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## -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

Name of the organization Employer ide							n number		
	Need of SC	90-0340073							
	Reason for Public Cha						ons.		
_	rganization is not a private foundation because it is: (For lines 1 through 11, check only one box.)								
1 2	☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
3		☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
4							(iii). Enter the		
•	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 organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross								
	receipts from activities related								
	support from gross investme acquired by the organization a						x) from businesses		
10	An organization organized and		*		-	-			
11		-		•			out the nurnoses of		
	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 <b>section 509(a)(1)</b> or <b>section 509(a)(2)</b> . See <b>section 509(a)(3)</b> . Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.								
а	☐ <b>Type I</b> . A supporting organiz	ation operated,	supervised, or control	led by its	supporte	ed organization(s), ty	pically 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									
	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.								
е	Check this box if the organization received a written determination from the IRS that it is a Type I, Type III functionally integrated, or Type III non-functionally integrated supporting organization.								
f	Enter the number of supported of	organizations .							
9	Provide the following information	n about the supp	orted organization(s).						
	(f) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	listed in your governing		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
(A)									
(B)									
(C)									
(D)									
(E)									
	1								

## 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	ion A. Public Support	411007 4110 40	oto notog bere	ov, picase ec	inplote i arti	''.)	<del></del>
	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	<u> </u>		(4)	(17 ) 5 1 1 1
	received. (Do not include any "unusual grants.")	5116.23	(appr.)5200.00	5228.30	6786.64	10,220.00	32,551.17
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	0	0	0110.00	0,00.04	0	0
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	o	0	0	o	0
6	Total. Add lines 1 through 5	5116.23	5200.00	5228.30	6786.64	10,220.00	32,551.17
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	0	0	0	0	0	0
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						
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support. (Subtract line 7c from line 6.)		0	0	0	0	22 551 17
Secti	on B. Total Support		L			L	32,551.17
	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	5116.23	5200.00	5228.30	6786.64	10,220.00	32,551.17
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	0	0	0	0	0	0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	0	0	0	0	0	0
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.)	0	0	0	0	0	0
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	5116.23	5200.00	5228.30	6786.64	10,220.00	0
14	First five years. If the Form 990 is for the organization, check this box and stop her	e organizatior	i's first, second	d, third, fourth,	or fifth tax ye	ear as a section	
Secti	on C. Computation of Public Support				· ·		
15	Public support percentage for 2015 (line 8			3, column (f))		15	100 %
16	Public support percentage from 2014 Sch					16	100 %
	ection D. Computation of Investment Income Percentage						
17	Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) 17						
18	Investment income percentage from 2014 Schedule A, Part III, line 17						
19a	331/3% support tests-2015. If the organization	zation did not	check the box	on line 14, an	d line 15 is m	ore than 331/3%	, and line
	17 is not more than 331/3%, check this box a	ınd stop here.	The organization	on qualifies as a	publicly suppo	orted organization	on . 🕨 🗸
b	331/3% support tests - 2014. If the organiza						31/3%, and
20	line 18 is not more than 331/5%, check this be <b>Private foundation.</b> If the organization did						

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.)
	AFTGE CHECKING WITH OTHER TAX PLOFESSIONALS, AS
	WELL AS THE SC SECRETARY OF STATES OFFICE.
	BELIEVE THAT I SHOVED HAVE MORELY FILED A 990-N
	HATGE CHECKING WITH DTHER TAX PROFESSIONALS, AS WELL AS THE SC SECRETARY OF STATES OFFICE, I BELLEVE THAT I SHOVED HAVE MORELY FILED A 990-N (5-105TEARS)   WILL, IN THE GUTVRE, CHECK THIS POSSIBILITY BUFFORE FILING.
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