

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



990-EZ

Short Form Return of Organization Exempt From Income Tax

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

2013

OMB No. 1545-1150

Open to Public

▶ Do not enter Social Security numbers on this form as it may be made public.

Inspection Department of the Treasury ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990. Internal Revenue Service A For the 2013 calendar year, or tax year beginning 2013, and ending JUNE 30,2014 B Check if applicable C Name of organization D Employer identification number FREATER ORGANIZATION For LUIS FURTH NATE
Number and street (or P O box, if mail is not delivered to street address) Address change 36-3225673 Name change Room/suite Foster Initial return 847-909-0768 Terminated

City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number > Application pending Other (specify) Cash G Accounting Method: ☐ Accrual H Check ► ☐ If the organization is not I Website: ▶ required to attach Schedule B J Tax-exempt status (check only one) - X 501(c)(3) (Form 990, 990-EZ, or 990-PF) 501(c) (◄ (insert no) ☐ 4947(a)(1) or K Form of organization Corporation Trust ☐ Association Other

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 2 3 3 4 Investment income 4

5a Gross amount from sale of assets other than inventory 5a **b** Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c 6 Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than

\$15,000) 6a Gross income from fundraising events (not including \$ 64222 of contributions from fundraising events reported on line 1) (attach Schedule G if the

sum of such gross income and contributions exceeds \$15,000) 6b 27 250 c Less: direct expenses from gaming and fundraising events . . .

Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract

6d 7a Gross sales of inventory, less returns and allowances 7a Less: cost of goods sold

Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . 7c 8 8

9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 10 Grants and similar amounts paid (list in Schedule O) 10 11 11 12

Salaries, other compensation, and employee benefits . . . 12 Professional fees and other payments to independent contractors. 13 14

Occupancy regit, pulyies pard mantenance . .

Printing publications, postage, and shipping 15 Other expenses (describe in Schedule O) Filing KUN . Bank Changus 16

Total expenses Add lines 10 through 16 17 18 Excess or (deficit) for the year (Subtract line 17 from line 9)

Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (explain in Schedule O) . . .

Net assets or fund balances at end of year. Combine lines 18 through 20 For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form 990-EZ (2013

31430

35

13

14

15

16

17

18

19

20

21

5066

Part I	Balance Sheets (see the instructions	for Part II)		-	-	
	Check if the organization used Schedule	O to respond to a	ny question in this		<u> </u>	<u></u> 🔀
				(A) Beginning of year		(B) End of year
	Cash, savings, and investments			31430	22	41083
	and and buildings				23	
	Other assets (describe in Schedule O)				24	111 6 11 5
	Total assets				25 26	41083
	Net assets or fund balances (line 27 of column		—		<u>2</u> 8 27	41083
Part II					<u> </u>	
	Check if the organization used Schedule	•		, ,	/Dogs	Expenses uired for section
What is	the organization's primary exempt purpose? R					c)(3) and 501(c)(4)
	e the organization's program service accompli					nizations and section
as meas	sured by expenses. In a clear and concise m	nanner, describe the	e services provided	I, the number of		(a)(1) trusts, optional hers.)
	benefited, and other relevant information for ea					·
28,	Dunption to Ma Smyth.	Standing To	LL FIN FO	<u> </u>		
	College Scholarships	······/				
	rants \$ 52,000) If this amount	includes foreign gra	ants, check here .	<u>, ▶ ⊔ </u>	28a	
29	Donation to Christo Rey	Fun (21/1891	B Scholans	14		
••••	•••••••••••••••••••••••••••••••••••••••					
(Gi	rants \$ 5 000) If this amount	ıncludes foreign gra	ints check here	> [29a	
30 🔏	UNATION to St. SABINA	My and I de	The Children	14	<u> </u>	
	Chaistmas Fund					
(Gr	ants\$/006) If this amount	ıncludes foreign gra	nts, check here .	▶ 🗆	30a	
31 Ot	ner program services (describe in Schedule O)					
	ants \$ /600) If this amount	ıncludes foreign gra	ints, check here .	▶ 🗆	31a	
	tal program service expenses (add lines 26a				32	
Part IV	• • • • • • • • • • • • • • • • • • • •		,		struc	tions for Part IV)
	Check if the organization used Schedule	1	y question in this (c) Reportable	Part IV		<u> U</u>
	(a) Name and title	(b) Average hours per week	compensation	contributions to employe		
	,,	devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and deferred compensation		her compensation
Ta	hn Oston		, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	 	-
Pas	s. dent	AS NEWLOS	-0-	- C ~		-0-
	Luc C Lille					
Vic	nser sakulté u Priesident nus P. Burke Tr	AS NEODED				-0 -
JAI	nus P. Burke Tr	, , , ,				
Vic	U PRUSI JUNI	As NEOded	-01	-0.		~/~
					1	-
		1				
				-	-	
		1	<u> </u>		 	
		1				
					+	
		1				
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		+	
		1				
		1				
					Τ	
		1		1	1	

