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## **Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

OMB No 1545-0047

Open to Public

	nal Reveni	ue Service	► Information about Form 990 and its instructions is	s at www.irs	s.gov/fc	orm990.	Inspection
Α	For the	2016 cal	endar year, or tax year beginning	, and e	nding		
В	Check if a	applicable	C Name of organization WEST HARLEM ENVIRONMENTAL ACT	ION INC		D Employer iden	tification number
$\prod$	Address o	change	Doing business as				
$\overline{\Box}$		-	Number and street (or PO box if mail is not delivered to street address)	Room/suite		13-3800068	
Ш	Name cha	ange	1854 AMSTERDAM AVE			E Telephone num	ber
	Initial retu	ım	City or town State	ZIP code		347-485-8485	
$\equiv$	F 1 4		NEW YORK NY	10031		347-403-0403	
Ш	Final return	/terminated	Foreign country name Foreign province/state/county	Foreign postal	code		
	Amended	return				G Gross receipts	s 1,704,027
$\overline{\Box}$	A ==1:==1:=		F Name and address of principal officer		41/-> 1- 4		pordinates? Yes X No
ш	Applicatio	on pending	·	4 40004		nis a group return for sub	
			PEGGY SHEPARD 1854 AMSTERDAM AVE, NEW YORK, N	Y 10031	H(b) Ar	e all subordinates inc	luded? Yes No
1 .	Tax-exem	pt status	X 501(c)(3) 501(c) ( ) ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	or 527	lf '	"No," attach a list (se	e instructions)
1.1	Noheite	· • www	v weact org		H(c) Gr	oup exemption number	er 🕨
K	orm of o	rganization	X Corporation Trust Association Other ▶	L Yea	r of form	ation 1986 N	State of legal domicile NY
F	art l	Sui	mmary				
	1	Briefly d	escribe the organization's mission or most significant activities	ENV	IRONN	IENTAL ADVOCA	ATE/EDUCATION
8	}	-	· · · · · · ·				
Governance							
err	1	Charlet	e and the company of		of mor	o than 25% of its	not coacta
8	2		nis box I if the organization discontinued its operations of	or aisposea	or mor	1	1
٥	3		of voting members of the governing body (Part VI, line 1a)			3	17
œ œ	4		of independent voting members of the governing body (Part V	=		4	17
Activities &	5		mber of individuals employed in calendar year 2016 (Part V, lin	ie 2a)		_ 5	19
즟	6	Total nu	mber of volunteers (estimate if necessary)			6	
ĕ	7a	Total un	related business revenue from Part VIII, column (C), line 12			7a	<u> </u>
	Ь	Net unre	elated business taxable income from Form 990-T, line 34			7b	0
	<del>                                     </del>			<del>-</del>		Prior Year	Current Year
_	8	Contribu	itions and grants (Part VIII, line 1h)			2,977,182	2 1,596,703
Revenue	9		service revenue (Part VIII, line 2g)			31,42	
ě	10	_	ent income (Part VIII, column (A), lines 3, 4, and 7d)			·	0 0
&	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			18,07	<del></del>
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line	; 12]	<del> </del>	3,026,684	
	13		and similar amounts paid (Part IX, column (A), lines 1–3)				0 138,000
	14		paid to or for members (Part IX, column (A), line 4)	E 40)			0 0
68	15		other compensation, employee benefits (Part IX, column (A), lines	1,200,979			
euses	16a		onal fundraising fees (Part IX, column (A), line 11e)			<u>, , , , , , , , , , , , , , , , , , , </u>	0
Exp	þ	Total fur	draising expenses (Part IX, column (D), line 25)	117,240	122 1	of file diagnosticing	A STATE OF S
ш	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	FIVE		540,41°	1 666,622
	18	Total exp	penses Add lines 13–17 (must equal Part IX, colump (A); line:	25) V L L		1,741,390	0 2,101,847
	19	Revenue	e less expenses Subtract line 18 from line 12		ညွှင	1,285,294	4 -435,962
0 8			. JUL 3	2 5 2017		ning of Current Year	End of Year
Net Assets or Fund Balances	20	Total ass	sets (Part X, line 16)		S	2,485,073	3 2,074,028
A	21	Total liab	pilities (Part X, line 26)	-11		14,466	
Ž	22	Net asse	ets or fund balances Subtract line 21 from line 20	EN. U	Ā	2,470,60	
Pa	art II		nature Block				<u></u>
			, I decare that I have examined this return, including accompanying schedules a	nd statements.	and to the	he best of my knowled	dge
and	belief, it i	s true, corre	ct, and complete Declaration of preparer (other than officer) is based on all inform	mation of which	prepare	r has any knowledge	
C:			1974 M. Thelland				
Sig		<b>₩</b> ~	Signature of officer	ſ		Date	
He	re		Keagu M. Shenard, Exercise DITS	zaton-		7-	.19–17
			Type or brint name and title	1 00		<u></u>	<del></del>
_		Pnnt	Type preparer's name  Preparer's signature		Dat	e T	PTIN
Pa	id	[ ]			ا ا	Check	
	o eparer	. JOH	IN W DAVIS	_	7/		ployed P01223334
	e Only	- 1	's name ► JOHN W DAVIS, CPA				3411996
US	e Only	, -	's address ► 1736 E ELIZABETH AVE, LINDEN, NJ 07036		_		
						Phone no 908	3-275-3382
wa	y ine iH	suscus	s this return with the preparer shown above? (see instructions)	1		مبس	Yes X No

