

Form **990**
Department of the Treasury
Internal Revenue Service

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
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07-01-2017, and ending 06-30-2018

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

C Name of organization
THE ASSOCIATION FOR DEVELOPMENT OF THE EXCEPTIONAL INCORPORATED

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
7330 NW 125T

City or town, state or province, country, and ZIP or foreign postal code
MIAMI, FL 33126

D Employer identification number
59-1715840

E Telephone number
(305) 573-8393

G Gross receipts \$ 2,854,169

F Name and address of principal officer
HELENA DEL MONTE
7330 NW 12 ST
MIAMI, FL 33126

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)

H(c) Group exemption number ▶

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

J Website: ▶ WWW.ADEMIAMI.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation 1973

M State of legal domicile FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO PROVIDE SPECIALIZED ACADEMIC, VOCATIONAL TRAINING, AND EMPLOYMENT SERVICES TO ADULTS WITH DEVELOPMENTAL DISABILITIES, FOCUSING ON EACH PARTICIPANT'S ABILITIES AND CHOICES, MAXIMIZING THEIR POTENTIAL WHILE GUIDING THEM TOWARDS A PATH OF ACQUIRED SKILLS, SELF-DETERMINATION AND COMMUNITY INCLUSION

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

3 Number of voting members of the governing body (Part VI, line 1a)	3	3
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	3
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	92
6 Total number of volunteers (estimate if necessary)	6	2
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	614,773	889,188
9 Program service revenue (Part VIII, line 2g)	1,712,991	1,640,623
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,450,238	273,167
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	44,029	51,191
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,822,031	2,854,169
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)	1,590,006	1,594,770
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	996,530	1,627,717
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,586,536	3,222,487
19 Revenue less expenses Subtract line 18 from line 12	8,235,495	-368,318

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	9,926,155	12,058,200
21 Total liabilities (Part X, line 26)	369,463	2,869,826
22 Net assets or fund balances Subtract line 21 from line 20	9,556,692	9,188,374

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 _____ Date 2019-02-27

HELENA DEL MONTE EXECUTIVE DIRECTOR
Type or print name and title _____

Paid Preparer Use Only

Print/Type preparer's name PEDRO DE ARMAS	Preparer's signature PEDRO DE ARMAS	Date 2019-03-01	Check <input type="checkbox"/> if self-employed	PTIN P00440261
Firm's name ▶ VERDEJA DE ARMAS & TRUJILLO LLP			Firm's EIN ▶ 20-4989621	
Firm's address ▶ 255 ALHAMBRA CIR STE 560 CORAL GABLES, FL 331347417			Phone no (305) 446-3177	

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

TO PROVIDE SPECIALIZED ACADEMICS, VOCATIONAL TRAINING, AND EMPLOYMENT SERVICES TO ADULTS WITH DEVELOPMENTAL DISABILITIES, FOCUSING ON EACH PARTICIPANT'S ABILITIES AND CHOICES, MAXIMIZING THEIR POTENTIAL WHILE GUIDING THEM TOWARDS A PATH OF ACQUIRED SKILLS, SELF-DETERMINATION AND COMMUNITY INCLUSION

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 2,526,769 including grants of \$) (Revenue \$ 1,640,623)
See Additional Data

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

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

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

4e Total program service expenses ▶ 2,526,769

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
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? <i>If "Yes," complete Schedule C, Part II</i>		No
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? <i>If "Yes," complete Schedule C, Part III</i>		No
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? <i>If "Yes," complete Schedule D, Part I</i>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		No
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? <i>If "Yes," complete Schedule D, Part IV</i>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	Yes	
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? <i>If "Yes," complete Schedule D, Part VII</i>		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		No
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (3); 1b Enter the number of voting members included in line 1a, above, who are independent (3); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (No); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (No); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No)

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (No); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (No); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (No); 13 Did the organization have a written whistleblower policy? (No); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (Yes); b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (FL); 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: [] Own website, [] Another's website, [X] Upon request, [] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records (DIANA CRUZ 7330 NW 12 ST MIAMI, FL 33126 (786) 363-3100)

