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SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete If the organization answered "Yes" to Form 990,
Part IV, Ilne 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-C-Open to F Inspection

Nama o	the organization		Employer Identification number						
MORC	CCAN AMERICAN COMMUNITY INC		35-2367197						
Part.	Organizations Maintaining Don	or Advised Funds or Other Simila	ar Funds or Accounts.						
	Complete if the organization ansy	vered "Yes" to Form 990, Part IV, fin	ne 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 do	onor advisors in writing that the assets h	eld in donor advised						
	funds are the organization's property, subjec	t to the organization's exclusive legal ∞	ntrol? X Yes No						
6	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 be	nefit?	X Yes No						
Part	Conservation Easements.								
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, lir	ne 7						
1	Purpose(s) of conservation easements held	by the organization (check all that apply)						
i	Preservation of land for public use (e.g., rec		ation of a historically important land area						
Ī	Protection of natural habitat	Preserv	ation of a certified historic structure						
,	=								
2	Preservation of open space Complete lines 2a through 2d if the organize	tion held a qualified conservation contrib	oution in the form of a conservation						
2	easement on the last day of the tax year.	MOT TIETO & QUARTICO CONTROL VALOR CONTROL	Held at the End of the Tax Year						
а	Total number of conservation easements.		. 2a						
b	Total acreage restricted by conservation eas								
c	Number of conservation easements on a ce		2c						
d	Number of conservation easements included		n a						
•	historic structure listed in the National Regis	· · ·	2d						
3	Number of conservation easements modifie		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		ction, handling of						
	violations, and enforcement of the conserva	uon easements it holds?	Yes No						
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conserva-	tion easements during the year						
									
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation e	easements dunng the year						
	\$								
8	Does each conservation easement reported								
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?								
9	In Part XIII, describe how the organization re								
	balance sheet, and include, if applicable, the		s financial statements that describes						
≰Rart	the organization's accounting for conservations.	on easements. ections of Art, Historical Treasur	roc on Other Cimilar Agests						
\$1541		wered "Yes" to Form 990, Part IV, In							
1a	If the organization elected, as permitted und								
	works of art, historical treasures, or other sin								
	of public service, provide, in Part XIII, the te								
b	If the organization elected, as permitted und								
	works of art, historical treasures, or other sin		lucation, or research in furtherance						
	of public service, provide the following amou	lina 1	▶ ¢						
	(ii) Accets included in Form 000, Part V	шс,	· , , , , , , > \$						
2	If the organization recovered or held weeks of	of historical traceuros of other similar	accept for financial corp. provides the						
2	If the organization received or held works of								
	following amounts required to be reported u								
a	Revenue included in Form 000, Part VIII, IIII	31, , , , , , , , , , , , , , , , , , , 	• \$						
<u>p</u>	Assets included in Form 990, Part X		· · · · · · · · · · · · · · · · · · ·						

Part	Organizations Maintaining	Collections	s of Art, Histo	rical Tr	easures, or	Other	Similar Assets	s (continued	<u>1)</u>
3	Using the organization's acquisition, acc	cession, and	other records, c	heck any	of the following	ng that a	are a significant		
•	use of its collection items (check all that	apply):							
a	Public exhibition		d L	Loan	or exchange p	orogram	\$		
b	Scholarly research		e	Other					
C	Preservation for future generations								
4	Provide a description of the organization Part XIII.	n's collection	s and explain ho	w they fu	irther the orga	anızatior	n's exempt purpos	se in	
5	During the year, did the organization so	licit or receiv	e donations of a	rt, historia	cal treasures,	or other	r similar		١
•	assets to be sold to raise funds rather the	han to be ma	intained as part	of the org	ganization's ci	ollection	ای	Yes	No
Part	V Escrow and Custodial Arra	ngements.					_	_	
	Complete if the organization	answered "	Yes" to Form	990, Par	t IV, line 9, o	or repo	rted an amount	on Form	
	990, Part X, line 21								
1a	Is the organization an agent, trustee, cu			y for conti	nbutions or ot	her ass	ets not	[] voc [No
	included on Form 990, Part X?			، ، ، . ماطمه ممند			• • • • •	Yes) NO
b	If "Yes," explain the arrangement in Pai	T XIII and col	mpiete the foliov	ving while	.		A	mount	
_	Beginning balance					10			
d	Additions during the year					1d			
6	Distributions during the year				<i>.</i>	1e			
f	Ending balance					1f			(
2a	Did the organization include an amount	t on Form 99	0, Part X, line 2	l, for escr	row or custodi	al acco	unt liability?	Yes X	No
ь	If "Yes," explain the arrangement in Pa	rt XIII. Check	here if the expl	anation h	as been provi	ded in F	Part XIII .	[_]
Pan									
Trice La	Complete if the organization	answered '	'Yes" to Form	990, Pai	rt IV, line 10			· · · · · · · · · · · · · · · · · · ·	
		(a) Current y			(c) Two years		(d) Three years back	(e) Four year	
1a	Beginning of year balance						. <u></u>	ļ	
b	Contributions				<u> </u>			 	
C	Net investment earnings, gains,					1			
	and losses		- 		ļ			 	
đ	Grants or scholarships				 				
e	and programs					- 1			
f	Administrative expenses								
g	End of year balance		0	0		0	(
2	Provide the estimated percentage of the	e current yea		line 1g, a	olumn (a)) hei	id as:			
а	Board designated or quasi-endowment		<u>%</u>						
b	Permanent endowment	<u>%</u>							
С	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2	c chould say	% al 100%						
3a	Are there endowment funds not in the			on that are	e held and ad	minister	ed for the		
Ju	organization by.	pa00000,0,,,	or gomean			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes	No
								3a(i)	
	(ii) related organizations							3a(li)	
b	If "Yes" to 3a(ii), are the related organia							3b	<u> </u>
4	Describe in Part XIII the intended uses		ization's endow	ment fund	is				
Par			987114- F	000 5	مه د دا ۱۱ المد. - د ا	. 0	E 000 D	V 1 40	
	Complete if the organization								
	Description of property		lost or other basis (investment)		ost or other sis (other)		Accumulated tepreciation	(d) Book √ ≘	-
1a	Land		0			l	S HOW HE WILLIAM		
b	Buildings		0		0		0		
C	Leasehold improvements		0		0		0		
d	Equipment		0		0	+	0		
е	Other	<u> </u>	0		0		0		
Tota	II. Add lines 1a through 1e. (Column (d) i	nust equal F	om 990, Pa rt X,	<u>column (</u>	(B), line 10c.)		<u> •]</u>		