Yeart IV Checklist of Required Schedules

	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Χ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		-	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			v
E	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	1		
	complete Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			v
40	negotiation services? If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporarily restricted	9_		X
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			, ,
•	VII, VIII, IX, or X as applicable.	3 . "	٠, ،	" اکتابد سا
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	ainest to		3825.
	Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	'		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44.4		
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	X	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a h	5	14a		X
IJ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Χ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		- {	
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			v
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		<u> </u>
. •	If "Yes," complete Schedule G, Part III	19		х
		-13		

### ' Form 990 (2016) WEST HARLEM ENVIRONMENTAL ACTION INC Checklist of Required Schedules (continued) 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a

- b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
- c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
- d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?
- 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I
  - b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
- Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II
- 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III
- Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)
  - A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
- A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
- c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV
- 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M
- Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
- 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I
- 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
- Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I
- Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.
- 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
  - b If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2
- Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2
- Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part
- Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O

		· ·	
		Yes	No
	20a		X
	20b	L	
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	21	Х	
		X	
	22	Х	
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	23		Χ
	24a		x
	24b		Y
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	27		X
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	38	X	
		990	2016)
		1	

Form 9	990 (2016) WEST HARLEM ENVIRONMENTAL ACTION INC 13-	3800068	F	age
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	10	8, 3, 2, 3,	3 40
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	_이 :: :::	35	44
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	ر مناها د		
	gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	19	1317	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-21		1.22
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		
	account)?	4a		X
b	If "Yes," enter the name of the foreign country	WE FO	الدران الدران الدران الدران الدران	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	78.5 · · ·	1.5.5	
	(FBAR)		24	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	<u> </u>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		ł	
	gifts were not tax deductible?	6b	<u> </u>	X
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
	and services provided to the payor?	.7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Х
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			ا ئىدىدۇران
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	_7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7			X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		ii.	
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.		'n	PE
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<u> </u>	X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter		K. T	137
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1, 4315	135.77
11	Section 501(c)(12) organizations. Enter		180 %	
а	Gross income from members or shareholders		846	40.3
b	Gross income from other sources (Do not net amounts due or paid to other sources	346	(3)	
	against amounts due or received from them )		ر در	معضيا
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	<del>  -</del>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		a Process	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	33/2	12-2	, <u>~</u> ~
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	(i., A	X
	Note. See the instructions for additional information the organization must report on Schedule O		N/a	7, x 3
b	Enter the amount of reserves the organization is required to maintain by the states in which		200	12.78
_	the organization is licensed to issue qualified health plans  [7] The the ground of receives on head			
C	Enter the amount of reserves on hand	( True 1 )		12 A 25 A 25
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L.	1

Part VI

WEST HARLEM ENVIRONMENTAL ACTION INC

13-3800068 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI.

Sect	ion A. Governing Body and Management			,	
			. <u>- 3882</u> 7	Yes	No
1a			17		
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar			70.5	
	committee, explain in Schedule O				4
b	Enter the number of voting members included in line 1a, above, who are independent		17	14.2.64 g	3 7 74
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with	iii ka	arioi.	
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under	the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other	r person?	3	<u> </u>	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 will	as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?	5		Х
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint			
	one or more members of the governing body?		7a	]	Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	,			
	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertake	n durina	V. 20.	ALUE OF THE PERSON NAMED IN	
•	the year by the following	3	3777		200
а	The governing body?		8a	X	Charles or Maria
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	eached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	Ì	X
Sect	ion B. Policies (This Section B requests information about policies not required by the	Internal Revenue		)	
0000	ion bit onoted (This decitor) b requeste information about position not required by the	moma revenue	0000	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such	chapters.		<u> </u>	
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b	ŀ	х
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	+	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a		il Lame
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	nive rise to conflicts?	12b	_	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If		1.20	<u> </u>	$\vdash$
•	describe in Schedule O how this was done	, 00,	12c	x	l
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and appro	val by	. 5 ()	A 3.5	10 765
	independent persons, comparability data, and contemporaneous substantiation of the deliberation		فعفت		2 4 3 3 4 4 5 4 5 4 5 4 5 4 5 6 5 6 5 6 5 6 5 6
а	The organization's CEO, Executive Director, or top management official	and accioion	15a	X	المقاتنين
b	Other officers or key employees of the organization		15b	Î	<del> </del>
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		225	Same a	×1.00
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements.	ement	1 1 man		Υ. Ç.Y.Y.
	with a taxable entity during the year?	ement	16a	المنتشف	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ata ite	104	5 10 mg/2	Yasan Yasan
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safe		15.00		
	the organization's exempt status with respect to such arrangements?	guaru	16b		
Sect	ion C. Disclosure	_ <del></del>	100		<b></b>
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed NY				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99	0-T (Section 501(c)	(3)s onl		
	available for public inspection. Indicate how you made these available. Check all that apply	. (CCCION CO NC)	(5)5 0111	"	
		plaın ın Schedule C	))		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents,			nd	
	financial statements available to the public during the tax year	or or intoroot p	J.,J, UI		
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks and records	•		
	PAT TERRY	347-465-8485	5		
	1854 AMSTERDAM AVE . 2 FL. NEW YORK, NY 10031		<b>-</b>		