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a					
	b Membership dues . . .	1b					
	c Fundraising events . . .	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	878,038				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	11,150				
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f ▶		889,188				
Program Service Revenue			Business Code				
	2a MEDICAL WAIVER INCOME/FEEES			1,637,297	1,637,297		
	b TUITION			3,326	3,326		
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f ▶		1,640,623					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			273,167		273,167	
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
	6a Gross rents	(i) Real	(ii) Personal				
			48,807				
		b Less rental expenses					
		c Rental income or (loss)	48,807				
	d Net rental income or (loss) ▶			48,807	48,807		
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis and sales expenses					
		c Gain or (loss)					
	d Net gain or (loss) ▶						
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a						
		b Less direct expenses b					
c Net income or (loss) from fundraising events ▶							
9a Gross income from gaming activities See Part IV, line 19 a							
	b Less direct expenses b						
	c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances a							
	b Less cost of goods sold b						
	c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue		Business Code					
11a OTHER INCOME			2,384		2,384		
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d ▶			2,384				
12 Total revenue. See Instructions ▶			2,854,169	1,689,430	275,551		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	196,446	157,157	39,289	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,165,035	932,028	233,007	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	133,243	106,594	26,649	
10 Payroll taxes	100,046	80,037	20,009	
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	117,546		117,546	
12 Advertising and promotion				
13 Office expenses	212,844	191,560	21,284	
14 Information technology				
15 Royalties				
16 Occupancy	48,993	44,094	4,899	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	99,796		99,796	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	118,128	100,409	17,719	
23 Insurance	121,189	121,189		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a REPAIRS AND MAINTENANCE	282,714	254,443	28,271	
b TRANSPORTATION	249,366	249,366		
c LICENSES AND TAXES	172,160	146,336	25,824	
d VEHICLE EXPENSE	67,025	60,647	6,378	
e All other expenses	137,956	82,909	55,047	
25 Total functional expenses. Add lines 1 through 24e	3,222,487	2,526,769	695,718	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	323,256	1	701,650
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	5,602,559	4	5,842,865
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	12,322	9	12,991
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	6,591,259		
	b Less accumulated depreciation	1,118,204		
		3,985,379	10c	5,473,055
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11	2,639	15	27,639	
16 Total assets. Add lines 1 through 15 (must equal line 34)	9,926,155	16	12,058,200	
Liabilities	17 Accounts payable and accrued expenses	140,848	17	175,849
	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	228,615	23	2,693,977
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	369,463	26	2,869,826
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	9,556,692	27	9,188,374
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	9,556,692	33	9,188,374	
34 Total liabilities and net assets/fund balances	9,926,155	34	12,058,200	

Part 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	2,854,169
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,222,487
3	Revenue less expenses Subtract line 2 from line 1	3	-368,318
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,556,692
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,188,374

Part 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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 59-1715840

Name: THE ASSOCIATION FOR DEVELOPMENT OF
THE EXCEPTIONAL INCORPORATED

Form 990 (2017)

Form 990, Part III, Line 4a:

