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# MD JUL OF 2018

Form **990-EZ** 

# Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

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

2015

Department of the Treasury Internal Revenue Service ▶ 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 begi	nning January 1 2	2015 , 2015,	and ending	Dec	ember 31	, 20 15
Вс	heck if ap	plicable: C Name of organization				D Emplo	oyer identificat	ion number
	Address c	nange Hearts and Hammers					9116468	94
_	lame cha	Number and street (or P.O.	box, if mail is not delivered to st	reet address)	Room/suite	E Telepi	hone number	
_	nıtıal retur	<b>F</b> O BOX 034					20692010	513
=	-mai retun Amended	City or town, state or provi	nce, country, and ZIP or foreign	postal code		F Grou	p Exemption	
=	Application	1 ameles 144 00000				Num	ber ▶	
G A	ccount	ing Method: 🗹 Cash 🔲 Accrua	Other (specify)		Н	Check >	lif the on	ganization is <b>not</b>
I W	/ebsite	www.heartsandhammers.cor	n			required	to attach Sch	nedule B
J Ta	ax-exem	pt status (check only one) - 501(c)	(inse	rt no.) 🗌 4947(a)(1) or	<u>□</u> 527	(Form 99	0, 990-EZ, or	990-PF).
KF	orm of		Trust Associ					
LA	dd lines	5b, 6c, and 7b to line 9 to determine	gross receipts. If gross rece	ipts are \$200,000 or n	nore, or if total	assets		
(Par	t II, colı	ımn (B) below) are \$500,000 or more,					× 5 66.	
Pa	art I	Revenue, Expenses, and C	hanges in Net Assets	or Fund Balanc	<b>es</b> (see the	instruc	tions for Pa	art I)
		Check if the organization use	d Schedule O to respon	d to any question i	n this Part I		· • • • •	<u> </u>
	1	Contributions, gifts, grants, and	similar amounts received			[	1	66807
	2	Program service revenue includir	ng government fees and o	contracts		[	2	
	3	Membership dues and assessme	ents				3	
	4	Investment income					4	
	5a	Gross amount from sale of asset	s other than inventory	<u>5a</u>			[	
	b	Less: cost or other basis and sal	es expenses	<u>5</u> b	: 		_	
	6	Gain or (loss) from sale of assets Gaming and fundraising events	other than inventory (Sul	otract line 5b from li	ne 5a)		5c	<del> </del>
9	а	Gross income from gaming (a \$15,000)	attach Schedule G if g	reater than				
Revenue	b	Gross income from fundraising e from fundraising events reported sum of such gross income and co	d on line 1) (attach Scheo	dule G if the	contribution	ıs		
	c d	Less: direct expenses from gamin Net income or (loss) from gamin line 6c)			d 6b and sul	btract	6d	
	7a	Gross sales of inventory, less ret	urns and allowances .					
	Ь						-	
	С	Gross profit or (loss) from sales of	- ·	7b from line 7a) .			7c	
	8	Other revenue (describe in Sche	-				8	
	9	Total revenue. Add lines 1, 2, 3,			-	. •	9	66807
	10	Grants and similar amounts paid	- 1	· RECEIVE			10	<del></del>
	11	Benefits paid to or for members			一		11	
nses	12	Salaries, other compensation, ar	ia employee benefits	1 MAY 2.8. 21	116		12	
	13	Professional fees and other payr	nents to independent con	iµactors. ≃. ♥. ε.	18			
Ä	14	Occupancy, rent, utilities, and m		000			15	865
ш	15	Printing, publications, postage, a	and snipping	· OGDEN, Ł	JT · · · [		16	56746
	16	Other expenses (describe in Sch	edule ()		<u> </u>		17	57611
	17	Total expenses. Add lines 10 th Excess or (deficit) for the year (S			· · · ·	•	18	9196
353	18 19	Net assets or fund balances at			· · · · ·	- ·	10	3130
38	'3	end-of-year figure reported on p					19	35506
Net Assets	20	Other changes in net assets or fi	-			•	20	33300
ž	20	Net assets or fund balances at e					21	44702
	21	iver assets of fulld balances at e	no or year. Combine lines		_ <del></del>			94702