<b>Ропр</b> 990 (2016)	WEST HARLEM ENVIRONMENTAL ACTION INC	13-3800068	Page I
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comper	sated	
	Employees, and Independent Contractors		
•	Check if Schedule O contains a response or note to any line in this Part VII		

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A. 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the

- organization's tax year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- . List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related lorganizations below dotted kine)	box,	unles er an	ss pe dad	ition more rson irecti	than both Highest compensated	an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Dennis Derryck	5 00					}				
Director		X								
(2) Peggy Shepard	40 00									
Exec Director		Х	<u> </u>		L	Ĺ		110,000		
(3) David Evans	5 00									
Director	<u> </u>	Х				Ĺ	<u> </u>			
(4) Patricia Terry	15 00								·	
Treasurer		Х			L.					
(5) Regina Smith	5 00									
Director		Х								
(6) Hope Plasha	5 00									
Director		Х						i 	_	
(7) Eric Goldstein	5 00		ĺ							
Director		Х								
(8) Phillip Morrow	5 00	1	Ì							
Director		Х								
(9) Jeff Jones	5 00					}				
Director		X	L_	Щ			L.,			
(10) Vernice Miller-Travis	5 00									
Director		X								
(11) Gregory Anderson	15 00						[ ,			
Chair	<u> </u>	Х		Щ						
(12) Charles H Allison	5 00	 							İ	
Director	·	Χ	<u> </u>	$\sqcup$	<u> </u>					
(13) Joseph Bosch	5 00									
Director	<u> </u>	X		$\Box$						
(14) Darryl Banks	5 00									
Director		Χ	لــــا							

(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than of box, unless person is both officer and a director/trust				is both or/trust	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15) Albert Huang Director	5 00	x						:		
(16) Sharon Lopez Director	5 00	_								
(17) Marianne Engelman Lado	5 00									
Secretary (18) Dart Westphal Director	5 00	X						<u></u>		
(19) Ken Mak	5 00									
Director (20) Cecil Corbin-Mark Asst Director	40 00	<del></del>			x			91,997		
(21)					^			91,997		
(22)										
(23)					-					
(24)										
(25)								1		
1b Sub-total c Total from continuation sheets to Part VII, Se	oction A			<u> </u>	_	<u></u>	<b>&gt;</b>	201,997 0	0	0
d Total (add lines 1b and 1c)							<u> </u>	201,997	0	0
2 Total number of individuals (including but not ling reportable compensation from the organization)		ted a	bov	e) v 1	/ho _	recei	ved	more than \$100	),000 of	
3 Did the organization list any former officer, dire employee on line 1a? If "Yes," complete Sched				oye	e, o	r high	nest	compensated		Yes No 3 X
<b>4</b> For any individual listed on line 1a, is the sum of the organization and related organizations great individual	1 -	•						•	h	4 X
5 Did any person listed on line 1a receive or accrefor services rendered to the organization? If "Yes"									vidual	5 X
Section B. Independent Contractors     Complete this table for your five highest compecompensation from the organization. Report contractions are compensation.										ax
year					<i>,</i> ca	. Oriu	y		- Jugariization 5	
(A) Name and business add	ress					_		(B) Description of ser	vices (	(C) Compensation
NONE								<del> </del>		0
							_			0
O Table and a second					_		_			0
Total number of independent contractors (included more than \$100,000 of compensation from the	ng but not limit organization	ed to ►	tho	se I	ste	abo 0	ve)	who received		

