

Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

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

2016

Open to Public Inspection

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

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2016 calendar year, or tax year beginning January 1, 2016, and ending December 31, 2016

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

C Name of organization: **Razom Inc.**
Number and street (or P O box, if mail is not delivered to street address) Room/suite: **140 2nd Avenue 305**
City or town, state or province, country, and ZIP or foreign postal code: **New York, NY, 10003**

D Employer identification number: **46-4604398**

E Telephone number: **(860) 212-3022**

F Group Exemption Number: ▶

G Accounting Method: Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ **razomforukraine.org**

J Tax-exempt status (check only one) - 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527

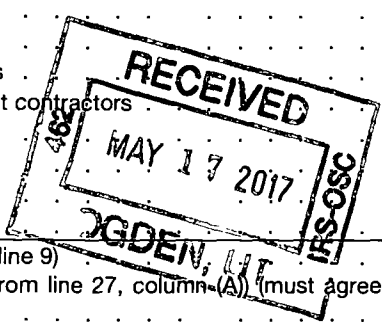
K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. **\$ 81,357**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

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

Revenue	Expenses	Net Assets	Amount
1			77,737
2			2,754
3			0
4			866
5a			0
5b			0
5c			0
6a			0
6b			0
6c			0
6d			0
7a			0
7b			0
7c			0
8			0
9			81,357
	10		14,717
	11		0
	12		0
	13		0
	14		11,013
	15		3,016
	16		41,015
	17		69,761
	18		11,596
	19		94,506
	20		
	21		106,102



39 15

Part II Balance Sheets (see the instructions for Part II)

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

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	94,506	22 106,102
23 Land and buildings	0	23 0
24 Other assets (describe in Schedule O)	0	24 0
25 Total assets	94,506	25 106,102
26 Total liabilities (describe in Schedule O)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	94,506	27 106,102

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

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

What is the organization's primary exempt purpose? See Schedule O	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)	
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.		
28 RAZOM Partners: See Schedule O for accomplishments		
(Grants \$ 11,657) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	28a	18,401
29 Reformers Without Borders: See Schedule O for accomplishments		
(Grants \$ 3,060) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	13,539
30 RAZOM IT: See Schedule O for accomplishments		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	9,318
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	14,460
32 Total program service expenses (add lines 28a through 31a)	32	55,718

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Lyuba Shipovich President	8	0	0	0
Olya Yarychkivska Secretary	8	0	0	0
Anastasiia Rybytska Vice President	8	0	0	0
Mariya Soroka Director	8	0	0	0
Natalia Shyrba Director	8	0	0	0
Theodora Chomiak Director	8	0	0	0
Iryna Mazur Director	8	0	0	0
Boqdan Polovko Director	8	0	0	0
Yulia Paslavska Treasurer	8	0	0	0

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

Table with columns for question number, question text, and Yes/No checkboxes. Rows include questions 33 through 45b regarding organizational activities, financials, and compliance.

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

	Yes	No
46		✓

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

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

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

	Yes	No
47		✓
48		✓
49a		✓
49b		

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

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

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

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

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

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

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

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

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

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

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A Yes No

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

Sign Here	Signature of officer	Date
	Lyuba Shipovich, President Type or print name and title	5/12/2017 05/12/2017

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no			

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization

Employer identification number

Razom Inc.

46-4604398

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state.
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university.
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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.")			146,936	85,249	77,737	309,922
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3			146,936	85,249	77,737	309,922
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						309,922

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4			146,936	85,249	77,737	309,922
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			471	701	866	2,038
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						311,960
12 Gross receipts from related activities, etc. (see instructions)					12	70,475
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	%
16a 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 as a publicly supported organization ▶ <input type="checkbox"/>		
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 qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2016

**Open to Public
Inspection**

Name of the organization

Razom Inc.