THROUGH THE ACTIVITIES PROVIDED IN OUR DAILY PROGRAMMING WE EMPOWER OUR CONSUMERS TO ACHIEVE OUR POWERFUL MISSION STATEMENT ADE PROVIDES MULTIPLE CHOICES OF PROGRAMMING TO BETTER SERVE THE MANY NEEDS, AND LEVELS OF FUNCTIONING OF OUR 300+ CONSUMERS PER YEAR THE ULTIMATE GOAL IS TO OFFER OUR CONSUMERS AN ARRAY OF SKILLS THAT WILL ALLOW THEM TO FUNCTION INDEPENDENTLY ALSO, TO INTEGRATE THEM IN SOCIAL AND WORK ENVIRONMENTS SO THEY CAN REACH THE HIGHEST POTENTIAL WITHIN THEIR INDIVIDUAL ABILITIES AND CHOICES AS WELL, TO FORTIFY THEIR VOCATIONAL SKILLS SO THEY MAY HAVE EMPLOYMENT OPPORTUNITIES AND BECOME PROUD WAGE-EARNERS ADE'S MANAGEMENT APPROACH FAVORS SEQUENTIAL ELEMENTS THAT ARE ESSENTIAL TO BE ABLE TO SUCCESSFULLY RUN OUR EXCELLENT PROGRAM, FOR EXAMPLE 1)CLIENT RECRUITMENT- ADE CONTINUES TO ENJOY AN EXCELLENT REPUTATION IN THE COMMUNITY BECAUSE OF THIS AND BECAUSE OF THE VARIETY OF ACADEMIC, VOCATIONAL, AND EMPLOYABILITY SKILLS PROVIDED TO THE CONSUMERS WE SERVE, THE SUPPORT COORDINATORS, WHICH ARE THEIR REFERRAL AGENTS ARE VERY INCLINED TO REFER CONSUMERS TO OUR AGENCY FOR THE PAST TWO YEARS THE STATE BUDGET FOR "THE AGENCY FOR PERSONS WITH DISABILITIES" HAS INCREASED APPROXIMATELY 3% INCREASE IN MEDICAID WAIVER FUNDING THESE DOLLARS HAVE BEEN USED TO SERVE CONSUMERS THAT WERE ON THE MEDICAID WAIVER WAITLIST THUS, OPENING UP ADDITIONAL ENROLLMENT OPPORTUNITIES ADE IS ALWAYS IN THE FOREFRONT OF KEEPING OUR LEGISLATORS IN TALLAHASSEE AWARE OF THE NEED FOR THESE BUDGET ISSUES, SO WE WERE VERY PROUD WHEN THESE ADDITIONAL FUNDING WERE PASSED BY THE HOUSE AND SENATE 2)STAFF RECRUITMENT-UTILIZING THE CAREER BUILDING ADVERTISING TOOL THROUGH THE MIAMI HERALD, INDEED, SOUTH FLORIDA WORKFORCE-PROFESSIONAL PLACEMENT UNIT, JOBBING COM, AND HAVING A CONSTANT PRESENCE AT JOB/CAREER FAIRS, GIVES US AN ARRAY OF CHOICES TO EMPLOY THE BEST CANDIDATES POSSIBLE WITHIN OUR FIELD THE BETTER THE QUALITY OF THE STAFF THE MORE SUCCESS IN THE DELIVERY OF SERVICES 3)STAFF DEVELOPMENT - ADE CONTINUES TO ENHANCE THE POTENTIAL OF OUR STAFF THROUGH TRAININGS ESPECIALLY OUR DIRECT CARE STAFF IS GIVEN AN ASSORTMENT OF IN-SERVICE TRAININGS SUCH AS KNOWLEDGE OF DEVELOPMENTAL DISABILITIES, 0 TOLERANCE, OSHA, CPR, HIV, FIRST AID, BEHAVIOR MANAGEMENT, PAC, AND OTHERS 4)EXCELLENT PROGRAMMING- A PROFICIENT, QUALIFIED STAFF UNDER THE GUIDANCE OF A WATCHFUL MANAGEMENT ALLOWS US TO CONDUCT AN EXEMPLARY PROGRAM, WHICH ENHANCES OUR REPUTATION AND ENCOURAGES ADDITIONAL ENROLLMENT AND GROWTH DURING THE 2011 FY ADE STARTED ITS "PROFESSIONAL CULINARY, BAKING AND RESTAURANT MAINTENANCE TRAINING PROGRAM" IT WAS CONTINUOUSLY FUNDED AT 100,000 PER YEAR, UNTIL FY15-16, WHEN THE FUNDING WAS INCREASED TO 200,000 DURING 2017-18 ADE RECEIVED 125,000 FOR THE CULINARY TRAINING PROGRAM AND 75,000 TO OPERATE ADE'S SILVER PROGRAM FOR SENIORS WITH DEVELOPMENTAL DISABILITIES AS IN PREVIOUS YEARS, ADE CONTINUES TO ADD A HIGHER LEVEL OF PROFICIENCY AND SOPHISTICATION TO OUR VOCATIONAL SKILLS TRAINING AREAS, AND ALSO REGARDS A HIGH PRIORITY ON OUR COMMUNITY INCLUSION COMPONENT OF OUR ADULT DAY TRAINING PROGRAM ADDITIONALLY, WE CONTINUE TO OFFER OUR OTHER VOCATIONAL TRAINING AREAS, SUCH AS ART EXPRESSION, COSMETOLOGY, JEWELRY DESIGN, PHYSICAL EXERCISE PROGRAM, CAR WASHING AND DETAILING, PACKAGING, BAGGING, COLLATING, CULINARY TRAINING AND BAKING, COMPUTER CLASSES, HORTICULTURE, MONEY BUDGETING, COMMUNITY AWARENESS, COMMUNITY MOBILITY, FIRST AIDE, AND INDEPENDENT LIVING PROFICIENCY, AND MANY OTHER SKILLS 5)FISCAL MANAGEMENT - ADE'S CEO AND TOP MANAGEMENT STAFF CONTINUE TO OPERATE FOCUSING THE PRIORITIES TO CONSERVATION, SUSTAINABILITY, AND COMPARATIVE PROCUREMENT TO ENSURE THE MAXIMUM RESULTS OUT OF EVERY DOLLAR OF FUNDING RECEIVED OUR BILLING SPECIALIST KEEPS A MOST EFFICIENT CONTROL OF OUR COLLECTIONS IN REFERENCE TO OUR GENERAL REVENUE AND MEDICAID WAIVER STATE BILLING AS WELL, AS A COMMUNICATION LINE WITH ALL SUPPORT COORDINATORS TO ENSURE THAT ALL THE PROPER STATE AUTHORIZATIONS ARE CURRENT AND CORRECT TO ENSURE THAT ALL POSSIBLE COLLECTIONS ARE BILLED APPROPRIATELY AND REIMBURSED PROMPTLY 6)BANKING RELATIONSHIPS -ADE'S BOARD OF DIRECTORS AND MANAGEMENT HAS ALWAYS BELIEVED IN DIVERSIFYING ALL BANK ACCOUNTS, AND ASSETS AMONGST ALTERNATIVE BANKS THIS ENSURES THAT THE REVENUES COLLECTED THROUGH OUR MULTIPLE FUNDING SOURCES ARE GUARANTEED BY FDIC WITHIN THEIR GUIDELINES AND LIMITS OUR FISCAL DEPARTMENT MONITORS THE STATUS OF ALL BANKS WE HAVE PROFESSIONAL