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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)

OMB No. 1545-1150 2015

Department of the Treasury

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

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

Open to Public Inspection

A F	or the	2015 calendar year, or tax year beginning January 1 , 2015, and ending D	ecembe	er 31 , 20 15
_	Check If as			dentification number
_	Address o		B0-0220235	
$\overline{}$	Name cha	ephone r		
	Initial retu		•	16-340-4331
=		n/terminated City or town, state or province, country, and ZIP or foreign postal code		emption
=	Amended	return	umber	•
_				if the organization is not
	Vebsite			tach Schedule B
				30-EZ, or 990-PF)
		organization: Corporation Trust Association Other Non-Profit Organiz		70 12, 01 000 11)
		s 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total asset		
		umn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	ັ ▶ ₁	\$ 42,412.22
	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instru	uction	
		Check if the organization used Schedule O to respond to any question in this Part I		
	1	Contributions, gifts, grants, and similar amounts received	1	41,843.84
	2	Program service revenue including government fees and contracts	2	11,045.04
	3	Membership dues and assessments	3	0
	4	Investment income	4	568.38
	5a	Gross amount from sale of assets other than inventory	<u> </u>	000.00
	Ь	Less: cost or other basis and sales expenses	葥	
	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6	Gaming and fundraising events	-	
	а	Gross income from gaming (attach Schedule G if greater than		
9	_	\$15,000)	o	
Revenue	Ь		7	
<u>\$</u>		from fundraising events reported on line 1) (attach Schedule G if the	j -	İ
		sum of such gross income and contributions exceeds \$15,000) 6b	0	
	С	Less: direct expenses from gaming and fundraising events 6c	히	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract	7	
		line 6c)	6d	0
	7a	Gross sales of inventory, less returns and allowances	0	
	Ь	Less: cost of goods sold	ō	
	С	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0
	8	Other revenue (describe in Schedule O)	8	0
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	42,412.22
	10	Grants and similar amounts paid (list in Schedule O)	10	0
	11	Benefits paid to or for members	11	0
es	12	Salaries, other compensation, and employee benefits	12	0
Š	13	Professional fees and other payments to independent contractors	13	5140.72
Expenses	14	\\	14	26,948.15
Ω	15	Printing, publications, postage, and shipping	15	3,441.06
	16	Other expenses (describe in Schedule O)	16	9,679.02
_	17	Total expenses. Add lines 10 through 16	17	45,208.95
ş	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-2,796.73
98	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with		
As	_	end-of-year figure reported on prior year's return)	19	
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	
For	Paper	work Reduction Act Notice, see the separate instructions. Cat. No. 10642		Form 990-EZ (2015)

Pa	t II Balance Sheets (see the instructions t	•				
	Check if the organization used Schedule	O to respond to a	ny question in this			<u> </u>
			į_	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			50,856.37		16,771.55
23	Land and buildings				23	22 227 55
24 25	Total assets			50,856.37		33,287.55 50,059.10
26	Total liabilities (describe in Schedule O)		-	50,856.37		52,856.37
27	Net assets or fund balances (line 27 of column				27	32,030.31
Par						
	Check if the organization used Schedule			·		Expenses
Wha	t is the organization's primary exempt purpose?		ic about the benefits			uired for section c)(3) and 501(c)(4)
as n	ribe the organization's program service accompli- neasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the				nizations; optional for
28	Providing chapter scholarships					
	(Grante \$) If this amount	includes foreign gra	unto chock here		28a	
29	Dutting on the notional conference				208	
25						
	(Grants \$) If this amount	includes foreign gra	ints, check here .	▶ □	29a	
30	Developing the next generation of space industry lea	aders				
		includes foreign gra			30a	
31	Other program services (describe in Schedule O)				24.	
32	(Grants \$) If this amount Total program service expenses (add lines 28a t	includes foreign gra	inis, check here .	· · · P 🗆	31a 32	<u></u>
Par						tions for Part IV
-	Check if the organization used Schedule					
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and	0	Estimated amount of their compensation
And	rew Newman	20				
Pres	ident	20	0		0	0
	ı Conafay	20				
	utive Director		0	-	0	0
	Stenson	5				
	surer Pace		0		<u> </u>	0
	Chair	20	0		0	0
	kel Clarkson				+	<u>~</u>
	etary	20	0		0	0
Emil	y Judd	20				
Chal	r of the Council of Chapters	20	0		0	0
Meh	met Akbulut	20				
			0		0	0
		1				
					+	
					+	
			L			
		ı	ı	1		

Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	ran	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	163	140
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		,
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		,
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	\vdash	
c	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		
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		/
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0	-		, ,
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		,
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	000		
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9	1		
b	Gross receipts, included on line 9, for public use of club facilities	-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	-	,
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
đ	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization		-	
e	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		,
41	List the states with which a copy of this return is filed ► Texas			
42a			10-433°	1
L	Located at ▶ 9450 Gilman Drive, La Jolla, CA ZIP + 4 ▶ At any time during the calendar year, did the organization have an interest in or a signature or other authority over	920	092	
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	NO
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		V
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ □
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		,
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		v
C	Did the organization receive any payments for indoor tanning services during the year?	44c		~
đ	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an]	
45	explanation in Schedule O	44d		
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		~
O	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		-

Form 990)-EZ (2(015)							F	Page 4
	_								Yes	No
46	Did th	ne organization engage, directly or in	ndirectly, in political of	ampaign activities	on beh	alf of or i	in opposit	tion		
		ndidates for public office? If "Yes," o							1	1
Part V		Section 501(c)(3) organizations			-					
CITY		All section 501(c)(3) organization		etions 47–49h ar	nd 52	and con	oplete th	e tables	for lin	29
		50 and 51.	o maor anomor que				.p.o.c	0 145100		00
			hadula O ta raanana	l to any guantian i	n thia E	lost \/I				
		Check if the organization used Sc	nedule O to respond	to any question	11 11115 1	ait vi		· · · · ·	136	· [_]
			P. 9						Yes	No
		he organization engage in lobbying				епест а	unng the		1	١.
	•	If "Yes," complete Schedule C, Par						· 47		<u> </u>
48	Is the	organization a school as described in	n section 170(b)(1)(A)(i	i)? If "Yes," comple	te Sche	dule E		. 48	1	~
49a	Did th	ne organization make any transfers t	o an exempt non-cha	ıritable related orga	ınizatioı	1?		. 49a	1	1
b	If "Ye	s," was the related organization a se	ection 527 organization	on?				. 49b		
		olete this table for the organization's								
	emple	oyees) who each received more than	1 \$100,000 of compe	nsation from the or	ganizati	on. If the	ere is non	e, enter "	None."	1
			(b) Average	(c) Reportable		d) Health b				
	(a)	Name and title of each employee	hours per week	compensation			employee nd deferred	(e) Estimate other con		
			devoted to position	(Forms W-2/1099-MIS	SC) Delle	compens		other co	препод	пол
	-									
					_					,
							ł			
				 						
			* ·							
f	Total	number of other employees paid ov	er \$100,000	. ▶No	ne					
51	Comp	plete this table for the organization	s five highest comp	ensated independe	ent cont	ractors	who each	received	l more	than
	\$100,	000 of compensation from the orga	inization. If there is no	one, enter "None."						
	(a)	Name and business address of each independ	tant contractor	(b) Type of	romuce.		(0)	Compensa	hon	
_	ν/	Traine and business decrees of east mapping		(2) 1) po o.	30. 1.00					
		***************************************		1						
				1						
				1						
										
