administrative expenses 21, 620, 304. g End of year balance 21, 620, 304. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00 % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: % (i) unrelated organizations % j Period in Park XIII the intended uses of the organization's endowment funds.			3,331,390.	3	,207,077.	11,/19	,100.	1,2	13,340.			
e Other expenditures for facilities and programs												
and programs												
f Administrative expenses 21,620,304. 18,068,706. 14,801,629. 3,082,449. 1,809,109. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00% b Permanent endowment ▶ % % Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % %	е											
g End of year balance 21,620,304. 18,068,706. 14,801,629. 3,082,449. 1,809,109. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00 % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % 7 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 (iii) related organizations (ii) related organizations (ii) related organizations algoing are the related 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. (d) Book value basis (investment) b Buildings		· - · · · · · · · · · · · · · · · · · ·										
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00 % b Permanent endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment thus not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) 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. Description of property (a) Cost or other basis (investment) (b) Cost or other depreciation (c) Accumulated depreciation 1a Land buildings C Leasehold improvements 741, 657. 388, 362. 353, 295. d Equipment 1, 803, 681. 1, 468, 408. 335, 273. d Equipment (D) must equal Form 990, Part X, column (B), line 10c. 691, 954.		r	01.000.004	1.0	0.00 0.00	14 001	600		00.440		0.0.0	100
a Board designated or quasi-endowment ▶ 100.00 % 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 % 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.	-						.,629.	3,0	82,449.	1	,809,	109.
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 Yes No (ii) unrelated organizations 3a(i) X X 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 3b 3b 3b 3b 3b 3b 3b 3c					g, column (a	a)) held as:						
c Temporarily restricted endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:		• • •		_%								
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 (iii) related organizations (ii) related organizations (ii) related organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) related organizations is endowment funds. (iii) Cost or other related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (c) Accumulated depreciation depreciation (d) Book value basis (other) (e) Cost or other basis (other) (b) Buildings (c) Leasehold improvements (c) Accumulated related relate												
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) unrelated organizations 3a(i) X (ii) related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 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. (d) Book value 1a Land basis (investment) basis (other) (d) Book value b Buildings 741, 657. 388, 362. 353, 295. d Equipment 1, 803, 681. 1, 468, 408. 335, 273. e Other 3, 386. 3, 386. 3, 386.	С											
by: (i) unrelated organizations (ii) related organizations 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. Description of property (a) Cost or other b Buildings c Leasehold improvements c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	~											
(i) unrelated organizations 3a(i) X (ii) related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b Part VI Land, Buildings, and Equipment. 3b 3b 3c Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other (b) Cost or other (c) Accumulated b Buildings 5 5 3 2.295. c Leasehold improvements 741,657. 388,362. 353,295. d Equipment 1,803,681. 1,468,408. 335,273. e Other 3,386. 3,386. 3,386. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 691,954.	за		ssion of the organiza	ition tha	it are neid a	nd administe	rea tor tr	ne organi	zation	T	Vee	
(ii) related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 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. (d) Book value Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 1a Land 1 1 5 3 3 b Buildings 1 741,657. 388,362. 353,295. c Leasehold improvements 1,803,681. 1,468,408. 335,273. e Other 3,386. 3,386. 3,386. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 691,954.		-								0-(1)	Yes	
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. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (other) basis (other) (c) Accumulated depreciation (d) Book value basis (other) (c) Accumulated depreciation (d) Book value basis (other) (c) Accumulated depreciation (d) Book value basis (other) (c) Accumulated depreciation (c) Accumulated (c)												
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings (d) Book value c Leasehold improvements 741,657.388,362.353,295. d Equipment 1,803,681.1,468,408.335,273. e Other 3,386. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 691,954.		(II) related organizations										<u></u>
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land										30		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land				wmenti	iunas.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	I ui			Part IV	/line11a S	See Form 990	Part X	line 10				
Image: Second system Desis (investment) Desis (other) depreciation 1a Land b Buildings c Leasehold improvements 741,657.388,362.353,295. d Equipment 1,803,681.1,468,408.335,273. e Other 3,386. 3,386. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 691,954.									bd	(d) Boo	k valu	
1a Land		Description of property					• •			(u) D00	r valu	6
b Buildings 741,657.388,362.353,295. c Leasehold improvements 741,657.388,362.353,295. d Equipment 1,803,681.1,468,408.335,273. e Other 3,386.363.386.363.386.3386.3886.3386.338	1a	Land		-7		· · · ·						
c Leasehold improvements 741,657. 388,362. 353,295. d Equipment 1,803,681. 1,468,408. 335,273. e Other 3,386. 3,386. 3,386. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 691,954.												
d Equipment 1,803,681. 1,468,408. 335,273. e Other 3,386. 3,386. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 691,954.					74	1,657.		388.3	62.	35	3.2	95.
e Other 3,386. 3,386. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ► 691,954.												
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)							-,-	/-				
				X. colum								
			coo, . art ,	, - 5.411					Schedule			