Part VIII. Statement of Revenue

		Check if Schedule O contains	a response	OI II	ote to any line ii	i inis Pari VIII	•	•	<u></u>
		Carrier Carrie				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated campaigns		1a	0				
Grants	b	Membership dues		1b	0				
	С	Fundraising events .		1c	0				12
£ ₹	d	Related organizations		1d	0				
. <u>E</u>	е	Government grants (contributions	3)	1e	166,220		The state of the s	as arbanda share	
<u> </u>	f	All other contributions, gifts, grant	-						
걸		similar amounts not included abo		1f	1,430,483				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in li		<u> </u>	0				t timber in
ပ္က	h	Total. Add lines 1a–1f		•	<u>-</u>	1,596,703			
_		Total Flag miles Ta Ti	<u></u> -		Business Code	1,000,100	90.76.3422.35340		
Ž	2a	Program income				11,372	11,372	11.7.5	
9	b	Trogram income				11,572	71,072		
8						Ö			· <u>·</u>
Ž	ا ا					<u> </u>			
Š	u		<b></b>		·····	0			
듄		All other program convenies revenies	<b></b>						
Program Service Revenue		All other program service revenue Total. Add lines 2a–2f	<b>5</b>	l	<b>•</b>	11 272			w. Milit
	<u>g</u> 3	Investment income (including divi	idonde inter	roet		11,372		#5.39 <u>5.7(8</u>	<u> </u>
	3	other similar amounts)	ucius, iiilei	<b>63</b> 1,	anu 🛌	٥ ا			
	A	Income from investment of tax-ex	2500	oods -	0	·			
	4		empt bond	proc	eeus -	- ·		<u> </u>	
	5	Royalties	(ı) Real	_	(II) Personal	U	republic of supermones.	Charles of Market Congress on the	BOAT A MINIST
	6-	Cross ranta	(,, 1, 1, 2, 1		(ii) i orosiidi	an production			
	6a	Gross rents							
	þ	Less rental expenses							
	C	Rental income or (loss)		0	0	2000	in the second		<del></del>
	d	Net rental income or (loss) .	(i) Securitie	-	(II) Other	0	gga tar gerrak gi		
	7a	Gross amount from sales of	(i) Occurre		(11) Other				, , , , ,
	L	assets other than inventory		0				Anna Carlo	8
	b	Less. cost or other basis		اہ	0	1	ith at fastian of the salate		
		and sales expenses		0					<i>*</i>
	C C	Gain or (loss)	<del></del>					in the second	terbor see of a graphic to trade to secure
ıne	8a	Net gain or (loss)  Gross income from fundraising							Marie magi
Other Revenue		events (not including \$ of contributions reported on line 1 See Part IV, line 18	89,430 c)	а	89,430	A super file			
更	b	Less direct expenses		b	38,142				a support of the
٠ ا	С	Net income or (loss) from fundrais	•	,		51,288			
	9a	Gross income from gaming activity	ties						
		See Part IV, line 19		а	0				
	b	Less direct expenses.		b	0				
i	С	Net income or (loss) from gaming	activities		<u> </u>	0			
	10a	Gross sales of inventory, less						The Hope of the	
		returns and allowances		а	0				and the second
Ì	þ	Less cost of goods sold		ρļ	0				<u> </u>
	<u>C</u>	Net income or (loss) from sales o	f inventory			0	3,00000	**	
ļ		Miscellaneous Revenue	<del></del>		Business Code	Mary their restrictions were resembled to be 1. 1.00			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	11a	Other Income		.		6,522	6,522		
1	b			ļ		0			!
1	C	All other reverse	·	}		0			
ŀ	d	All other revenue		Į		0	****   1,120/12   2090 TOTA	1890, 500, 100, 500, 899, 00 I	" 4 sa-5 8 s. 6 y s
ļ	e 12	Total revenue Securetrustions				6,522	17.004		1200

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A	Section 501(c)(3) a	and 501(c)(4) organization	s must complete all columns	All other organizations must com-	plete column (A
--	---------------------	----------------------------	-----------------------------	-----------------------------------	-----------------

	Check if Schedule O contains a response of note	(A)	(B)	(C)	(D)	
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses	
1	Grants and other assistance to domestic organizations					
	domestic governments See Part IV, line 21	129,000	129,000		3, 1, 1, 3, 3, 3, 5, 5, 5	
2	Grants and other assistance to domestic					
	individuals See Part IV, line 22	9,000	9,000			
3	Grants and other assistance to foreign				Balling & Francisco	
	organizations, foreign governments, and foreign				BANKASI (	
	individuals See Part IV, lines 15 and 16	0				
4	Benefits paid to or for members	0				
5	Compensation of current officers, directors,					
	trustees, and key employees	201,997		141,511	60,486	
6	Compensation not included above, to disqualified					
	persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B)	0				
7	Other salaries and wages	806,097	796,394	9,703		
8	Pension plan accruals and contributions (include					
	section 401(k) and 403(b) employer contributions)	0				
9	Other employee benefits	212,012		31,804		
10	Payroll taxes	77,119	60,924	11,568	4,627	
11	Fees for services (non-employees)					
а	Management	175,470	136,102	28,120	11,248	
b	Legal	0	<del> </del>			
C	Accounting	17,615	14,973	1,613	1,029	
d	Lobbying .	0			ļ	
е	Professional fundraising services. See Part IV, line 17	0		( )		
f	Investment management fees	0				
g	Other (If line 11g amount exceeds 10% of line 25, column					
	(A) amount, list line 11g expenses on Schedule O)	0				
12	Advertising and promotion	0				
13	Office expenses .	21,062	16,638	3,159	1,265	
14	Information technology	27,027	21,351	4,054	1,622	
15	Royalties	0				
16	Occupancy .	155,123	124,638	21,775	8,710	
17	Travel	0				
18	Payments of travel or entertainment expenses		ĺ	•		
	for any federal, state, or local public officials	0				
19	Conferences, conventions, and meetings	172,839	136,543	25,926	10,370	
20	Interest	0				
21	Payments to affiliates	0	<u> </u>			
22	Depreciation, depletion, and amortization	24,934		3,740		
23	Insurance	9,790	7,734	1,469	587	
24	Other expenses Itemize expenses not covered				TO THE SECOND	
	above (List miscellaneous expenses in line 24e If					
	line 24e amount exceeds 10% of line 25, column	production of the second	HORELEN LANGE			
_	(A) amount, list line 24e expenses on Schedule O )	07.404	04.475	GANGE AND TO A CORNER OF THE C		
a	Printing amd design	27,184	21,475	4,078	1,631	
b	Staff training	545	463	82		
ب 2	Equipment rental and repair Other	16,422	12,974	2,463	985	
d e	All other expenses Program supplies	7,715		1,155	463	
_	Total functional expenses. Add lines 1 through 24e	10,896		202.020	447.040	
25 26	Joint costs. Complete this line only if the	2,101,847	1,692,387	292,220	117,240	
-0	organization reported in column (B) joint costs					
	from a combined educational campaign and	<b>}</b>	1			
	fundraising solicitation Check here					
	following SOP 98-2 (ASC 958-720)		ļ			
		<del></del>				