RELATIONSHIPS WITH AS WE REALIZED THAT THE HEALTH OF GREAT FLORIDA BANK DETERIORATED WE MADE THE DECISION FIVE YEARS AGO TO TRANSFER ALL OUR MAJOR OPERATIONAL ACCOUNTS TO JGBBANK, WHICH LATER BECAME SABADEL OUR MAIN CONTACT AT SABADEL, LEFT THAT INSTITUTION AND BECAME THE COO AND SENIOR VP FOR CONTINENTAL BANK OF FLORIDA ADE OPTED TO TRANSFER OUR OPERATIONAL ACCOUNT TO CONTINENTAL BANK, AS WELL AS OPENING A MONEY MARKET ACCOUNT DESIGNATED FOR "BUILDING AND ACQUISITIONS FUNDS" ON JUNE 2016 TO SECURE/BANK THE MONIES FROM THE MIDTOWN BUILDING SALE AT CONTINENTAL BANK OF FLORIDA ADE STILL HELD THE MORTGAGE FINANCING LOAN FOR OUR HIALEAH BRANCH AT FLORIDA COMMUNITY BANK, AND STILL DOES TO DATE SUN STATE BANK WAS HOLDING OUR NORTH AND SOUTH MORTGAGES FOR APPROXIMATELY 200,000, AND HAD GRANTED US A 100,000 CREDIT LINE SECURED BY THE ADE SOUTH PROPERTY DRING THE MIDTOWN PROPERTY SALE TO LEEMA HOLDING, ADE PAID IN FULL THE DEBT TO SUNSTATE BANK, AND THE CREDIT LINE WAS RENEGOTIATED FOR 200,000, AGAIN USING THE SOUTH PROPERTY AS COLLATERAL SUNSTATE BANK IS ALSO HOLDING THE LOAN FOR OUR NORTH BRANCH FACILITY OF 850,000, CLOSING ON 2-27-18 SIMULTANEOUSLY, ADE OPENED A MONEY MARKET FOR 400,000 IN SUMMARY, AT PRESENT WE HOLD THE FOLLOWING BANKING RELATIONSHIPS CONTINENTAL BANK-ADE MAIN OPERATIONAL ACCOUNT CONTINENTAL BANK-ADE MONEY MARKET "BUILDING AND ACQUISITIONS" CONTINENTAL BANK-ADE PAYROLL CONTINENTAL BANK-ADE MISCELLANEOUS ACCOUNT SUNSTATE BANK-ADE MONEY MARKET ACCOUNT SUNSTATE BANK-ADE CREDIT LINE SUNSTATE BANK-ADE REVOLVING CHECKING ACCOUNT 7) WE CONTINUE TO A APPROACH ALL VENDORS FOR POSSIBLE REDUCTION IN PRICING, AND IMPOSED A STRICTER AND MORE THOROUGH PROCUREMENT PROCESS TO MAKE SURE WE ARE GETTING THE BEST FOR OUR DOLLAR B WORK CLOSELY WITH OUR INSURANCE AGENTS, SINCE INSURANCE PREMIUMS ARE ONE OF THE AGENCIES HIGHEST EXPENSE THE GOAL IS TO REDUCE THE COST ON POLICIES WHILE KEEPING THE PRUDENT AND REQUIRED COVERAGE C ADVISE ALL PERSONNEL TO BE FRUGAL IN AREAS FROM OFFICE SUPPLIES, EDUCATIONAL SUPPLIES, JANITORIAL MAINTENANCE SUPPLIES, ETC D INVOLVE THE STAFF IN THE GOALS AND TRIUMPHS OF THE ORGANIZATION HAS PROVEN VERY WISE DURING THIS YEAR OF GROWTH AND CHANGE ALL THE STAFF IS FEELING THE ADE PRIDE AND HAVE CONTRIBUTED GREATLY IN ALL THE EXTRA WORK AND LOGISTIC REGARDING THE RELOCATION AND TRANSITION 8)ALTERNATIVE FUNDING SOURCES IN ADDITION, TO THE PREVIOUSLY DESCRIBED FUNDING OPPORTUNITIES ADE HAS ENJOYED FOR MANY YEARS, WHICH HAVE BEEN EXCEPTIONALLY DIFFICULT AND COMPETITIVE TO MAINTAIN AT THE SAME LEVEL OR TO HAND ON TO AT ALL ADE CONTINUES TO PROCURE ALTERNATIVE GRANTS AND FUNDING SOURCES, AS WELL AS PRIVATE DONATIONS 9)MILESTONES 1)ON APRIL 4, 2017 ADE PURCHASED 7330 NW 12 STREET FOR 3 MIL, THE PROPERTY APPRAISED FOR 3 4MIL, TWO TENANTS WERE OCCUPYING, TAX E FILING LEASING AT 3,593 04 PER MO TILL APRIL 2018, AND VIDA PLENA AT 4,622 PER MONTH TILL APRIL 2018 2)THE ABOVE MENTIONED TENANT "TAX E FILING" LEFT PRIOR TO THEIR LEASE COMMITMENT THIS ALLOWED US TO MOVE ADE'S ADMINISTRATIVE OFFICES FROM OUR HIALEAH BRANCH TO THE SECOND FLOOR OF THE CENTRAL BRANCH, CREATING ADDITIONAL SPACE TO INCREMENT OUR HIALEAH ENROLLMENT AS WELL, IT OPENED UP NEW SPACE FOR CLASSROOM CREATION AT THE CENTRAL BRANCH SECOND FLOOR 3)ON APRIL 2018 THE LEASE FOR "VIDA PLENA CHURCH" TERMINATED AS THEY LEFT OUR BUILDING A NEW PHASE OF RE-MODELING BEGAN SINCE THE SPACE COULD NOW BE USED FOR PROGRAMMING PURPOSES THIS HAS OPENED UP MANY NEW OPPORTUNITIES FOR SERVICES AND ACTIVITIES SINCE PART OF THIS SPACE CONSTITUTES A 2,000 SQ FT AUDITORIUM 4)THE CULINARY TRAINING PROGRAM WAS DIVERSIFIED TO ALL THREE BRANCHES, NOW CONSISTING OF ONE HEAD CHEF/INSTRUCTOR, ONE ASSISTANT CHEF/INSTRUCTOR AND ONE VOCATIONAL SKILLS TRAINER 5)WE BEGAN OPERATING ADE'S SILVER PROGRAM, OFFERING SPECIALIZED GERIATRIC SERVICES TO 55+ DEVELOPMENTALLY DISABLED SENIORS 6)ADE RECEIVED 3 SPECIAL APPROPRIATIONS FROM TALLAHASSEE'S 2018 BUDGET LEGISLATIVE SESSION 1) 125,000 FOR CULINARY PROGRAM 2) FOR 75,000 FOR OUR SILVER PROGRAM 3) 100,000 FOR A CAPITAL OUTLAY, AFFORDING 33% OF THE COST TO BUILD A NEW PROFESSIONAL TRAINING KITCHEN, THE REMAINING COST WILL DERIVE FROM ADE'S BUILDING AND ACQUISITION RESERVES 7)ADE RECEIVED 22,000 FROM MAYOR SUAREZ, CITY OF MIAMI-SOCIAL SERVICES GAP PROGRAM 8)ADE ADDED A 15 PASSENGER FORD E-350 LX VAN TO ITS FLEET 9)ADE RECEIVED 98% COMPLIANCE FROM THE AGENCY FOR PERSONS WITH DISABILITIES DURING THE ANNUAL MON