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Schedule D (Form 990) 2016 THE LINNOCEN	CE PROJECT,	INC.	52-00//565 Page
Part VII Investments - Other Securities.			×
Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11b. See Form 990, I	Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	luation: 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. (Col. (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, lir	ne 11c. See Form 990, F	Part X, line 13.
(a) Description of investment	(b) Book value		luation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11d. See Form 990, I	Part X, line 15.
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			

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

Part X Other Liabilities.

(8) (9)

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	(d) Bo	ok value
(1) Federal incom	ie taxes		
(2) DEFERRE	D RENT CREDIT	4	48,804.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) mu	st equal Form 990, Part X, col. (B) line 25.)	► 4	48,804.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 2. 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 🚺

Schedule D (Form 990) 2016

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Sche	edule D (Form 990) 2016 THE INNOCENCE PROJECT, INC.			32-	0077563 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statement	ts Wi	th Revenue per F		
	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	37,837,395.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	864,729.		
b	Donated services and use of facilities	2b	21,080,671.		
с	Recoveries of prior year grants	2c			
d		2d			
е	Add lines 2a through 2d			2e	21,945,400.
3	Subtract line 2e from line 1			3	15,891,995.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			_
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	15,891,995.
_					
Pa	rt XII Reconciliation of Expenses per Audited Financial Statemen	nts W			
Pa	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		ith Expenses per	Retu	irn.
Pa 1	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements		ith Expenses per		
	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:		ith Expenses per	Retu	irn.
1 2 a	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities		ith Expenses per	Retu	irn.
1 2 a b	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments		ith Expenses per	Retu	irn.
1 2 a b c	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	ith Expenses per	Retu	irn.
1 2 a b c d	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	ith Expenses per 21,080,671.	1	ırn. 33,163,338.
1 2 a b c d	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	ith Expenses per 21,080,671.	Retu	rn. 33,163,338. 21,080,671.
1 2 a b c d	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	ith Expenses per 21,080,671.	1	ırn. 33,163,338.
1 2 b c d e	rt XII Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	ith Expenses per 21,080,671.	1	rn. 33,163,338. 21,080,671.
1 2 3 4 3	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	ith Expenses per 21,080,671.	1	rn. 33,163,338. 21,080,671.
1 2 3 4 3 4 b	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	ith Expenses per 21,080,671.	1	rn. 33,163,338. 21,080,671. 12,082,667.
1 2 3 4 3 4 b	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	ith Expenses per 21,080,671.	Retu 1 2e 3 4c	rn. 33,163,338. 21,080,671. 12,082,667. 0.
1 2 a b c d e 3 4 a b c 5	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	ith Expenses per 21,080,671.	Retu 1 2e 3	rn. 33,163,338. 21,080,671. 12,082,667.

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.

PART V, LINE 4:

BOARD-DESIGNATED NET ASSETS ARE RESTRICTED BY THE BOARD OF DIRECTORS FOR
CASH RESERVE PURPOSES AND TO FUND UNANTICIPATED PROJECTS THAT FURTHER THE
WORK OF THE INNOCENCE PROJECT. INCOME EARNED ON THESE FUNDS IS
UNRESTRICTED. TRANSFERS FROM THIS FUND ARE PART OF A BOARD-APPROVED
FUNDING PLAN FOR THE ORGANIZATION. BOARD-DESIGNATED CAMPAIGN FOR JUSTICE
INCLUDE FUNDS DESIGNATED BY THE BOARD TO ENSURE THE ONGOING FINANCIAL
HEALTH OF THE INNOCENCE PROJECT AND TO ALLOW THE ORGANIZATION TO TAKE
ADVANTAGE OF NEW AND UNANTICIPATED OPPORTUNITIES AS THEY ARISE. INCOME
EARNED ON THESE FUNDS IS UNRESTRICTED AND BOARD APPROVAL IS NECESSARY FOR
ANY FUNDS WITHDRAWN.