29

31

32

33

ö

Assets 30 Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

Organizations that do not follow SFAS 117 (ASC958), check here

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

-Form 990 (2016) WEST HARLEM ENVIRONMENTAL ACTION INC 13-3800068 Page 11 **Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year Cash-non-interest-bearing 671,566 1 554,738 2 2 Savings and temporary cash investments 1,244,500 3 960,000 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 0 7 8 Inventories for sale or use 8 12.788 9 3.067 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 351,253 141,802 Less accumulated depreciation 10b 209,451 141,798 10c b 11 Investments—publicly traded securities 0 11 0 0 12 Investments-other securities See Part IV, line 11 0 12 13 Investments—program-related See Part IV, line 11 0 13 0 0 14 0 14 Intangible assets 414.421 15 414,421 15 Other assets See Part IV, line 11 2,485,073 16 2,074,028 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 10,690 17 35,607 18 Grants payable 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 3,776 25 3,776 26 Total liabilities. Add lines 17 through 25 14,466 26 39,383 Organizations that follow SFAS 117 (ASC 958), check here lxl and **Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 406,024 27 716,171 28 Temporarily restricted net assets 2,064,583 28 1,318,474

> 30 31 32

> > 33

34

2,470,607

2,485,073

and

2,034,645

2,074,028

· Form !	990 <sup>'</sup> (2016) WEST HARLEM ENVIRONMENTAL ACTION INC	13-	3800068	Page	12
Part	XI Reconciliation of Net Assets			_	_
	Check if Schedule O contains a response or note to any line in this Part XI			L	
1	`Total revenue (must equal Part VIII, column (A), line 12)	1		1,665,	885
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,101,	847
3	Revenue less expenses Subtract line 2 from line 1	3		-435,	962
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,470,	607
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B)) .	10		<u>2,034,</u>	<u>645</u>
Part				r	1
	Check if Schedule O contains a response or note to any line in this Part XII	•	·	<u> </u>	
				Yes	No
1	Accounting method used to prepare the Form 990.   Cash X Accrual Other				ğÇ.
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1000		Jest 4 et a gill, by
	Schedule O		الأنشائية المساورة		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both		F270	**************************************	
	X Separate basis		12 % 45.4 12 12 45.4		
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		<u>į, į, į</u>		J.S.
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis			14 C C C C C C C C C C C C C C C C C C C	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or	f	23. 5	1	1.70
·	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	استبياد
	If the organization changed either its oversight process or selection process during the tax year, explain in		- 3 P. C.	क्ष्म् हो	
	Schedule O			30.6	35.4. A
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		. منفسياً د		
Ja	the Single Audit Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Ja	$\dashv$	<u>^</u> _
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		36	]	Y

Form **990** (2016)

# 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.

2016

Open to Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

m990. Inspection

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 12, check only one box)										
The organization is not a private foundation because it is (For lines 1 through 12, check only one box )  1										
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-E2) )  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  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  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 )  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)(v). (Complete Part II )  A community trust 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 )  An agricultural research organization described in section 170(b)(1)(A)(vi), operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or an on-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or an on-land-grant college of agriculture (see instructions). Further than a state of the college or university or an on-land-grant college of agriculture (see instructions). Further the name, city, and state of the college or university or an on-land-grant college of agriculture (see instructions). Further the name, city, and state of the college or university or an on-land-grant college of agriculture (see instructions). Further the name, city, and state of the college or university or an on-land-grant college or university or an on-land-grant college of agriculture (see instructions). Further										
A school described in section 170(b)(1)(A)(ii). (Altach Schedule E (Form 990 or 990-EZ))  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  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  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)  A refederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normality 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)  An agricultural research organization described in section 170(b)(1)(A)(iv), (Ocmplete Part II)  An agricultural research organization described in section 170(b)(1)(A)(iv), operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university  An organization that normality receives (1) more than 33 1/3% 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 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organization after fune 30, 1975. See section 590(a)(2). (Complete Part III)  An organization organization and operated exclusively to test for public safety. See section 590(a)(4).  An organization organization organization described in section 590(a)(2). Complete Part III (a) and included by the organization										
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  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  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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv).  A 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)  An agricultural research organization described in section 170(b)(1)(A)(Vi). (Complete Part III)  An agricultural research organization described in section 170(b)(1)(A)(Vi), Operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or an activities related to its exempt functions—subject to certain exceptions, and (2) no more than 31 /3% of its support from gross investment income and unrelated business stable income (sees section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III)  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)										
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  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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv).  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)(v)). (Complete Part II)  A community trust described in section 170(b)(1)(A)(v)). (Complete Part II)  An agricultural research organization described in section 170(b)(1)(A)(x) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university  An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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 II)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organization after June 30, 1975. See section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization of 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).  Type I. A supporting organization operated, supervised or controlled by its supported organization(s), typically by giving the supporting organization (5) the power to regularly appo										
hospital's name, city, and state  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)  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)  An organization that normality 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)  An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name city, and state of the college or university or an on-land-grant college of agriculture (see instructions). 1795. See section 509(a)(2). (Complete Part II)  An organization organization of section 509(a)(2). (Complete Part II)  An organization organization operated exclusively for the benef										
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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  A 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)  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)  An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Entire the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Entire the name, city, and state of the college or university.  An organization that normally receives (1) more than 33 1/3% 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 33 1/3% of its support from gross investment income and unirelated 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)  An organization organized and operated exclusively to test for public safety. See section 509(a)(2).  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 organization sections of section in section. 509(a)(2). (Complete Part III)  An organization organization organization operated in section. 509(a)(4). The section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization (s), type all										
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 )  An agricultural research organization described in section 170(b)(1)(A)(xi) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college or university or anon-land-grant college or university or granization organization and grant college or university or grant college or university or grant college or university or section 509(a)(2). Complete Part II) and organization organizatio										
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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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g a    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.  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. 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 I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization  [III] EIN [III] Type of organization [IV] Is the organization [IV] Amount of monetary other support of supported organization about the supported organization (see instructions) instructions										
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.  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. 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.  e Check this box if the organization received a written determination from the IRS that it is a Type I, 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 (iii) ElN (iii) Type of organization (iv) Is the organization (v) Amount of monetary support (see instructions) instructions  other support instructions  Yes No										
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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.  e										
Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, 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 (ii) EIN (iii) Type of organization (described on lines 1–10 above (see instructions))  (iv) Is the organization (v) Amount of monetary support (see instructions)  Type III (iv) Is the organization of the organization of the organization of the organization of the support instructions)  Yes No										
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g Provide the following information about the supported organization(s)  (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1–10 above (see instructions)) (iv) Is the organization (v) Amount of monetary support (see instructions) (vi) Amount of monetary other support ot										
(ii) Name of supported organization (iii) EIN (iii) Type of organization (described on lines 1–10 above (see instructions)) (iv) Is the organization (v) Amount of monetary support (see other support document?  Yes No  (v) Amount of monetary other support documents  instructions	0									
	ort (see									
(B)										
(C)										
(D)										
(E)										
Total	0									