				†						
			.							
				1						
	T			- Mar 64 00 000			**			
		number of other independent contra	_					one		
		the organization complete Schedu	ıle A? Note: All se	ection 501(c)(3) o	ganizat	ions mu				
	comp	oleted Schedule A				<u>· · · · </u>	<u></u>	.►☑ Ye	s ∐ l	No
		of perjury, I declare that I have examined this						rowledge an	d belief,	ıt ıs
true, com	ect, an	d complete. Declaration of preparer (other than	n officer) is based on all into	ormation of which prepa	rer has an					
		Don Stain				5/:	28/2016			
Sign		Signature of officer				Date				
Here		Benjamin Stenson, Treasurer								
		Type or print name and title					<u> </u>			
Da: 4		Print/Type preparer's name	Preparer's signature		Date		Check	, PTIN		
Paid		- 25-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5					self-emplo			
Prepa		Firm's name ▶				Eisen	s EIN ▶	- 1		
Use C	חוע	Firm's address ▶		Phone no						
May the	e IRS	discuss this return with the prepare	r shown above? See	instructions			9 IIU	► ☐ Ye		No
.v.uy un	J 10	Sissess with the higher	200461 066		• •	· · · · · ·			الي س	40

SCHEDULE A

(Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2015

Open to Public Inspection

Stud	ents for the Exploration and Develop	ment of Space, U	ISA			80-02	20235
Par							ns.
The o	organization is not a private founda A church, convention of church A school described in section	nes, or associati	on of churches descri	bed in se	ction 17	D(b)(1)(A)(i).	
3	☐ A hospital or a cooperative hos ☐ A medical research organization hospital's name, city, and state	spital service org on operated in co	janization described in	n section	170(b)(1)(A)(iii).	iii). Enter the
5	An organization operated for a section 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	d by a government	al unit described in
6 7	☐ A federal, state, or local govern ☐ An organization that normally described in section 170(b)(1)	receives a subs	tantial part of its supp				the general public
8	☐ A community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	An organization that normally receipts from activities related support from gross investme acquired by the organization at	to its exempt nt income and	functions—subject to unrelated business t	certain axable in	exceptioi ncome (l	ns, and (2) no more ess section 511 tax	than 331/8% of its
10 11	☐ An organization organized and ☐ An organization organized and one or more publicly supported the box in lines 11a through 11a	operated exclusi l organizations d	vely for the benefit of, escribed in section 5 6	to perfori 09(a)(1) o	m the fun r section	ctions of, or to carry 509(a)(2). See secti	on 509(a)(3). Checl
а	☐ Type I. A supporting organize the supported organization(so organization. You must com) the power to re	egularly appoint or ele				
b	Type II. A supporting organize control or management of the organization(s). You must control or management or the	e supporting org	janization vested in th				
C	Type III functionally integra its supported organization(s)						y integrated with,
d	Type III non-functionally interest that is not functionally integral requirement (see instructions	ated. The organi	zation generally must	satisfy a	distributi	on requirement and	
e	Check this box if the organiz functionally integrated, or Ty						I, Type III
f							
g			1			,	
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
		-		Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							

18

Part							
	(Complete only if you checked the Part III. If the organization fails to						alify under
Secti	on A. Public Support			<u> </u>		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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.						
	on B. Total Support	<u> </u>					
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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	L		<u> </u>			
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he	re	· · · · ·	· · · · ·			· · · <u></u>
	on C. Computation of Public Suppor						
14	Public support percentage for 2015 (line to		-			14	<u>%</u>
15 16-	Public support percentage from 2014 Scl				 d line 14 ie 22	15	%
16a	331/a% support test—2015. If the organic box and stop here. The organization qua	llifies as a publ	licly supported	l organization			🕨 🖂
b	331/3% support test—2014. If the organ check this box and stop here. The organ					e 15 is 33 ¹ /3%	or more, ► □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization	ets the "facts-	and-circumsta umstances" te	ances" test, che st. The organiz	eck this box a ation qualifies	nd stop here.	Explain in
ь	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part VI how the organization m	tion meets the	e "facts-and-c	rcumstances"	test, check t	his box and st	top here.