Par	, and the second			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If 'No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b 39	,			İ
о э а	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9] .	
b	Gross receipts, included on line 9, for public use of club facilities	1 -	.,	بد
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		, ,	
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			!
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	,	-	
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	1.2	, `	
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed ►		l	
42a	The organization's books are in care of ► TAMES P. BURKE To Telephone no. ► 647	909	7-07	68
	Located at ► 815 Foster Ave Lake BLUFF \$1 ZIP+4 ► 400	44-		
D	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		Yes	
	If "Yes," enter the name of the foreign country:	42b		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	,,		- <u>-</u> '
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. •	- []
			Yes	No
	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	»	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	12*	X
c d	Did the organization receive any payments for indoor tanning services during the year?	44c	¥ in	X
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		X

46	Did the organization engage, directly or i	ndirectly, in political o	campaign activities o	n behalf of c	or in oppositio	n Par	Yes No
	to candidates for public office? If "Yes," of	complete Schedule C	Part I		<u> </u>	46	X
Part	Section 501(c)(3) organization: All section 501(c)(3) organization 50 and 51.		estions 47-49b and	152, and co	omplete the	tables fo	or lines
	Check if the organization used Sc	hedule O to respond	d to any question in	this Part VI	<u> </u>	<u> </u>	🗀
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par		section 501(h) electi	on in effect	during the ta	1 1	Yes No
48	Is the organization a school as described i		ii)? If "Yes." complete	Schedule F		47	
49a	Did the organization make any transfers t	to an exempt non-cha	aritable related organ	zation?		49a	
50	If "Yes," was the related organization a se Complete this table for the organization's	ection 527 organization	on?			49b	
30	employees) who each received more than	n \$100,000 of compe	nsation from the orga	aner man om Anization. If t	here is none,	enter "N	one"
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	(d) Health contributions benefit plans	benefits,		d amount of
		N/A					
						,	_
				<u> </u>			
1 51	Total number of other employees paid ov Complete this table for the organization'	· · · · · · · · · · · · · · · · · · ·		t contractors	s who each r	ocaivod	more tha
	\$100,000 of compensation from the orga	anization. If there is no	one, enter "None."		- Who cach is		TIOIC III
	(a) Name and business address of each independ	dent contractor	(b) Type of ser	vice	(c) Co	ompensatio	חי
							·-·
		PARCE	N/A				
							
			-				
			-				
d	Total number of other independent contra	ectore aach racalluna	Over \$100,000		-0-		
	Did the organization complete Schedule A	•	•	and 4947(a			
	nonexempt charitable trusts must attach			<u> `</u>		▼ Yes	□ No
Under pe true, com	nalties of perjury, I declar@ that I have examined this i ect. and complete Declaration of preparer (other than	return, including accompan officer) is based on all info	ying schedules and statem ormation of which preparer	ents, and to the has any knowle	best of my know dge	rledge and l	belief, it is
	1 Some Bounds 1.				11-4.3	1014	
Sign Here	Signature of officer Thomas P. Bunka	In Vici	Pausidunt	Dat	θ		
	Print/Type preparer's name	Preparer's signature	α Ι	ate	<u> </u>	PTIN	
Paid Prepa					Check L if self-employed		
Use C	only Firm's name ►			Firm	n's EIN ▶		
May the	Firm's address e IRS discuss this return with the preparer	r shown above? See	nstructions	Pho	ene no	□ Ves	□ No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection Employer identification number