Schedule A (Form 990 or 990-EZ) 2016

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (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.)

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,633,445	1,241,739	1,485,245	2,810,872	1,430,483	8,601,784			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	1,033,443	1,241,739	1,465,245	2,610,672	1,430,403	0,001,704			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0			
4	Total. Add lines 1 through 3	1,633,445	1,241,739	1,485,245	2,810,872	1,430,483	8,601,784			
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)		Consideration of the second		The property of the state					
_6_	Public support. Subtract line 5 from line 4		A Company of the Company			2.00	8,601,784			
	ction B. Total Support									
_	endar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total			
7	Amounts from line 4	1,633,445	1,241,739	1,485,245	2,810,872	1,430,483	8,601,784			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	792					792			
9	Net income from unrelated business activities, whether or not the business is regularly carried on	-					0			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)		5,227	4,898	18,075	6,522	34,722			
11	Total support. Add lines 7 through 10	1-Cup H					8,637,298			
12	Gross receipts from related activities, etc. (see	-				12				
13	First five years. If the Form 990 is for the o organization, check this box and stop here			h, or fifth tax year a	is a section 501(c)(	(3)	<b>.</b>			
	ction C. Computation of Public Su									
	Public support percentage for 2016 (line 6, c		•	f))		14	99 59%			
	Public support percentage from 2015 Sched				4.00.	15	99 60%			
	33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, and stop here. The organization qualifies as a publicly supported organization   ▼ ▼									
	b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
1/a	a 10%-facts-and-circumstances test—2016. 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 organization.									
b	10%-facts-and-circumstances test—2015 15 is 10% or more, and if the organization m Part VI how the organization meets the "facts supported organization	eets the "facts-and	l-circumstances" te	st, check this box a	and stop here. Ex	ne plain in	▶ [			
18	Private foundation. If the organization did rinstructions	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		▶[			

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

Tapper Community of Summarian and Community of Contract of Contrac	
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Pa	ırt II
If the organization fails to qualify under the tests listed below, please complete Part II.)	

Sec	tion A. Public Support								
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
1	Gifts, grants, contributions, and membership fees								
	received (Do not include any "unusual grants")						. 0		
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					_	0		
3	Gross receipts from activities that are not an								
	unrelated trade or business under section 513						0		
4	Tax revenues levied for the organization's				ĺ '				
	benefit and either paid to or expended on				]				
	its behalf						0		
5	The value of services or facilities								
	furnished by a governmental unit to the			ı	1				
	organization without charge						0		
6	Total. Add lines 1 through 5	0	0	0	0	0	0		
7a	Amounts included on lines 1, 2, and 3				İ				
	received from disqualified persons						0		
b	Amounts included on lines 2 and 3 received								
	from other than disqualified persons that			u.					
	exceed the greater of \$5,000 or 1% of the	ĺ							
	amount on line 13 for the year				<u> </u>		0		
C	Add lines 7a and 7b	0	0	0	0	0	0		
8	Public support (Subtract line 7c from		range of the second		The state of the s		_		
_	line 6)						0		
	ction B. Total Support		41.0040		1 ( 0 0045	1 1 2010	(D. T. ) .		
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
9	Amounts from line 6	0	0	0	0	0	0		
10a	Gross income from interest, dividends,	ı			ĺ				
	payments received on securities loans,						0		
	rents, royalties and income from similar sources	<u> </u>			<del> </del>	<del></del>	0		
D	Unrelated business taxable income (less								
	section 511 taxes) from businesses					į į	0		
_	acquired after June 30, 1975	<u>-</u>	0	0	0	0	<u>0</u> 0		
	Add lines 10a and 10b  Net income from unrelated business	<del> </del>			<del></del>	<del> </del>			
17	activities not included in line 10b, whether	t							
	or not the business is regularly carried on					[	0		
12	Other income Do not include gain or								
-	loss from the sale of capital assets			·	ĺ				
	(Explain in Part VI )						0		
13	Total support. (Add lines 9, 10c, 11,						<del></del>		
	and 12)	o	0	0	l 0	l ol	0		
14	First five years. If the Form 990 is for the o	rganization's first, s		n, or fifth tax year a					
	organization, check this box and stop here								
Sec	tion C. Computation of Public Su	pport Percenta	age						
15	Public support percentage for 2016 (line 8, c	column (f) divided b	y line 13, column (	f))		15	0 00%		
16	Public support percentage from 2015 Sched	ule A, Part III, line	15			16	0 00%		
Sec	tion D. Computation of Investmen	nt Income Perc	entage						
17	Investment income percentage for 2016 (line		17	0 00%					
18	Investment income percentage from 2015 S					18	0 00%		
19a	33 1/3% support tests—2016. If the organi					and line 17 is	<b>-</b>		
h	not more than 33 1/3%, check this box and s					22 4/20/	▶ []		
D	33 1/3% support tests—2015. If the organiline 18 is not more than 33 1/3%, check this						. □		
20	Private foundation. If the organization did i								
		WON OII		_,		,			