Pa	rt II Balance Sheets (see the instructions	•	<u> </u>			
	Check if the organization used Schedule	e O to respond to a	ny question in this			<u> </u>
				(A) Beginning of year	_	(B) End of year
22	Cash, savings, and investments		· · · · · · ·	35506		44702
23	Land and buildings			·····	23	<del></del>
24 25	Other assets (describe in Schedule O) Total assets			33506	-	44702
25 26				33500	26	44702
27	Net assets or fund balances (line 27 of column			33506	_	44702
Par					2.	447.02
. CI	Check if the organization used Schedule					Expenses
Wha	t is the organization's primary exempt purpose?	o to roopond to a	, quodio: u.e.			quired for section
	cribe the organization's program service accompl	inhments for each a	f ite three largest r	roarom coniece		l(c)(3) and 501(c)(4) anizations: optional for
	neasured by expenses. In a clear and concise n				,	ers.)
	ons benefited, and other relevant information for e	ach program title.	· · · · · · · · · · · · · · · · · · ·			
28	May 2015 annual workday. We serviced the homes	of over 35 residents, e	engaging the over 4	0 volunteers on		
	the workday.	· · · · · · · · · · · · · · · · · · ·				
	(Grants \$ ) If this amount	t includes foreign gra	nts, check here .	<u></u> ▶□	28:	a 48204
29						
	(Grants \$ ) If this amount	t includes foreign gra	ints, check here .	<u></u> ▶Ц	29	3
30						
	(Grants \$ ) If this amount	t includes foreign gra	inte check have		30:	
24	Other program services (describe in Schedule O)			· · · <u>/                               </u>	30,	<del>*</del>
01		t includes foreign gra			31:	a
32	Total program service expenses (add lines 28a				32	
Par						
	Check if the organization used Schedule					🗀
		(b) Average	(c) Reportable	(d) Health benefits,	Π,	
	(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC	contributions to employ benefit plans, and		<ul> <li>e) Estimated amount of other compensation</li> </ul>
_		devoted to position	(if not paid, enter -0-)			
Ross	Godwin	- 8			T	
Pres	ident	•		0	0	
Shav	vn Ogle	8				
Vice	President	<u> </u>		0	0	
Pam	Kniseley	_  8				
Secr	etary			0	0	
Robe	ert Gunn	- 8			1	
Trea	surer			0	0	
		_		,	İ	
					+	
		<del> </del>		<u>}</u>	+	
		-				
				-	+	
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		<del>                                     </del>	·	<del></del>	+	
		-{				
		<del> </del>		<del> </del>	+	<del></del>
		-				
				+	+	
	,	1				
					+	
		-1				

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this			П
	Instructions for Part V) Check if the organization used schedule of to respond to any question in this	1 60 (	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		<u> </u>
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		-
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		<u>/</u>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a	ļ		
ь	Did the organization file Form 1120-POL for this year?	37b		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?			
<b>.</b>	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b	38a		
39	Section 501(c)(7) organizations. Enter:	1 1	1	
а	Initiation fees and capital contributions included on line 9			
Ь	Gross receipts, included on line 9, for public use of club facilities	1		
<b>40</b> a	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), 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	·	v
	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			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
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	-	
41	List the states with which a copy of this return is filed ▶			
<b>42</b> a	The organization's books are in care of ▶ Telephone no. ▶			
b	Located at ► ZIP + 4 ►  At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		~
	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).			
c	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	▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the tax year		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		7
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		>
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		7
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		~
b	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 99	90-EZ (2	2015)	<u> </u>	<del></del>				P	age 4
46		he organization engage, directly or in					2.1140000000	Yes	No
		andidates for public office? If "Yes," c		, Part I			46		
Part	V.	Section 501(c)(3) organizations All section 501(c)(3) organizations		etions 47–49h an	d 52 and co	nolete the	tables f	or line	25
		50 and 51.	musi anonoi que	20010 41 40D UII	.a oz, ana oo.	npioto aio	(45,00	<b>O</b> 1	
		Check if the organization used Sch	edule O to respond	to any question in	n this Part VI				
		-						Yes	No
47		the organization engage in lobbying ? If "Yes," complete Schedule C, Part		section 501(h) elec		luring the to	ax   47		/
48		e organization a school as described in					48		1
49a		he organization make any transfers to					49a		~
b		es," was the related organization a se					49b		-
50		plete this table for the organization's loyees) who each received more than							а кеу
	етр	loyees) who each received more than		1	(d) Health		, enter t		
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contributions t	o employee ( and deferred	(e) Estimate other con		
100%	volunt	eer board; no employees.			<del> </del>				
	<del></del>		<del></del>	<del> </del>	<del></del>				
	·						-		
					-				
f 51	Com	I number of other employees paid over plete this table for the organization's	s five highest comp	ensated independe		who each	received	more	than
<del></del>		0,000 of compensation from the organ Name and business address of each independent		(b) Type of s	service	(c) (	Compensati	on	_
				(-)					
none.				-					
				<u> </u>					
						<del>.,.</del>			<del></del>
d 52	Did	I number of other independent contra the organization complete Schedu	_	ection 501(c)(3) or	=		a		<del></del>
Under p	enalties	pleted Schedule A s of perjury, I declare that I have examined this n nd complete. Declaration of preparer (ofther than	eturn, including accompar	rying schedules and state	ements, and to the	best of my kno	► ✓ Yes wiedge and		nt is
	T	1 RM 9. Sun				5/13/	16		
Sign		Signature of officer	·····		Date	-1.2/		<del></del>	
Here		Robert Gunn, Treasurer Type or print name and title	<del></del>		<del>'</del>				
		Print/Type preparer's name	Preparer's signature		Date	I Charle I	ΡΠΝ		
Paid		yes ensemble o tautto				Check L			