	of the organization	<i>7</i> ₽ .	1 15	7-	KL		_	Employer (de ntificatio	
	RUNTUR	DAGANIZA	tion For	L255	Fortu	NATE		36-3225	(673
								oart.) See instruction	ons.
ine c		not a private found							
1		convention of chur				ibea in sa	ection 1/	'U(b)(1)(A)(i).	
2 3		escribed in sectio i					- 470/LV	4\/4\@in	
4		or a cooperative he						1)(A)(III). section 170(b)(1)(A)	(iii) Enter the
7		name, city, and sta		on junio a	on with a nos	pitai desc	anoeu in s	section fro(b)(1)(A)	(III). Criter the
5	An organiz		the benefit of a	a college	or university	owned c	or operate	ed by a governmen	tal unit described in
	An organiz	state, or local gove ation that normally n section 170(b)(1	receives a sub	stantial p	art of its sup)(1)(A)(v). Inmental unit or fron	n the general public
8	☐ A commun	ity trust described	in section 170(l	o)(1)(A)(vi). (Complete	Part II.)			
9	An organization organization of the composition of	ation that normally om activities relate om gross investm y the organization a	receives: (1) med to its exempted to its exempted to its exempted to income and after June 30, 19	ore than function unrelate 75 Sees	331/3% of its is—subject to ed business section 509(a	support certain taxable i a)(2). (Cor	exceptio ncome (l mplete Pa	,	e than 331/3% of its
		ation organized and							
11	one or mor	e publicly supporte	d organizations	described	in section 5	09(a)(1) o	r section	nctions of, or to carry n 509(a)(2). See sect complete lines 11e, 1	tion 509(a)(3). Check
а	the suppo		s) the power to r	egularly a	appoint or ele			ed organization(s), ty e directors or trustee	
b	control or		ne supporting or	ganızatıo	n vested in th			pported organizatioi hat control or manaç	
С	Type III f		ated. A supporti	ng organ	ızatıon opera			with, and functionall	y integrated with,
d	that is no		rated. The organ	ization ge	enerally must	satisfy a	distributi	tion with its support on requirement and I Part V.	
е		s box if the organia By integrated, or Ty						itis a Type I, Type I n.	I, Type III
f	Enter the nur	nber of supported	organizations .						
g	Provide the fo	ollowing information	on about the sup	ported or	ganızatıon(s).	,		4	
	(i) Name of suppo	rted organization	(ii) EIN	(describ	of organization ed on lines 1-9 or IRC section instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				(000)		Yes	No	j :	
(A) F	2 Smyth - Tahh Fd	standing N	32-0156071	,	/3		X	52,000	
(B) C/	hristo Ru	у	36-4067306		5		¥	5-000	
(C)/n	Holic C	haritius	36.2170821	ļ	5		¥	1000	
(D)7		A dkhy	34.3245626		6		V	600	
(E)	t. Sabiur	<u>, </u>	36.2171123	3	5		X	1000	
Total								59.400	

Schedu	sle A (Form 990 or 990-EZ) 2014						Page 2
Part	(Complete only if you checked the Part III. If the organization fails to	he box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qua	
	on A. Public Support		r	T	1 20 22 2	1-7.500	
Caler 1	ndar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
2	Tax revenues leved 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)				E WA	The state of the s	
6	Public support. Subtract line 5 from line 4.	7, 32				take of a	
Secti	on B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 8	Amounts from line 4				<u> </u>		
J	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		,			5,	
12	Gross receipts from related activities, etc	. (see instructi				12	
13	First five years. If the Form 990 is for the						
Sacti	organization, check this box and stop he ion C. Computation of Public Support			• • • • •	<u> </u>	· · · · ·	
14	Public support percentage for 2014 (line			11 column (fi)		14	%
15	Public support percentage from 2013 Sci		•			15	%
16a	331/3% support test - 2014. If the organi					13% or more, cl	neck this
	box and stop here. The organization qua						
þ	331/3% support test – 2013. If the organ check this box and stop here. The organ					9 15 is 33¹≈% 	
17a	10%-facts-and-circumstances test —2 10% or more, and if the organization me Part VI how the organization meets the "i organization".	ets the "facts- facts-and-circi	-and-circumsta	ances" test, che st. The organiz	eck this box ai	nd <mark>stop here.</mark> E	xplain ın
b	10%-facts-and-circumstances test – 2 15 is 10% or more, and if the organiza						

