

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

OMB No. 1545-0047
2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning _____ **and ending** _____

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

C Name of organization THE INTERNATIONAL DARK-SKY ASSOCIATION INC

D Employer identification number 74-2493011

E Telephone number 520-293-3198

G Gross receipts \$ 743,965

F Name and address of principal officer:
 DIANA UMPIERRE
 3223 N. FIRST AVENUE
 TUCSON AZ 85719

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

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

J Website: WWW.DARKSKY.ORG

K Form of organization: Corporation Trust Association Other

L Year of formation: 1988 **M State of legal domicile:** AZ

H(c) Group exemption number ▶

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
SEE SCHEDULE O

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

3 Number of voting members of the governing body (Part VI, line 1a)	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	13
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	8
6 Total number of volunteers (estimate if necessary)	50
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	554,206	703,661
9 Program service revenue (Part VIII, line 2g)	10,000	31,689
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-178	99
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-13,382	-16,546
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	550,646	718,903
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	331,467	345,821
16a Professional fundraising fees (Part IX, column (A), line 11e)	28,250	16,000
16b Total fundraising expenses (Part IX, column (D), line 25) ▶ 62,716		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	158,524	205,395
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	518,241	567,216
19 Revenue less expenses. Subtract line 18 from line 12	32,405	151,687

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	238,254	418,994
21 Total liabilities (Part X, line 26)	93,364	122,417
22 Net assets or fund balances. Subtract line 21 from line 20	144,890	296,577

Part II Signature Block

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

Sign Here Signature of officer: DIANA UMPIERRE, PRESIDENT, Date: _____

Paid Preparer Use Only
 Print/Type preparer's name: ERIC S. RUDNER, CPA
 Preparer's signature: [Signature], Date: 10/18/17
 Check if self-employed PTIN: P00378841
 Firm's name: LUDWIG KLEWER & CO. PLLC, Firm's EIN: 36-4538293
 Firm's address: 4783 E CAMP LOWELL DR, TUCSON, AZ 85712, Phone no: 520-545-0500