632054 08-29-16

THE INNOCENCE PROJECT, INC.

PART X, LINE 2:

Part XIII Supplemental Information (continued)

MANAGEMENT HAS REVIEWED THE TAX POSITIONS FOR EACH OF THE OPEN TAX YEARS

(2014-2016) OR EXPECTED TO BE TAKEN IN THE ORGANIZATION'S 2017 TAX RETURN

AND HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS

THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2016

632055 08-29-16

SCHEDULE G	Sunn	lomo	ntol Infor	motion Boo	ardina	Euro	droio	ing or Gaming	A ati		OMB No. 1545-0047
(Form 990 or 990-EZ)				-				Part IV, line 17, 18, o			2016
Department of the Treasury Internal Revenue Service	Inform		-	Attach to F	orm 990	or Fo	rm 99		nov/fr	orm990	Open to Public Inspection
•									lentification number		
				PROJEC						32-007	
Part I Fundrais required to				the organization	on answe	ered "Y	'es" or	n Form 990, Part IV,	line 1	7. Form 990-I	EZ filers are not
 Indicate whether th X Mail solicitat X Internet and X Phone solicitat X In-person so 2 a Did the organization key employees list b If "Yes," list the 10 compensated at let 	tions email solici tations licitations on have a w red in Form) highest pa	itations ritten c 990, P iid indiv	s or oral agreen art VII) or ent viduals or ent	e X f X g X nent with any i ity in connecti itites (fundraise] Solicitat] Solicitat] Special individual	tion of tion of fundra (inclue	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru undraising services?	stees	Ye	
(i) Name and addres or entity (fund	s of individu	-		(ii) Activity		(iii) fundr have ci or con contribu	aiser ustody	(iv) Gross receipts from activity	to (o	Amount paid or retained by fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
CMI - 1325 SIXTH AT NEW YORK, NY 1001	-		BENEFIT EVENT CONSULTANT		Yes	No X	0.	. 64,1		-64,117.	
	<u> </u>				111111					04,11,	
_											
Total										64,117	-64,117.
3 List all states in whi or licensing.	ich the orga	anizatio	on is registere	ed or licensed t	to solicit (contrib	outions	s or has been notifie	d it is	exempt from	registration

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2016

632081 09-12-16

14310119 758275 3167.000

 Schedule G (Form 990 or 990-EZ) 2016
 THE INNOCENCE PROJECT, INC.
 32-0077563
 Page

 Part II
 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		of fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	
				YOUNG		(d) Total events
			GALA	PROFESSIONAL	1	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
	1	Gross receipts	2,074,650.	164,393.	262,181.	2,501,224
	2	Less: Contributions	1,861,750.	164,393.	262,181.	2,288,324
	3	Gross income (line 1 minus line 2)	212,900.			212,900
	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	246,584.	34,560.		281,144
	7	Food and beverages		93.	6,581.	6,674
'	8	Entertainment				
	9	Other direct expenses		7,230.		165,274
	10				►	453,092
	11		line 3, column (d)			-240,192
т	rt	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	1	(b) Pull tabs/instant		(-D) Tatal manipus (ad
			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (ad- col. (a) through col. (d
	1	Gross revenue				
T						
	2	Cash prizes				
חווברו באחבוואבא	~	F				
-	3	Noncash prizes				
-		Noncash prizes				
-	3 4 5	Noncash prizes	└── Yes% └── No	└── Yes% └── No	Yes % No	
	3 4 5	Noncash prizes Rent/facility costs Other direct expenses	No		□ No	
	3 4 5 6	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	h 5 in column (d)	No No	□ No ►	
	3 4 5 7 8	Noncash prizes	h 5 in column (d)	No No	□ No ►	
	3 4 5 7 8 En	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throug	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: _	No No	No ►	Yes N
a	3 4 5 6 7 8 En ⁻ Is 1	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throug Net gaming income summary. Subtract line 7 iter the state(s) in which the organization cond	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: _ uctivities in each of these	No No	No ►	Yes N
ab	3 4 5 6 7 8 En ¹ Is 1 If "	Noncash prizes	No N	states?	No	
ab	3 4 5 6 7 8 8 Is 1 If "	Noncash prizes	No No Solumn (d) Solumn (d) Solumn (d) Solution Soluti	states?	No	
ab	3 4 5 6 7 8 8 Is 1 If "	Noncash prizes	No No Solumn (d) Solumn (d) Solumn (d) Solution Soluti	states?	No	