Paid **Preparer** 

**Use Only** 

Firm's name ▶

Firm's address ►

May the IRS discuss this return with the preparer shown above? See instructions . . . .

Firm's E!N ▶

· · · · · ▶ ☐ Yes ☐ No

Phone no.

### 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

**Employer identification number** 

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 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 to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations . . . . . g Provide the following information about the supported organization(s). (ii) EIN (iv) is the organization (vi) Amount of (i) Name of supported organization (iii) Type of organization (v) Amount of monetary sted in your governing (described on lines 1-9) support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 66047 66047 revenues levied for the organization's benefit and either paid to or expended on its behalf . . . 760 760 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 66807 66807 Total. Add lines 1 through 3. . . . 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) . . . . Public support. Subtract line 5 from line 4. 66807 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 66807 Amounts from line 4 . . . . . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . . . . . . . . . 0 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . 0 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . Total support. Add lines 7 through 10 66807 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) . . . . . 100 % 100 % Public support percentage from 2014 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . 15 3313% support test - 2015. If the organization did not check the box on line 13, and line 14 is 3313% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . .  $\square$ b 331/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 4 17a 10%-facts-and-circumstances test-2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test-2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 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.)

	if the organization fails to qualify	under the te	sis iisted bei	ow, please co	impiete Part	11.)	
	on A. Public Support	<del></del>	T - 2	1	1		
	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						
_	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise		<u> </u>	ļ			
2	sold or services performed, or facilities						ŀ
	furnished in any activity that is related to the			1			
_	organization's tax-exempt purpose		<del> </del>	<u> </u>			
3	Gross receipts from activities that are not an						
_	unrelated trade or business under section 513		<u> </u>		ļ		
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
_			<del> </del>	<del> </del>			<del>  </del>
5	The value of services or facilities		j		,		
	furnished by a governmental unit to the organization without charge						
_	•		<del> </del>	<del> </del>	ļ		
6	Total. Add lines 1 through 5		<del> </del>	<del> </del>			
78	Amounts included on lines 1, 2, and 3 received from disqualified persons .	i			1		
	•	ļ·	<del> </del>	<del> </del>			· · · · · · · · · · · · · · · · · · ·
þ	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000		1				
	or 1% of the amount on line 13 for the year			ŀ	1		
c	Add lines 7a and 7b		1	i	<del>                                     </del>		
8	Public support. (Subtract line 7c from		<del> </del>				
_	line 6.)		1				
Secti	on B. Total Support	<del> </del>	<del> </del>	<del> </del>	<u> </u>		
	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		1			, ,	
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .		1	İ	<b>l</b>		
b	Unrelated business taxable income (less			]			
	section 511 taxes) from businesses				•		
	acquired after June 30, 1975		<u> </u>	L			
C	Add lines 10a and 10b		<u> </u>				
11	Net income from unrelated business			İ			
	activities not included in line 10b, whether			ł	1		1
	or not the business is regularly carried on						
12	Other income. Do not include gain or				1		
	loss from the sale of capital assets				1		1
	(Explain in Part VI.)			ļ <u>,</u> .	ļ		
13	Total support. (Add lines 9, 10c, 11,			-			
	and 12.)	L	1 5-1	<u> </u>		<u> </u>	-4' F04(-\/0\
14	First five years. If the Form 990 is for the	_					
Casti	organization, check this box and stop he			<del></del>	<del></del>	· · · ·	🟲 📙
	on C. Computation of Public Suppor			12 oolumn (f))		45	0/
15	Public support percentage for 2015 (line 8 Public support percentage from 2014 Sci		•			15	<u>%</u>
16 Sooti	<del></del>			· · · · ·	· · · · ·	10	%
17	on D. Computation of Investment In Investment Income percentage for 2015 (			v line 13 colu	mn (fl)	17	%
18	Investment income percentage from 2014			•	***	18	
19a	331/3% support tests—2015. If the organ						
1 76	17 is not more than 331/3%, check this box						
b	331/3% support tests—2014. If the organiz				-		
	line 18 is not more than 331/3%, check this				-		-
20	Private foundation. If the organization di		_	=			-