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

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")		1	1		41,843.84	
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the			1			
	organization's tax-exempt purpose		<u> </u>			o	
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513					o	
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf					o	
5	The value of services or facilities		-				-
	furnished by a governmental unit to the	}					
	organization without charge					0	
6	Total. Add lines 1 through 5					41,843.84	
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .					o	
b	Amounts included on lines 2 and 3						
	received from other than disqualified			ĺ			
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	L		<u> </u>	<u> </u>	0	
C	Add lines 7a and 7b					0	
8	Public support. (Subtract line 7c from						
	line 6.)			<u> </u>			
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6					41,843.84	
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			İ			
	royalties and income from similar sources .					568.38	
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses					}	
	acquired after June 30, 1975				<u> </u>	0	
С	Add lines 10a and 10b					568.38	
11	Net income from unrelated business						
	activities not included in line 10b, whether				J		
	or not the business is regularly carried on			<u> </u>	•	0	
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)					o	
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	L				42,412.22	
14	First five years. If the Form 990 is for the	-	n's first, secon	d, third, fourth	n, or fifth tax ye	ear as a section	501(c)(3)
	organization, check this box and stop he				<u> </u>		> 🗆
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2015 (line					15	0 %
16	Public support percentage from 2014 Sci			<u> </u>	<u> </u>	16	0 %
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2015 (• • •	-	• • •	17	1.4 %
18	Investment income percentage from 2014					18	0 %
19a	331/3% support tests - 2015. If the organ						
	17 is not more than 331/3%, check this box	and stop here	. The organizatı	on qualifies as	a publicly supp	orted organizatio	on . 🕨 🗀
b	331/3% support tests-2014. If the organiz						
	line 18 is not more than 331/23%, check this	box and stop l	nere. The organ	ızatıon qualifies	s as a publicly s	upported organi	zation 🕨 📋
20	Private foundation. If the organization di	id not check a	box on line 14	, 19a, or 19b, o	check this box	and see instruc	tions 🕨 🔽

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A All	Supporting	Organizations

ecu	on A. All Supporting Organizations		·	
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.	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)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (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 Part VI 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 Part VI what controls the organization put in place to ensure such use.	3с		
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 Part VI 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 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.	4c		-
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? 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).	5a		· Servene ⁻²²
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		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? 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? If "Yes," provide detail in Part VI .	5c		
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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	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))? If "Yes," provide detail in Part VI .	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? If "Yes," provide detail in Part VI.	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? If "Yes," provide detail in Part VI .	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)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

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Part	IV Supporting Organizations (continued)			
	III II	Γ	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		ľ	
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		
ь	A family member of a person described in (a) above?	11b	<u> </u>	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" 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 regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? 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.	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 VI how providing such benefit carried out the purposes of the supported organization(s) that operated, 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 or trustees of each of the organization's supported organization(s)? 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).	1	_	
Secti	on 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?	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 the organization maintained a close and continuous working relationship with the supported organization(s).	2		2 50
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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations		·	
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in 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. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in Part VI).			
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 the supported organization(s) to which the organization was responsive? 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.	2a		
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? 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.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3ь		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain the containing of the containing organization of the containing o			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		
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	1.	,,	_
instructions for short tax year or assets held for part of year):	<i>()</i>	The state of the s	-15. 15.
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):	- 64		
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	4	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		, ·	
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).	y-in	tegrated Type III supporting	organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	on D - Distributions		·	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	rted		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	poses of supported orga	nızatıons	
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	th the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	·•·		
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1_	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b	,			
С				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)		·	
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D, line 7: \$		in min'ny fivon'ny faritr'i Europe	** **
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if		······································	
	any. Subtract lines 3g and 4a from line 2 (if amount			ı
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				· · · · · · · · · · · · · · · · · · ·
b				
С	Excess from 2013			
d	Excess from 2014			
е	Excess from 2015			

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.)
1	A