<u>Sch</u>	edule G (Form 990 or 990-EZ) 2016 THE INNOCENCE PROJECT, INC. 32	2-007	<u>7563</u>	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	L	Yes	No No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
b	An outside facility	13 b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party ►\$			
с	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	L	Yes	└── No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ne		
	organization's own exempt activities during the tax year 🕨 \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	III, lines 9	, 9b, 1	0b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions			
6320	33 09-12-16 Schedule G (Form 990	or 990)-EZ) 2016
	36 110 758275 3167 000 - 2016 05030 THE INNOCENCE DECTECT	TNO	210	7 0 0 1

14310119 758275 3167.000

	Supplemental	1		111001017	
Schedule G	(Form 990 or 990-EZ	THE	INNOCENCE	PROJECT.	INC.

332084 14-01-16						rm 990 or 990-EZ
310119 758275 3167.000	2016.05030	37 THE	INNOCENCE	PROJEC	T. INC.	3167 001

sc	HEDULE J		OMB No. 1545-0047					
(Fo	rm 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest		20	16			
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	IU)		
Depa	tment of the Treasury	Attach to Form 990.		Open to Public				
Intern	al Revenue Service	Information about Schedule J (Form 990) and its instructions is at www.irs.gov/fo		Inspection				
Nan	e of the organizatio			identificati		mber		
D		THE INNOCENCE PROJECT, INC.	32-	007756	3			
Pa	rt I Question	s Regarding Compensation						
	<u> </u>				Yes	No		
та		iate box(es) if the organization provided any of the following to or for a person listed on Forn	n 990,					
	First-class or	line 1a. Complete Part III to provide any relevant information regarding these items.						
	Travel for con	r						
		cation and gross-up payments I Health or social club dues or initiation fee						
		spending account Personal services (such as, maid, chauffe						
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or						
~	•	provision of all of the expenses described above? If "No," complete Part III to explain		1b				
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
		ers, including the CEO/Executive Director, regarding the items checked on line 1a?		2				
	,							
3	Indicate which, if a	ny, of the following the filing organization used to establish the compensation of the organiz	ation's					
	CEO/Executive Dir	ector. Check all that apply. Do not check any boxes for methods used by a related organizat	ion to					
	establish compens	ation of the CEO/Executive Director, but explain in Part III.						
	Compensatio	n committee Written employment contract						
	Independent	compensation consultant <u>X</u> Compensation survey or study						
	X Form 990 of c	ther organizations	committee					
4		d any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
	-	elated organization:				v		
a		ce payment or change-of-control payment?				X X		
b		ceive payment from, a supplemental nonqualified retirement plan?				X		
С	-	ceive payment from, an equity-based compensation arrangement?		4c				
	If "Yes" to any of I	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on					
•	contingent on the							
а	-			5a		X		
		zation?				X		
		or 5b, describe in Part III.						
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on					
	contingent on the	net earnings of:						
а		-		6a		Х		
b		zation?				X		
		or 6b, describe in Part III.						
7	-	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment						
		nes 5 and 6? If "Yes," describe in Part III		7		X		
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to						
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III					X		
9		lid the organization also follow the rebuttable presumption procedure described in						
		n 53.4958-6(c)?						
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sche	dule J (Forr	n 990) 2016		

632111 09-09-16

32-0077563

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(I)-(D)	reported as deferred on prior Form 990
(1) MADELINE DELONE	(i)	241,463.	0.	0.	8,931.	23,323.	273,717.	0.
EXECUTIVE DIRECTOR/SECRETA	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CANDICE CARNAGE	(i)	144,562.	0.	0.	5,918.	10,986.	161,466.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) REBECCA BROWN	(i)	141,802.	0.	0.	5,674.	10,986.	158,462.	0.
POLICY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) AUDREY LEVITIN	(i)	157,481.	0.	0.	6,601.	23,798.	187,880.	0.
DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ANGELA AMEL	(i)	146,426.	0.	0.	6,095.	23,711.	176,232.	0.
DIRECTOR OF OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MERYL SHWARTZ	(i)	171,534.	0.	0.	7,139.	23,663.	202,336.	0.
DEPUTY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) PAUL CATES	(i)	147,466.	0.	0.	5,900.	10,944.	164,310.	0.
COMMUNICATIONS DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Schedule J (Form 990) 2016