	Investments—Other Securities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.						
(a) Description of security or category		(b) Book value	(c) Method of value Cost or end-of-year ma	ition:			
	(including name of security)	 	0				
	erivatives		0				
	o equity interests						
							
<u>(F)</u>		·					
<u>(G)</u>							
	nust equal Form 990, Part X, col (B) line 12.)	•	O LEWISCONDENSAME OF THE PROPERTY OF THE PARTY OF THE PAR	Continue of the second			
Part VIII	Investments—Program Re	lated.					
	Complete if the organization	answered "Yes" to Form 9	90, Part IV, line 11c. See Form	990, Part X, line 13.			
	(a) Description of investment	(b) Book value	(c) Method of valu Cost or end-of-year mi	ation arket value			
(1)							
_(2)							
(3)			 				
(4)							
<u>(5)</u>							
(6)							
(8)							
(9)			The state of the s				
	must equal Form 990, Part X, col. (B) line 13.)	<u> </u>	0 下海激激的点面 经股份股份	The state of the s			
Rardix	Other Assets.		200 Port IV lies 11d See Form	000 Part Y line 15			
	Complete if the organization	(a) Description	990, Part IV, line 11d. See Form	(b) Book velue			
		(a) Description					
(2)							
(3)							
(4)							
(5)							
(4) (5) (6)							
(5) (6) (7)							
(5) (6) (7) (8)							
(5) (6) (7) (8) (9)	no (h) must organi Form 000. Part V	' col (B) (ino 15)					
(5) (6) (7) (8) (9) Total. (Column	nn (b) must equal Form 990, Part X	', col (B) line 15.)					
(5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization		990, Part IV, line 11e or 11f. See	Form 990, Part X,			
(5) (6) (7) (8) (9) Total. (Colum	Other Liabilities. Complete if the organization line 25		· · · · · · · · · · · · · · · · · · ·	Form 990, Part X,			
(5) (6) (7) (8) (9) Total. (Colum Part X 2)	Other Liabilities. Complete if the organization line 25 (a) Description of hability	n answered "Yes" to Form 9	· · · · · · · · · · · · · · · · · · ·	Form 990, Part X,			
(5) (6) (7) (8) (9) Total. (Colum (Part X)	Other Liabilities. Complete if the organization line 25	n answered "Yes" to Form 9	990, Part IV, line 11e or 11f. See	Form 990, Part X,			
(5) (6) (7) (8) (9) Total. (Colum Part X 2)	Other Liabilities. Complete if the organization line 25 (a) Description of hability	n answered "Yes" to Form 9	990, Part IV, line 11e or 11f. See	Form 990, Part X,			
(5) (6) (7) (8) (9) Total. (Colum Part X (1) Federal (2) (3) (4)	Other Liabilities. Complete if the organization line 25 (a) Description of hability	n answered "Yes" to Form 9	990, Part IV, line 11e or 11f. See	Form 990, Part X,			
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(5) (6) (7) (8) (9) Total. (Column Part X (2) (1) Federal (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization line 25 (a) Description of hability	n answered "Yes" to Form 9	990, Part IV, line 11e or 11f. See	Form 990, Part X,			
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PartXIII	Supplemen	tal information	n (continued)					
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