SCHEDULE A
(Form 990 or
990EZ)

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.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

THE ASSOCIATION FOR DEVELOPMENT OF THE EXCEPTIONAL INCORPORATED

Employer identification number

59-1715840

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)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **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		
Total						

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc (see instructions)					12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2016 Schedule A, Part II, line 14	15	

- 16a 33 1/3% support test—2017.** 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 ▶
- b 33 1/3% support test—2016.** 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 ▶
- 17a 10%-facts-and-circumstances test—2017.** 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 ▶
- b 10%-facts-and-circumstances test—2016.** 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 ▶
- 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 ▶

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
	4b		
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)? <i>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.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
	5a		
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?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
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? <i>If "Yes," provide detail in Part VI.</i>		
	6		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
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))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
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? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
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? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
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)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section 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? <i>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.</i>		
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? <i>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.</i>		

Section 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)? <i>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).</i>		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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 VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Additional Data

Software ID:

Software Version:

EIN: 59-1715840

Name: THE ASSOCIATION FOR DEVELOPMENT OF
THE EXCEPTIONAL INCORPORATED

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
THE ASSOCIATION FOR DEVELOPMENT OF THE EXCEPTIONAL INCORPORATED

Employer identification number
59-1715840

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

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

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|---------------|----|
| | Yes | No |
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 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.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,762,460		2,762,460
b Buildings		3,031,202	741,349	2,289,853
c Leasehold improvements				
d Equipment		293,549	273,248	20,301
e Other		504,048	103,607	400,441
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				5,473,055

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

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

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

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

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

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

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	2,754,373
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	-99,796	
e	Add lines 2a through 2d		2e	-99,796
3	Subtract line 2e from line 1		3	2,854,169
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	2,854,169

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

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

1	Total expenses and losses per audited financial statements		1	3,122,691
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	-99,796	
e	Add lines 2a through 2d		2e	-99,796
3	Subtract line 2e from line 1		3	3,222,487
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	3,222,487

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:

Software Version:

EIN: 59-1715840

Name: THE ASSOCIATION FOR DEVELOPMENT OF
THE EXCEPTIONAL INCORPORATED

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 3, PART X	THE ORGANIZATION HAS ADOPTED THE PROVISIONS OF ASC NO 740, "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES" ("ASC NO 740") ASC 740 REQUIRED THAT THE IMPACT OF TAX POSITIONS TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THEY ARE MORE LIKELY THAN NOT OF BEING SUSTAINED UPON EXAMINATION ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS MADE IN THE FINANCIAL STATEMENTS AT 6/30/18, THERE WERE NO UNCERTAIN TAX POSITIONS THE ORGANIZATION FILES TAX RETURNS WITH US FEDERAL AND OTHER TAX AUTHORITIES FOR WHICH STATUE LIMITATIONS MAY GO BACK TO THE YEAR ENDED 2015

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XI, LINE 2D	INTEREST EXPENSES -99,796

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XII, LINE 2D	INTEREST EXPENSES -99,796

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2017

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**

▶ **Attach to Form 990 or Form 990-EZ.**

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

Department of the Treasury

Name of the organization

THE ASSOCIATION FOR DEVELOPMENT OF THE EXCEPTIONAL INCORPORATED

Employer identification number

59-1715840

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	Yes	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	Yes	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II.	Yes	
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	Yes	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	Yes	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	Yes	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	Yes	
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		No
b Admissions policies?		No
c Employment of faculty or administrative staff?		No
d Scholarships or other financial assistance?		No
e Educational policies?		No
f Use of facilities?		No
g Athletic programs?		No
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		No
6a Does the organization receive any financial aid or assistance from a governmental agency?	Yes	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II.		No
7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II.	Yes	

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).

Return Reference	Explanation
SCHEDULE E, LINE 6	THE ORGANIZATION RECEIVES FINANCIAL AID FROM SEVERAL GOVERNMENTAL AGENCIES TO HELP PEOPLE WITH DIASABILITIES

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
~~Internal Revenue Service~~Name of the organization
THE ASSOCIATION FOR DEVELOPMENT OF
THE EXCEPTIONAL INCORPORATED**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

2017**Open to Public
Inspection****Employer identification number**

59-1715840

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	TO PROVIDE SPECIALIZED ACADEMICS, VOCATIONAL TRAINING, AND EMPLOYMENT SERVICES TO ADULTS WITH DEVELOPMENTAL DISABILITIES, FOCUSING ON EACH PARTICIPANT'S ABILITIES AND CHOICES, MAXIMIZING THEIR POTENTIAL WHILE GUIDING THEM TOWARDS A PATH OF ACQUIRED SKILLS, SELF-DETERMINATION AND COMMUNITY INCLUSION