Employer identification number

46-4604398

FORM 990-EZ, PART I, LINE 10, GRANTS AND SIMILAR AMOUNTS PAID (greater than \$1,000)

ACTIVITY CLASSIFICATION: GRANT

GRANTEE NAME: PROJECT C.U.R.E (Support Hospitals in Ukraine Project)

GRANTEE ADDRESS: 10377 E. Geddes Ave. Suite 200 Centennial, CO 80112

AMOUNT GIVEN: 3,000 GRANT DATE: 2/5/2016

GRANTEE NAME: HROMADSKIE RADIO (PUBLIC RADIO in UKRAINE)

AMOUNT GIVEN: \$4,500 GRANT DATE: 2/9/2016

GRANTEE NAME: VOLYA INSTITUTE for Contemporary Law and Society

AMOUNT GIVEN: \$3,200 GRANT DATE: 2/19/2016

GRANTEE NAME: RAZOM DLYA UKRAINY AMOUNT GIVEN: \$3,060 GRANT DATE: 4/20/2016

FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES

Travel \$15,608

Management fees \$7,500

Supplies & Materials \$6,951

Food & Beverage \$5,114

Information Technology \$1,400

Bank Service Charges \$1,218

Other Miscellaneous \$850

Legal Fees \$1,005

Advertising & Promotions \$888

Insurance \$481

FORM 990-EZ, PART III ORGANIZATIONS PRIMARY EXEMPT PURPOSE:

Razom is a non-profit organization dedicated to building a prosperous and democratic Ukraine by constructing systems in Ukraine that

integrate its citizens into the global economy. Razom maintains a relentless focus on the needs on the ground in Ukraine and on the

opportunities to amplify voices from Ukraine in conversations in the United States. Razom was formed solely for charitable purposes and is

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

Cat No 51056K

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

Name of the organization

Employer identification number

Razom Inc.

46-4604398

a non-partisan organization.

FORM 990-EZ, PART III, PROGRAM ACCOMPLISHMENTS

Line 28: RAZOM PARTNERS

Razom Partners supports individuals and organizations who are building a prosperous and democratic Ukraine. In 2016, Razom worked with 4 partners: (1) MathOlymp; (2) Hromadske Radio (Public Radio); (3) Galicia Cult; (4) Moy Gorod (My City)

(1) MathOlymp Program supported and sponsored the participation of 6 students representing Ukraine at the International Mathematical Olympiad in Hong Kong. The students won 2 silver medals and 4 bronze medals.

(2) Hromadske Radio, or Public Radio in Ukraine was awarded a \$4,500 grant from Razom for the development of original radio programming. Razom helped organize a week-long trip to the U.S. for the Hromadske Radio team to connect with their U.S. counterparts in public radio.

(3) Razom helped bring 16 artists to Galicia Cult, a multidisciplinary social-cultural forum that aims to introduce eastern Ukrainians to modern Western Ukrainian culture.

(4) Razom partnered up with 'Moy Gorod' - a marketplace of social projects and civic activists.

Moy Gorod is an online platform in Odesa, Ukraine that gets citizens to create and implement projects to make their city more livable.

LINE 29: REFORMERS WITHOUT BORDERS

Reformers without Borders Program aims to send fellows to Ukraine to help build a bridge of trust between local governing bodies and citizens in Ukraine.

In 2016, Razom sent a fellow from the US who led logistical preparations for an international conference between EU and Ukraine, conducted 10 field visits around the Odesa region to identify development challenges and potential projects, provided translation services, and led English-language training series for Odesa Customs.

LINE 30: RAZOM IT

Razom IT is an economic development initiative that supports the growth of an engaged middle class by cultivating the tech start-up ecosystem in Ukraine.

In 2016, Razom held 6 speaker series events, showcasing interesting projects and building the entrepreneurial tech community with roots in Ukraine in New York. Additionally, 5 start-ups from Ukraine took part in Razom IT Trip, a week-long immersive program in NY designed to help teams from Ukraine accelerate the development of their ventures.