### 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.)

Secti	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 <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	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 <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a		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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> 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		
5a	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 <b>Part VI</b> , 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).	<b>5a</b>		
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		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? 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 <b>Part VI</b> .	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 <b>Part VI</b> .	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		

Part	V Supporting Organizations (continued)			
Part	Supporting Organizations (continued)		Yes	No
44	Has the organization accepted a gift or contribution from any of the following persons?		163	140
11	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		1	.
a	below, the governing body of a supported organization?	11a		
h	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 "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations			
		j	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	1		
	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			ł
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		۰
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			İ
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			ĺ
	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?			i
		1		<del></del>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	l		ĺ
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
_	· ·	2	ļ	
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 <b>Part VI</b> the role the organization's	1	1	ĺ
	supported organizations played in this regard.	3	·	
Conti	on E. Type III Functionally-Integrated Supporting Organizations	13	Ц	
Secu				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	กรขบ	ction	3):
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see ins	structi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			1
	those supported organizations and explain how these activities directly furthered their exempt purposes,			l
	how the organization was responsive to those supported organizations, and how the organization determined		]_	
	that these activities constituted substantially all of its activities.	2a	<u> </u>	
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	1	}	
	reasons for the organization's position that its supported organization(s) would have engaged in these			L
	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	ļ	1	L
	trustees of each of the supported organizations? Provide details in Part VI.	3a	L	
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.	3b	<u></u>	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V	an	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	tru	st on Nov. 20, 1970. See	instructions. All
other Type III non-functionally integrated supporting organizations must co			
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	ļ		
collection of gross income or for management, conservation, or	1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		<u> </u>
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):	1a	<u> </u>	<del></del>
a Average monthly value of securities	1b		
b Average monthly cash balances	1c		
c Fair market value of other non-exempt-use assets	1d		
d Total (add lines 1a, 1b, and 1c)	10	L	
e Discount claimed for blockage or other			
factors (explain in detail in <b>Part VI</b> ):	2	r	
2 Acquisition indebtedness applicable to non-exempt-use assets	3	<u> </u>	<del>-  </del>
3 Subtract line 2 from line 1d	13		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	4		
see instructions).	5		<del>-  </del>
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	6		
6 Multiply line 5 by .035	7		<del></del>
7 Recovenes of prior-year distributions  8 Minimum Asset Amount (add line 7 to line 6)	8		<u> </u>
Section C - Distributable Amount	10		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	6		
emergency temporary reduction (see instructions)  7	1	tegrated Type III support	ng organization (eac
instructions).	y-ir	negrated Type III support	ing organization (See

Part	Type III Non-Functionally Integrated 509(a)(3	s) Supporting Organi	zations (continued)	
Secti	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			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
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 whic	h 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			
Se	ection E - Distribution Allocations (see instructions)	(ī) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6	<u> </u>	-	
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
_3_	Excess distributions carryover, if any, to 2015:			
<u>a</u>			 	
b	<u> </u>			
C	1			
<u>d</u>	From 2013			
<u>e</u>	From 2014			
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years		·	
<u>h</u>	Applied to 2015 distributable amount			
<u>     i                               </u>	Carryover from 2010 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
ь	Applied to 2015 distributable amount			
	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			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see	ļ		
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j and 4c.			
8	Breakdown of line 7:		<del></del>	
<del></del> a				
b	) }			
<del>_</del>	Excess from 2013			
d	Excess from 2014		·····	
e	Excess from 2015			
				<u> </u>

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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.)

### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

20**15** 

Department of the Treasur Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

### If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- . Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-B.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	ection 501(c)(4), (5), or (6) orga of organization	ınızatıons: Complete Part III.	<u> </u>	T Employer ide	ntification number
	s and Hammers			citpioyer we	911646894
		e organization is exempt und	or costion E01/	a) er is a section 527.	
Part		the organization's direct and indire	<del> </del>		organization.
1 2	•		•	•	6
3	Volunteer hours				'
3	Volunteer flours				
Part	I-B Complete if the	e organization is exempt und	er section 501(	c)(3).	
1		excise tax incurred by the organiza			
2		excise tax incurred by organization			
3	•	ed a section 4955 tax, did it file Fo	•	ear?	Yes 🗹 No
4a			. <i></i> .		Yes V No
b	If "Yes," describe in Part				4 141
		e organization is exempt und			(c)(3).
1		ly expended by the filing organiz		•	
2		filling organization's funds contrib		•	·
_		vities			0
3	•	expenditures. Add lines 1 and 2		•	
	•				0
4		file Form 1120-POL for this year		-	Yes V No
5		ses and employer identification nu			
	•	ents. For each organization listed,	, ,		
	the amount of political co	entributions received that were pro	mptly and directly	delivered to a separate p	political organization, such
	as a separate segregated	fund or a political action committee	ee (PAC). If additio	nal space is needed, prov	ride Information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
			<del> </del>		<del> </del>
(3)					
(4)					
(5)					
(6)					

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Sch	edute C (Form 990 or 990-EZ) 2015					Page Z
Pa	rt II-A Complete if the organization section 501(h)).	is exempt u	nder section 50	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ► ☐ if the filing organization belo name, address, EIN, expens					up member's
В	Check ▶ ☐ if the filing organization chec	cked box A a	ind "limited cont	rol" provisions a	apply.	
	Limits on Lobby				(a) Filing	(b) Affiliated
	(The term "expenditures" mea	ans amounts	paid or incurred.)	)	organization's totals	group totals
1	a Total lobbying expenditures to influence p	ublic opinion	(grass roots lobby	ing)		
	b Total lobbying expenditures to influence a legislative body (direct lobbying)					
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (add i					·····
	f Lobbying nontaxable amount. Enter the columns.		•			
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	t is:		
	Not over \$500,000		ount on line 1e.		}	
	Over \$500,000 but not over \$1,000,000		15% of the excess	over \$500,000	1	
	Over \$1,000,000 but not over \$1,500,000	···	10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		5% of the excess or		1	
	Over \$17,000,000 But 101 6ver \$17,000,000	\$1,000,000.	370 OI UIB EXCESS O	VC. \$1,500,000.	i	
		<del> </del>		L	<del>                                     </del>	
	•	•				
	h Subtract line 1g from line 1a. If zero or les	•				
	i Subtract line 1f from line 1c. If zero or less		 Alboulmon di milal		Flo Form 4720	
	if there is an amount other than zero o			-		☐ Yes ☐ No
	reporting section 4911 tax for this year?				· · · · · ·	<u> </u>
	(Some organizations that made a sect See the s	ion 501(h) ele eparate instr	uctions for lines	e to complete all 2a through 2f.)	of the five column	is below.
	Lobbying E	expenditures	During 4-Year Av	eraging Period	,	
	Calendar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	(e) Total
2	La Lobbying nontaxable amount					0
	b Lobbying ceiling amount (150% of line 2a, column (e))					0
	c Total lobbying expenditures			,		0
	d Grassroots nontaxable amount					0
	e Grassroots ceiling amount (150% of line 2d, column (e))					0
	f Grassroots lobbying expenditures					0

	(election under section 501(h)).	li	a)	(b)		
	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ption of the lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		- v -			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		~			
C	Media advertisements?		~			
d	Mailings to members, legislators, or the public?		~			
e	Publications, or published or broadcast statements?		~			
f	Grants to other organizations for lobbying purposes?		~			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		~			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		"			
i	Other activities?		~	ļ		
j	Total. Add lines 1c through 1i			<b></b>		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		~		<del>-</del>	
b	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		}			
c di	If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?	- !	-	-		
Part		(5), c		ction		
	501(c)(6).	(-),				
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3	<u></u>	<u> </u>
1 2	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Ol answered "Yes."  Dues, assessments and similar amounts from members	<del>.</del>	Pari	i III-A,	line	3, is
_	political expenses for which the section 527(f) tax was paid).					
а	Current year	-	2a			
b	Carryover from last year		2b			
C	Total		2c			
3	$\label{eq:Aggregate} Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues \ . \\$		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ing				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5	L		
Part	Supplemental Information  e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	N	A. D-	- II A		1
	e the descriptions required for Part 1-A, line 1; Part 1-B, line 4; Part 1-C, line 5; Part 11-A (allillated grot instructions); and Part II-B, line 1. Also, complete this part for any additional information.	ap ns	y, Pa	rt 11-A,	ines	1 and
- (500	modelone/, and that it of the 117 too, somplete the part for any assistant information.					

Schedule C (Form 990 or 990-EZ) 2015  Part IV Supplemental Information (continued)				
Part IV	Supplemental Information (continued)			
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	***************************************			
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		**************************************		