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>BE ABLE TO SUCCESSFULLY RUN OUR EXCELLENT PROGRAM, FOR EXAMPLE 1)CLIENT RECRUITMENT- ADE CONTINUES TO ENJOY AN EXCELLENT REPUTATION IN THE COMMUNITY BECAUSE OF THIS AND BECAUSE OF THE VARIETY OF ACADEMIC, VOCATIONAL, AND EMPLOYABILITY SKILLS PROVIDED TO THE CONSUMERS WE SERVE, THE SUPPORT COORDINATORS, WHICH ARE THEIR REFERRAL AGENTS ARE VERY INCLINED TO REFER CONSUMERS TO OUR AGENCY FOR THE PAST TWO YEARS THE STATE BUDGET FOR "THE AGENCY FOR PERSONS WITH DISABILITIES" HAS INCREASED APPROXIMATELY 3% INCREASE IN MEDICAID WAIVER FUNDING THESE DOLLARS HAVE BEEN USED TO SERVE CONSUMERS THAT WERE ON THE MEDICAID WAIVER WAIT LIST THUS, OPENING UP ADDITIONAL ENROLLMENT OPPORTUNITIES ADE IS ALWAYS IN THE FOREFRONT OF KEEPING OUR LEGISLATORS IN TALLAHASSEE AWARE OF THE NEED FOR THESE BUDGET ISSUES, SO WE WERE VERY PROUD WHEN THESE ADDITIONAL FUNDING WERE PASSED BY THE HOUSE AND SENATE 2)STAFF RECRUITMENT-UTILIZING THE CAREER BUILDING ADVERTISING TOOL THROUGH THE MIAMI HERALD, IN DEED, SOUTH FLORIDA WORKFORCE- PROFESSIONAL PLACEMENT UNIT, JOBBING COM, AND HAVING A CONSTANT PRESENCE AT JOB/CAREER FAIRS, GIVES US AN ARRAY OF CHOICES TO EMPLOY THE BEST CANDIDATES POSSIBLE WITHIN OUR FIELD THE BETTER THE QUALITY OF THE STAFF THE MORE SUCCESS IN THE DELIVERY OF SERVICES 3)STAFF DEVELOPMENT - ADE CONTINUES TO ENHANCE THE POTENTIAL OF OUR STAFF THROUGH TRAININGS ESPECIALLY OUR DIRECT CARE STAFF IS GIVEN AN ASSORTMENT OF IN-SERVICE TRAININGS SUCH AS KNOWLEDGE OF DEVELOPMENTAL DISABILITIES, TOLERANCE, OSHA, CPR, HIV, FIRST AID, BEHAVIOR MANAGEMENT, PAC, AND OTHERS 4) EXCELLENT PROGRAMMING- A PROFICIENT, QUALIFIED STAFF UNDER THE GUIDANCE OF A WATCHFUL MANAGEMENT ALLOWS US TO CONDUCT AN EXEMPLARY PROGRAM, WHICH ENHANCES OUR REPUTATION AND ENCOURAGES ADDITIONAL ENROLLMENT AND GROWTH DURING THE 2011 FY ADE STARTED ITS "PROFESSIONAL CULINARY, BAKING AND RESTAURANT MAINTENANCE TRAINING PROGRAM" IT WAS CONTINUOUSLY FUNDED AT 100,000 PER YEAR, UNTIL FY15-16, WHEN THE FUNDING WAS INCREASED TO 200,000 DURING 2017-18 ADE RECEIVED 125,000 FOR THE CULINARY TRAINING PROGRAM AND 75,000 TO OPERATE ADE'S SILVER PROGRAM FOR SENIORS WITH DEVELOPMENTAL DISABILITIES AS IN PREVIOUS YEARS, ADE CONTINUES TO ADD A HIGHER LEVEL OF PROFICIENCY AND SOPHISTICATION TO OUR VOCATIONAL SKILLS TRAINING AREAS, AND ALSO REGARDS A HIGH PRIORITY ON OUR COMMUNITY INCLUSION COMPONENT OF OUR ADULT DAY TRAINING PROGRAM ADDITIONALLY, WE CONTINUE TO OFFER OUR OTHER VOCATIONAL TRAINING AREAS, SUCH AS ART EXPRESSION, COSMETOLOGY, JEWELRY DESIGN, PHYSICAL EXERCISE PROGRAM, CAR WASHING AND DETAILING, PACKAGING, BAGGING, COLLATING, CULINARY TRAINING AND BAKING, COMPUTER CLASSES, HORTICULTURE, MONEY BUDGETING, COMMUNITY AWARENESS, COMMUNITY MOBILITY, FIRST AID, AND INDEPENDENT LIVING PROFICIENCY, AND MANY OTHER SKILLS 5)FISCAL MANAGEMENT - ADE'S CEO AND TOP MANAGEMENT STAFF CONTINUE TO OPERATE FOCUSING THE PRIORITIES TO CONSERVATION, SUSTAINABILITY, AND COMPARATIVE PROCUREMENT TO ENSURE THE MAXIMUM</p>