SCHEDULE O	Supplemental Information to Form 990 or 990	-EZ	OMB No. 1545-0047							
(Form 990 or 990-EZ)	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.		2010							
Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at WWW.irs.gov/form990.										
Name of the organization Employer identification number THE INNOCENCE PROJECT, INC. 32-0077563										
FORM 990, PA	RT III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION	:							
CARDOZO SCHO	OL OF LAW AT YESHIVA UNIVERSITY AND INCORPORA	TED AS	ITS OWN							
501(C)3 ORGA	NIZATION IN 2004. THE INNOCENCE PROJECT MAINT	AINS A	STRONG							
PARTNERSHIP	WITH CARDOZO THROUGH ITS CLINIC, WHICH TRAINS	LAW S	TUDENTS							
IN INNOCENCE	-RELATED MATTERS. TO DATE, 351 PEOPLE IN THE	UNITED	STATES							
HAVE BEEN EX	ONERATED BY DNA TESTING, INCLUDING 20 WHO SER	VED TI	ME ON							
DEATH ROW. T	HE INNOCENCE PROJECT WORKED ON MORE THAN 200	OF THO	SE							
CASES. THE E	XONEREES REFLECT THE NATION'S ETHNIC AND SOCI	OECONO	MIC							
DIVERSITY, BUT A DISPROPORTIONATE NUMBER ARE PEOPLE OF COLOR. THE 351										
EXONEREES SP	EXONEREES SPENT A COMBINED TOTAL OF 4,788 YEARS IN PRISON FOR CRIMES									
THEY DID NOT	THEY DID NOT COMMIT.									

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: INNOCENCE, WE SEEK THEIR IMMEDIATE RELEASE. IN FISCAL YEAR 2017, WE EXONERATED SIX MEN OF CRIMES THEY DID NOT COMMIT AND WORKED TO FREE MANY MORE. TO DATE THE INNOCENCE PROJECT HAS HELPED FREE MORE THAN 200 PEOPLE. FOR EACH EXONERATION CASE, INNOCENCE PROJECT SOCIAL WORKERS HELPED CLIENTS REUNITE WITH THEIR FAMILY AND FRIENDS AND PROVIDED ASSISTANCE TO SECURE HOUSING, DAY-TO-DAY TRANSPORTATION, CRITICAL MEDICAL OR MENTAL HEALTH CARE, AND SUPPORT IN FINDING EMPLOYMENT. THE INNOCENCE PROJECT REPRESENTED 234 CLIENTS AND THE SOCIAL WORK TEAM WORKED WITH 45 FORMER CLIENTS DURING THE YEAR ENDING JUNE 30, 2017.

 FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

 PEOPLE SO THAT THEY HAVE THE FINANCIAL FOOTING AND OTHER SUPPORT THEY

 NEED AND DESERVE TO RESTART THEIR LIVES. IN THE FISCAL YEAR ENDING JUNE

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

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 2016.05030 THE INNOCENCE PROJECT, INC. 3167_001