Part IV Supporting

#### IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section	n A.	All Su	pporting	<b>Organizations</b>
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- 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
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **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
- 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 **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **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
- 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 **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
- 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 **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)
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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**.
- 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)
- 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)
- 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**.
- **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**.
- 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**.
- 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
  - **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)

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Part	N Supporting Organizations (continued)	<del></del> г		
		535.0	Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			(
а		E-12.2		1
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þ	, · · · · · · · · · · · · · · · · · · ·	11b		-
		11c		L
Sect	ion B. Type I Supporting Organizations		Yes	No
1	Did the directors trustees or membership of one or more supported organizations have the newer to	<del>, -  </del>	163	140
•	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			3.4
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or	2 (2 (2) (2) (2) (2) (2) (2) (2) (2) (2)	eranga English	500
	controlled the organization's activities if the organization had more than one supported organization,			18.254
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		A STATE OF	المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة المنظمة
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	استثلثكما	فلأكمس مثلا
2	Did the organization operate for the benefit of any supported organization other than the supported	•	•	37.7
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>	Barkiri		100
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	344.20 544.40	Language .	2 3 3 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	supervised, or controlled the supporting organization	2 2	ATELECTS.	Calebra
Sect	tion C. Type II Supporting Organizations			Ц——
	non or type it outporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	ary.	Y. A.	Hart.
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	442.44		12.7
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1	Drawinskielek Mittee	
Sect	tion 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		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			100
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	ار بندگر تکمیک	100 E	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		<u>L</u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	19-300 2014		1
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	, Ç ; <u>Ł</u>	1 ~ 2 ,	1
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		ا الدور مورخ بها الموسم والإسارة	وشيدحنم
	significant voice in the organization's investment policies and in directing the use of the organization's	#3 <sup>5</sup> (3)		
	r i de la companya de la companya de la companya de la companya de la companya de la companya de la companya d	ŽĠ.		**************************************
	supported organizations played in this regard	3		l
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ion	s)	
а	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			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in	struc	tions	;)
2	Activities Test Answer (a) and (b) below.	ſ	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	40,40	18.4.4.1	210.3
_	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			S. A. S.
	those supported organizations and explain how these activities directly furthered their exempt purposes,			125
	how the organization was responsive to those supported organizations, and how the organization determined		100 to 10	12 12 12 12 12 12 12 12 12 12 12 12 12 1
		2a	-	
þ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	x - 20	7	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	10,70	20 Jan	**************************************
	reasons for the organization's position that its supported organization(s) would have engaged in these			7.8° °
	l <sup>or</sup>	2b	مين حـ تـملشه	
3	Parent of Supported Organizations Answer (a) and (b) below.	23%	1 / x	\$ Z. #
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2 24 2 24	***** **** *****	
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	2.1	,	ا ' ن
		3b		