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<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>UM RESULTS OUT OF EVERY DOLLAR OF FUNDING RECEIVED OUR BILLING SPECIALIST KEEPS A MOST EF FICIENT CONTROL OF OUR COLLECTIONS IN REFERENCE TO OUR GENERAL REVENUE AND MEDICAID WAIVER STATE BILLING AS WELL, AS A COMMUNICATION LINE WITH ALL SUPPORT COORDINATORS TO ENSURE T HAT ALL THE PROPER STATE AUTHORIZATIONS ARE CURRENT AND CORRECT TO ENSURE THAT ALL POSSIBL E COLLECTIONS ARE BILLED APPROPRIATELY AND REIMBURSED PROMPTLY 6)BANKING RELATIONSHIPS -A DE'S BOARD OF DIRECTORS AND MANAGEMENT HAS ALWAYS BELIEVED IN DIVERSIFYING ALL BANK ACCOUN TS, AND ASSETS AMONGST ALTERNATIVE BANKS THIS ENSURES THAT THE REVENUES COLLECTED THROUGH OUR MULTIPLE FUNDING SOURCES ARE GUARANTEED BY FDIC WITHIN THEIR GUIDELINES AND LIMITS O UR FISCAL DEPARTMENT MONITORS THE STATUS OF ALL BANKS WE HAVE PROFESSIONAL RELATIONSHIPS W ITH AS WE REALIZED THAT THE HEALTH OF GREAT FLORIDA BANK DETERIORATED WE MADE THE DECISIO N FIVE YEARS AGO TO TRANSFER ALL OUR MAJOR OPERATIONAL ACCOUNTS TO JGBBANK, WHICH LATER BE CAME SABADEL OUR MAIN CONTACT AT SABADEL, LEFT THAT INSTITUTION AND BECAME THE COO AND SE NIOR VP FOR CONTINENTAL BANK OF FLORIDA ADE OPTED TO TRANSFER OUR OPERATIONAL ACCOUNT TO CONTINENTAL BANK, AS WELL AS OPENING A MONEY MARKET ACCOUNT DESIGNATED FOR "BUILDING AND A CQUISITIONS FUNDS" ON JUNE 2016 TO SECURE/BANK THE MONIES FROM THE MIDTOWN BUILDING SALE A T CONTINENTAL BANK OF FLORIDA ADE STILL HELD THE MORTGAGE FINANCING LOAN FOR OUR HIALEAH BRANCH AT FLORIDA COMMUNITY BANK, AND STILL DOES TO DATE SUN STATE BANK WAS HOLDING OUR N ORTH AND SOUTH MORTGAGES FOR APPROXIMATELY 200,000, AND HAD GRANTED US A 100,000 CREDIT LI NE SECURED BY THE ADE SOUTH PROPERTY DRING THE MIDTOWN PROPERTY SALE TO LEEMA HOLDING, AD E PAID IN FULL THE DEBT TO SUNSTATE BANK, AND THE CREDIT LINE WAS RENEGOTIATED FOR 200,000 , AGAIN USING THE SOUTH PROPERTY AS COLLATERAL SUNSTATE BANK IS ALSO HOLDING THE LOAN FOR OUR NORTH BRANCH FACILITY OF 850,000, CLOSING ON 2-27-18 SIMULTANEOUSLY, ADE OPENED A MO NEY MARKET FOR 400,000 IN SUMMARY, AT PRESENT WE HOLD THE FOLLOWING BANKING RELATIONSHIPS CONTINENTAL BANK-ADE MAIN OPERATIONAL ACCOUNT CONTINENTAL BANK-ADE MONEY MARKET "BUILDING AND ACQUISITIONS" CONTINENTAL BANK-ADE PAYROLL CONTINENTAL BANK-ADE MISCELLANEOUS ACCOUN T SUNSTATE BANK-ADE MONEY MARKET ACCOUNT SUNSTATE BANK-ADE CREDIT LINE SUNSTATE BANK-ADE R EVOLVING CHECKING ACCOUNT 7) WE CONTINUE TO A APPROACH ALL VENDORS FOR POSSIBLE REDUCTION IN PRICING, AND IMPOSED A STRICTER AND MORE THOROUGH PROCUREMENT PROCESS TO MAKE SURE WE ARE GETTING THE BEST FOR OUR DOLLAR B WORK CLOSELY WITH OUR INSURANCE AGENTS, SINCE INSUR ANCE PREMIUMS ARE ONE OF THE AGENCIES HIGHEST EXPENSE THE GOAL IS TO REDUCE THE COST ON P OLICIES WHILE KEEPING THE PRUDENT AND REQUIRED COVERAGE C ADVISE ALL PERSONNEL TO BE FRUG AL IN AREAS FROM OFFICE SUPPLIES, EDUCATIONAL SUPPLIES, JANITORIAL MAINTENANCE SUPPLIES, E TC D INVOLVE THE STAFF IN THE GOALS AND TRIUMPHS OF THE ORGANIZATION HAS PROVEN VERY WISE DURING THIS YEAR OF GROWTH AN</p>