ADVOCATED FOR THREE ADDITIONAL STATEWIDE POLICE PRACTICE POLICIES

THROUGH EXECUTIVE AGENCIES AND THE COURTS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

SENTINEL EVENTS RESEARCH PLAN.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: STRATEGIC LITIGATION: COURT DECISIONS CAN LEAD TO WIDE-RANGING REFORM, SPURRING BETTER PRACTICES BY POLICE AND PROSECUTORS. THE INNOCENCE PROJECT'S STRATEGIC LITIGATION DEPARTMENT WORKS THROUGH THE COURTS AND THE LEGAL SYSTEM TO ADDRESS THE LEADING CAUSES OF WRONGFUL CONVICTION AND TO MAKE JUDGES, ATTORNEYS AND POLICYMAKERS AWARE OF THE FACTORS THAT CONTRIBUTE TO WRONGFUL CONVICTION. OUR STRATEGIC LITIGATION ATTORNEYS USE MULTIPLE STRATEGIES TO CHANGE THE LAW AROUND THE USE OF UNVALIDATED FORENSIC TECHNIQUES, UNRELIABLE EYEWITNESS IDENTIFICATIONS, AND FALSE CONFESSIONS. THEY ENGAGE IN DIRECT REPRESENTATION OF CLIENTS, TAKING ON CASES THAT THEY BELIEVE HAVE THE POTENTIAL TO PROMPT SUBSTANTIVE CHANGE ACROSS THE CRIMINAL JUSTICE SYSTEM. THEY ALSO FILE AMICUS BRIEFS, CONSULT WITH AND SUPPORT DEFENSE ATTORNEYS ACROSS THE COUNTRY AND PROVIDE TRAINING TO ATTORNEYS AND JUDGES. IN THE FISCAL YEAR ENDING JUNE 30, 2017, STAFF TRAINED MORE THAN 1,900 LAWYERS AND HAD TWENTY-SIX MAJOR COURT RULINGS.

 COMMUNICATIONS:
 THE INNOCENCE PROJECT BELIEVES THAT EACH DNA

 EXONERATION IS AN OPPORTUNITY TO CREATE AWARENESS AROUND AND BUILD

 PUBLIC SUPPORT FOR IMPROVING THE CRIMINAL JUSTICE SYSTEM. ITS

 COMMUNICATION DEPARTMENT WORKS TO ENSURE THAT EACH EXONERATION

 632212 08-25-16

 Schedule O (Form 990 or 990-EZ) (2016)

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 2016.05030 THE INNOCENCE PROJECT, INC. 3167_001

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization THE INNOCENCE PROJECT, INC.	Employer identification number 32-0077563
GENERATES SIGNIFICANT MEDIA ATTENTION IN ALL TYPES OF MED	IA. IT ALSO
WORKS TO INSERT THE ORGANIZATION'S VOICE INTO THE NATIONAL	L CONVERSATION
ABOUT SYSTEMIC REFORM, PLACING STORIES AND OPINION PIECES	THAT FURTHER
OUR PUBLIC POLICY GOALS. THE DEPARTMENT MAINTAINS A ROBUS	T DIGITAL AND
SOCIAL MEDIA PRESENCE AND ENGAGES AND EDUCATES OUR MANY SU	UPPORTERS
THROUGH A DAILY BLOG, AS WELL AS INNOCENCE PROJECT VIDEOS	, INTERVIEWS
AND OTHER MEDIA. ITS THREE ANNUAL PRINT PUBLICATIONS PROV	IDE SUPPORTERS
WITH AN IN-DEPTH LOOK AT CLIENTS' CASES AND STORIES AND A	LSO THE
ORGANIZATION'S WORK. THE DEPARTMENT ALSO RUNS THE INNOCEN	CE PROJECT
SPEAKERS BUREAU, WHICH ARRANGES FOR EXONEREES AND STAFF TO	О ЅРЕАК АТ
UNIVERSITIES, CORPORATIONS, AND CIVIC AND RELIGIOUS ORGAN	IZATIONS
AROUND THE COUNTRY. IN LINE WITH THE INNOCENCE PROJECT'S	STRATEGIC GOAL
TO TACKLE SOME OF THE UNDERLYING PROBLEMS THAT SEVERELY CO	OMPROMISE OUR
QUALITY OF JUSTICE, THE DEPARTMENT IS EXPANDING THE SCOPE	OF ITS PUBLIC
AWARENESS WORK, PLANNING NEW EDUCATION CAMPAIGNS THAT TARG	GET THE RACIAL
BIAS AND INJUSTICE THAT PERVADES OUR CRIMINAL JUSTICE SYS	TEM; AMERICA'S
MASSIVE PLEA DEAL SYSTEM AND THE PRESSURE IT PLACES ON IN	NOCENT PEOPLE
TO PLEAD GUILTY; AND THE LACK OF PROSECUTORIAL ACCOUNTABIL	LITY AND OUR
COUNTRY'S GROSSLY INADEQUATE INDIGENT DEFENSE SYSTEM.	
NETWORK SUPPORT: THE ORGANIZATION'S NETWORK SUPPORT UNIT	
TECHNICAL ASSISTANCE TO THE INNOCENCE NETWORK, AN AFFILIA	TION OF
LIKEMINDED ORGANIZATIONS AROUND THE COUNTRY DEDICATED TO	PROVIDING PRO
BONO LEGAL SERVICES TO INDIVIDUALS SEEKING TO PROVE THEIR	
AND MANAGES AND RUNS AN ANNUAL CONFERENCE FOR NETWORK MEM	BERS,
EXONERATED MEN AND WOMEN, THEIR FAMILIES, AND OTHER INTER	
EXPENSES \$ 3,613,120. INCLUDING GRANTS OF \$ 0. REVENUE	E \$ 0.