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

18

instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

	if the organization fails to qualify	under the te	sts listed bei	ow, piease co	omplete Part	11.)	
	on A. Public Support				, :		·
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees		11	4.4.			
2	received (Do not include any "unusual grants") Gross receipts from admissions, merchandise	46,350	42 955	45165	43271	64222	241963
2	sold or services performed, or facilities		İ			İ	
	furnished in any activity that is related to the	}					
	organization's tax-exempt purpose			ļ			
3	Gross receipts from activities that are not an			ĺ			
	unrelated trade or business under section 513						
4	Tax revenues levied for the					[
	organization's benefit and either paid	1					
	to or expended on its behalf						
5	The value of services or facilities	}					
	furnished by a governmental unit to the						
	organization without charge .	177					
6	Total. Add lines 1 through 5	46350	42 955	45165	43271	64222	241963
7a	Amounts included on lines 1, 2, and 3)	
	received from disqualified persons				<u> </u>		
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						
	Add lines 7a and 7b	in January e	ar bus sistematics	. S. d. S. and dec. or	St	aches about the Continue	
8	Public support (Subtract line 7c from line 6)			一种		Mark to the	1// 6/2
Casti	<u> </u>	(A) 12 (A) (A) (A)	AL THE	こうから 人名 大学	4/4/2	Har Care Co	241963
	on B. Total Support	(=) 0040	(In) 0044	(2) 0040	(-1) 0040	(-) 0044	(6) Tabel
	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9		46350	42955	45165	43271	64222	241963
IVa	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties and income from similar sources	1					
h	Unrelated business taxable income (less						
D	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)	46 350	42.955	45165	47271	64222	241963
14	First five years. If the Form 990 is for the		's first, secon	d. third. fourth	or fifth tax ve		
	organization, check this box and stop he				_		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2014 (line	6, column (f) di	vided by line 1	3, column (f))		15	100 %
16	Public support percentage from 2013 Sci					16	100 %
	on D. Computation of Investment In						
17	Investment income percentage for 2014 (y line 13, colur	mn (f))	17	%
18	Investment income percentage from 2013					18	%
19a	331/3% support tests - 2014. If the organ					ore than 331/39	
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2013. If the organiz	zation did not d	heck a box on	line 14 or line	19a, and line 16	is more than 3	31/3%, and
	line 18 is not more than 331/3%, check this	box and stop h	ere. The organi	zation qualifies	as a publicly s	upported organi	zation 🕨 🕱
20	Private foundation. If the organization di	d not check a	box on line 14,	, 19a, or 19b, c	heck this box	and see instruc	tions 🕨 🔲

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A

		Vaa	٢
Section A.	. All Supporting Organizations		
	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.	.)	
	and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, comple	ete	

			res	I NO
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <i>Part VI</i> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.			
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <i>Part VI</i> how the organization determined that the supported	1		,
32	organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2		
	(b) and (c) below.	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)? If "Yes," describe in <i>Part VI</i> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in <i>Part VI</i> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <i>Part VI</i> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	,	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <i>Part VI</i> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		,	-
5a		4c 5a	. 4.7	
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 (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent	6	,	
8	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	7		
•	If "Yes," complete Part I of Schedule L (Form 990).	8	B. 1.	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <i>Part VI</i> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	2° 34 2° 34	
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	· 14 1/2 / 1		· c
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a	-	
	determine whether the organization had excess business holdings \	10h		