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<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>D CHANGE ALL THE STAFF IS FEELING THE ADE PRIDE AND HAVE CONTRIBUTED GREATLY IN ALL THE EXTRA WORK AND LOGISTIC REGARDING THE RELOCATION AND TRANSITION 8)ALTERNATIVE FUNDING SOURCES IN ADDITION, TO THE PREVIOUSLY DESCRIBED FUNDING OPPORTUNITIES ADE HAS ENJOYED FOR MANY YEARS, WHICH HAVE BEEN EXCEPTIONALLY DIFFICULT AND COMPETITIVE TO MAINTAIN AT THE SAME LEVEL OR TO HAND ON TO AT ALL ADE CONTINUES TO PROCURE ALTERNATIVE GRANTS AND FUNDING SOURCES, AS WELL AS PRIVATE DONATIONS 9)MILESTONES 1)ON APRIL 4, 2017 ADE PURCHASED 7330 NW 12 STREET FOR 3 MIL, THE PROPERTY APPRAISED FOR 3.4MIL, TWO TENANTS WERE OCCUPYING, TAX E FILING LEASING AT 3,593.04 PER MO TILL APRIL 2018, AND VIDA PLENA AT 4,622 PER MONTH TILL APRIL 2018 2)THE ABOVE MENTIONED TENANT "TAX E FILING" LEFT PRIOR TO THEIR LEASE COMMITMENT THIS ALLOWED US TO MOVE ADE'S ADMINISTRATIVE OFFICES FROM OUR HIALEAH BRANCH TO THE SECOND FLOOR OF THE CENTRAL BRANCH, CREATING ADDITIONAL SPACE TO INCREMENT OUR HIALEAH ENROLLMENT AS WELL, IT OPENED UP NEW SPACE FOR CLASSROOM CREATION AT THE CENTRAL BRANCH SECOND FLOOR 3)ON APRIL 2018 THE LEASE FOR "VIDA PLENA CHURCH" TERMINATED AS THEY LEFT OUR BUILDING A NEW PHASE OF RE-MODELING BEGAN SINCE THE SPACE COULD NOW BE USED FOR PROGRAMMING PURPOSES THIS HAS OPENED UP MANY NEW OPPORTUNITIES FOR SERVICES AND ACTIVITIES SINCE PART OF THIS SPACE CONSTITUTES A 2,000 SQ FT AUDITORIUM 4)THE CULINARY TRAINING PROGRAM WAS DIVERSIFIED TO ALL THREE BRANCHES, NOW CONSISTING OF ONE HEAD CHEF/INSTRUCTOR, ONE ASSISTANT CHEF/INSTRUCTOR AND ONE VOCATIONAL SKILLS TRAINER 5)WE BEGAN OPERATING ADE'S SILVER PROGRAM, OFFERING SPECIALIZED GERIATRIC SERVICES TO 55+ DEVELOPMENTALLY DISABLED SENIORS 6)ADE RECEIVED 3 SPECIAL APPROPRIATIONS FROM TALLAHASSEE'S 2018 BUDGET LEGISLATIVE SESSION 1) 125,000 FOR CULINARY PROGRAM 2) FOR 75,000 FOR OUR SILVER PROGRAM 3) 100,000 FOR A CAPITAL OUTLAY, AFFORDING 33% OF THE COST TO BUILD A NEW PROFESSIONAL TRAINING KITCHEN, THE REMAINING COST WILL DERIVE FROM ADE'S BUILDING AND ACQUISITION RESERVES 7)ADE RECEIVED 22,000 FROM MAYOR SUAREZ, CITY OF MIAMI-SOCIAL SERVICES GAP PROGRAM 8)ADE ADDED A 15 PASSENGER FORD E-350 LX VAN TO ITS FLEET 9)ADE RECEIVED 98% COMPLIANCE FROM THE AGENCY FOR PERSONS WITH DISABILITIES DURING THE ANNUAL MONITORING VISIT 10)ADE RECEIVED 100% COMPLIANCE FROM METRO OFFICE OF MANAGEMENT AND BUDGET DURING THE ANNUAL MONITORING VISIT 11)ADE RECEIVED 100% COMPLIANCE FROM THE CITY OF MIAMI DURING THE ANNUAL MONITORING VISIT 12) ADE RECEIVED 70,659 FROM METRO CDBG PUBLIC SERVICE, COMMISSIONER DRIVEN FUNDING 10)PROJECTIONS AND GOALS FOR 2018-19 1)TO CONTINUE TO CONDUCT OUR CULINARY AND SILVER PROGRAMS WITH THE SPECIAL APPROPRIATION OBTAINED THROUGH THE 2018 TALLAHASSEE LEGISLATIVE SESSION, WHICH WAS APPROVED BY HOUSE AND SENATE AND NOT VETOED BY OUR GOVERNOR 2)TO PURSUE THE ARCHITECTURAL DESIGN FOR THE PROFESSIONAL TRAINING KITCHEN AND ELEVATOR AT THE ADE CENTRAL BRANCH IN ORDER TO COMMENCE THE CONSTRUCTION</p>

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FORM 990, PAGE 6, PART VI, LINE 11B	AN OFFICER OF THE ORGANIZATION WILL EXAMINE THE RETURN AND THE ACCOMPANYING SCHEDULES PRIOR TO FILING THE RETURN

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FORM 990, PAGE 6, PART VI, LINE 15A	BOARD OF DIRECTORS REVIEW AND APPROVE THE EXECUTIVE DIRECTOR'S COMPENSATION

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FORM 990, PAGE 6, PART VI, LINE 15B	BOARD OF DIRECTORS REVIEW AND APPROVE THE OTHER OFFICER OR KEY EMPLOYEE'S COMPENSATION

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FORM 990, PAGE 6, PART VI, LINE 19	THE GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

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FORM 990, PART XI, LINE 9	INTEREST EXPENSES -99,796 INTEREST EXPENSES 99,796