	FORM	990,	PART	VI,	SECTION	В,	LINE	11в	:					
	632212 08-	25-16							4.2		Schedule O (I	Form 990	or 990-EZ	<u>(2016)</u>
11	31011	9 758	275	3167	000	20	16 05	030	43 TTT	TNNOCENCE		TNC	3167	001
14	31011	9 758	275	3167.	000	20	16.05	030	THE	INNOCENCE	PROJECT,	INC.	3167_	

chedule O (Form 990 or 990-EZ) (2016) Page 2												
lame of the organization Employer identification number												
	\mathbf{THE}	INN	IOCENCE	E PROJECT,	, I]	NC.			32-007	7756	3	
												_
DRAFT OF FORM	990	IS	FIRST	REVIEWED	ΒY	AUDIT	COMMITTEE,	THEN	SENT	то	ALL	

BOARD MEMBERS PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD MEMBERS AND KEY EMPLOYEES ARE REQUIRED TO SUBMIT AN ANNUAL

CONFLICTS OF INTEREST CERTIFICATION AND FORM 990 DISCLOSURE FORM.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION IS APPROVED BY THE BOARD BASED ON INDUSTRY STANDARD.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NJ, NH, NY, OH, OK

OR, PA, RI, SC, TN, UT, VA, WA, WI, WV, NM

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL

STATEMENTS ARE AVAILABLE UPON REQUEST.

(Rev. January 2017)

Department of the Treasury

Internal Revenue Service

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

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile*, click on Charities & Non-Profits, and click on *e-file* for *Charities and Non-Profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

					or 3 fuertary	ing number		
Type or	Name of exempt organization or other filer, see instru	Employer identification number (EIN) o						
print	MUE INNOCENCE DECTECH INC			32-0077563				
File by the	THE INNOCENCE PROJECT, INC							
due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, s 40 WORTH STREET, SUITE 701	Social se	curity numbe	er (SSN)				
instructions.	City, town or post office, state, and ZIP code. For a f NEW YORK, NY 10013	oreign add	lress, see instructions.					
Enter the	Return Code for the return that this application is for (fi	le a separa	te application for each return)					
Applicati	on	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990) or Form 990-EZ	01	Form 990-T (corporation)			07		
Form 990)-BL	02	Form 1041-A			08		
Form 472	20 (individual)	03	Form 4720 (other than individual)			09		
Form 990)-PF	04	Form 5227			10		
Form 990)-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990)-T (trust other than above)	06	Form 8870					
 If this box ▶ [1 I re for ▶ [brganization does not have an office or place of busines is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box \blacktriangleright quest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or \underline{X} tax year beginning JUL 1, 2016 ne tax year entered in line 1 is for less than 12 months, or	Group Exe and atta MA organizatio , an	emption Number (GEN) ich a list with the names and EINs o Y 15, 2018, to file on's return for: d ending JUN 30, 2017	f this is fo f all memb e the exen	r the whole g pers the exter npt organizat	nsion is for.		
	Change in accounting period							
	his application is for Forms 990-BL, 990-PF, 990-T, 4720), or 6069,	enter the tentative tax, less any			0		
	nrefundable credits. See instructions.			3a	\$	0.		
	his application is for Forms 990-PF, 990-T, 4720, or 6069					0		
	imated tax payments made. Include any prior year over			3b	\$	0.		
	ance due. Subtract line 3b from line 3a. Include your pa	-				0.		
	using EFTPS (Electronic Federal Tax Payment System).			30	\$			
Caution: instructio	If you are going to make an electronic funds withdrawa ns.	I (direct de	bit) with this Form 8868, see Form 8	3453-EO a	nd Form 887	9-EO for payment		
LHA F	or Privacy Act and Paperwork Reduction Act Notice	, see instr	uctions.		Form 8	868 (Rev. 1-2017)		

Enter filer's identifying number