Schedu	ile A (Form 990 or 990-EZ) 2014			Page -
Part	V Supporting Organizations (continued)			
4.4			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	- '		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		 -
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If Yesi to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations	1	'	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			2
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	4,	-=	
	tax year? If "No," describe in <i>Part VI</i> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,	1	1.	3
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			5 4
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
_		1	, , ,	-
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	خ څ	ļ. ~~.	. *
	Whow providing such benefit carried out the purposes of the supported organization(s) that operated,		,	F;
	supervised, or controlled the supporting organization.	2		
Secti	on 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		. 7	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			4
	or management of the supporting organization was vested in the same persons that controlled or managed	السيسا	, 	
<u> </u>	the supported organization(s)	1		
Secu	on D. All Type III Supporting Organizations		V	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax	18. 28. 18. 28.		
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	4	2 40 %	.
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1 1	200	,
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	7.7. T.	1	
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	300		*
	supported organizations played in this regard.		-	<u> </u>
Secti	on E. Type III Functionally-Integrated Supporting Organizations	3		
1			. 47	
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	กรเกน	cuon	s).
a	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a government entity. Describe in Part VI how you supported a government entity (s	soo ins	drugei.	2201
) 	Sti GC LI	O115).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	199	r ii	F
	the supported organization(s) to which the organization was responsive? If "Yes," then in <i>Part VI identify</i>	-		4 37 12 47
	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			. A.
	that these activities constituted substantially all of its activities.	2a		7 Jan
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		P ost	2
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	100	無	
	reasons for the organization's position that its supported organization(s) would have engaged in these			-
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.		34%	· .
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	经	1	المرابعة المرابعة المرابعة المرابعة المرابعة المرابعة المرابعة المرابعة المرابعة المرابعة المرابعة المرابعة ال المرابعة المرابعة ال
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	***	5.4	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2014			Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gar	nizations	
Check here if the organization satisfied the Integral Part Test as a qualifyin other Type III non-functionally integrated supporting organizations must contain the containing organization of the containing organization organizat	g tru ompl	ust on Nov. 20, 1970. See in lete Sections A through E.	nstructions. All
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	7.2	-
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			200
instructions for short tax year or assets held for part of year):			
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		the second of th	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 65% of line 1	2	35	
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	2 (T & 1) () ()	
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	- 4 m - 4 m	
7 Check here if the current year is the organization's first as a non-functional	1	tegrated Type III supporting	organization (see
instructions).	·, '''	agrated type in supporting	, organization (See

Part		3) Supporting Organ	izations (continued)				
Secti	on D - Distributions			Current Year			
1_	Amounts paid to supported organizations to accomplish						
2	2 Amounts paid to perform activity that directly furthers exempt purposes of supported						
	organizations, in excess of income from activity						
3	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	8 Distributions to attentive supported organizations to which the organization is responsive						
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2014 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
		/15	(ii)	(iii)			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014			
1	Distributable amount for 2014 from Section C, line 6		*-				
2	Underdistributions, if any, for years prior to 2014			. " '.			
	(reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2014:	1,1,		,			
а			·				
b							
C			·	,- ,- ,			
d							
е	From 2013		<u>.</u> .	٠			
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2014 distributable amount	. , , , , , ,	1 74				
i	Carryover from 2009 not applied (see instructions)			,			
J	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2014 from Section	,	, ,				
	D, line 7: \$, , , , , , , , , , , , , , , , , , , ,	1			
а	Applied to underdistributions of prior years			•			
b	Applied to 2014 distributable amount						
С	Remainder. Subtract lines 4a and 4b from 4.			-			
5	Remaining underdistributions for years prior to 2014, if	•		#15 A 37			
	any. Subtract lines 3g and 4a from line 2 (if amount						
	greater than zero, see instructions).						
6	Remaining underdistributions for 2014. Subtract lines 3h	/					
	and 4b from line 1 (if amount greater than zero, see						
	instructions).		•				
7	Excess distributions carryover to 2015. Add lines 3 _j and 4c.		- 4	-			
8	Breakdown of line 7:		- ,				
a			1				
b	-						
				* * * * * * * * * * * * * * * * *			
_	Excess from 2013						
e	Excess from 2014						
Ç	LAUGOS HOTH ZU 14	<u> </u>		<u> </u>			

	Form 990 or 990-EZ) 2014 Page
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)
•	
	······································
	·

Schudulu O

Donation to Catholic Charities

\$ 1000

Sonation to Losuph Academy

600