1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4 unless subject to	Part V. Type III Non-Functionally Integrated 509(a)(3) Supporting C			
Section A - Adjusted Net Income  (A) Prior Year (coptional)  1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Other gross income (see instructions) 4 Add lines 1 through 3 4 0 0 0 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 0 (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) a Average monthly value of securities b Average monthly value of securities c Fair market value of other non-exempt-use assets 10 0 0 0 Discount claimed for blockage or other factors (explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt-use assets 2 2 3 Subtract line 2 from line 1d 4 C ash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Milhiphy line 5 by 0.35 7 Recoveries of prior-year distributions 7 O 0 0 8 Milhimum Asset Amount 1 Adjusted net income for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount 5 6 Distributable Amount 6 7 Distributable Amount 6 7 Distributable Amount 6 7 Distributable Amount 6 7 Distributable Amount 6 7 Distributable Amount 6 7 Distributable Amount 6 7 Distributable Amount 6 7 Distributable Amount 6 8 Distributable Amount 6 8 Distributable Amount 6 8 Distributable Amount 6 8 Distributable Amount 6 8 Distributable Amount 6 8 Distributable Amount 6 8 Distributable Amount 6 8 Distributable Amount 6 8 Distributable Amount 6 9 Distrib	1 Check here if the organization satisfied the Integral Part Test as a qualifying	ng trus	st on Nov 20, 1970 (explain	ın Part VI) See
1 Net short-term capital gain 1 2 2 2 2 Recoveres of prior-year distributions 2 2 3 3 Other gross income (see instructions) 3 3 4 4 0 0 0 0 0 5 Deprezation and depletion 5 5 0 5 Deprezation and depletion 5 5 0 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	instructions. All other Type III non-functionally integrated supporting organ	nızatı	ons must complete Sections	A through E
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8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)  8 O O  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)  a Average monthly value of securities  b Average monthly value of securities  c Fair market value of other non-exempt-use assets  d Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in detail in Part VI)  2 Acquisition indebtedness applicable to non-exempt-use assets  2 S Subtract line 2 from line 1d  4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 035  6 O O  7 Recoveries of prior-year distributions  7 O O  8 Minimum Asset Amount (add line 7 to line 6)  8 O O  Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  4 Enter 5% of line 1  2 Income tax imposed in prior year  6 Distributable Amount, Subtract line 6 from line 4, unless subject to	maintenance of property held for production of income (see instructions)	6		
Section B - Minimum Asset Amount  1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)  a Average monthly value of securities  b Average monthly value of securities  c Fair market value of other non-exempt-use assets  d Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in detail in Part VI)  2 Acquisition indebtedness applicable to non-exempt-use assets  2 S  3 Subtract line 2 from line 1d  4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 035  7 Recoveries of prior-year distributions  7 0 0 0  8 Minimum Asset Amount (add line 7 to line 6)  8 0 0 0  Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  5 Distributable Amount. Subtract line 5 from line 4 unless subject to	7 Other expenses (see instructions)	7		
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)  a Average monthly value of securities  b Average monthly value of other non-exempt-use assets  c Fair market value of other non-exempt-use assets  d Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in Part VI)  2 Acquisition indebtedness applicable to non-exempt-use assets  3 Subtract line 2 from line 1d  4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 035  7 Recoveries of prior-year distributions  7 0 0  8 Minimum Asset Amount (add line 7 to line 6)  8 0  Current Year  1 Adjusted net income for prior year (from Section A, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  5 Distributable Amount. Subtract line 5 from line 4 unless subject to	8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	0	0
a Average monthly value of securities b Average monthly value of securities c Fair market value of other non-exempt-use assets c Fair market value of other non-exempt-use assets c Total (add lines 1a, 1b, and 1c) d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 O O 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 O O 8 Minimum Asset Amount (add line 7 to line 6) 8 O O Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount, Subtract line 5 from line 4, unless subject to	Section B - Minimum Asset Amount		(A) Prior Year	` '
a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)  2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d 3 0 0 0 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 0 0 8 Minimum Asset Amount (add line 7 to line 6) 8 0 0 Current Year  1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 1 0 2 Enter 85% of line 1 2 1 Adjusted net income for prior year (from Section B, line 8, Column A) 3 1 0 4 Enter greater of line 2 or line 3 4 0 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	Aggregate fair market value of all non-exempt-use assets (see			
b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d 3 0 0 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 0 0 8 Minimum Asset Amount (add line 7 to line 6) 7 Adjusted net income for prior year (from Section A, line 8, Column A) 1 Adjusted net income for prior year (from Section B, line 8, Column A) 2 Enter 85% of line 1 2 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	instructions for short tax year or assets held for part of year)			
c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)  2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d 3 0 0 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 0 0 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 0 0 8 Minimum Asset Amount (add line 7 to line 6) 8 0 0  Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 1 0 2 Enter 85% of line 1 2 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 4 0 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 4 unless subject to	a Average monthly value of securities	1a		
d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)  2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d 3 0 0 0 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 0 0 0 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 0 0 0 6 Multiply line 5 by 035 6 0 0 0 7 Recoveries of prior-year distributions 7 0 0 0 8 Minimum Asset Amount (add line 7 to line 6) 8 0 0 Cection C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 Adjusted net income for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	<b>b</b> Average monthly cash balances	1b		
e Discount claimed for blockage or other factors (explain in detail in Part VI)  2 Acquisition indebtedness applicable to non-exempt-use assets  3 Subtract line 2 from line 1d  4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 035  7 Recoveries of prior-year distributions  7 0 0  8 Minimum Asset Amount (add line 7 to line 6)  8 0  Section C - Distributable Amount  Current Year  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to	c Fair market value of other non-exempt-use assets	1c		
factors (explain in detail in Part VI)  2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d 3 0 0 0 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 0 0 0 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 0 0 0 6 Multiply line 5 by 035 6 0 0 0 7 Recoveries of prior-year distributions 7 0 0 0 8 Minimum Asset Amount (add line 7 to line 6) 8 0 0 0 Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 2 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 4 unless subject to	d Total (add lines 1a, 1b, and 1c)	1d	0	0
2 Acquisition indebtedness applicable to non-exempt-use assets 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 0 0 8 Minimum Asset Amount (add line 7 to line 6) 7 Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	e Discount claimed for blockage or other	Obstant Careful		
3 Subtract line 2 from line 1d 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 0 0 8 Minimum Asset Amount (add line 7 to line 6) 7 Section C - Distributable Amount 7 Current Year 7 Adjusted net income for prior year (from Section A, line 8, Column A) 7 Enter 85% of line 1 7 Minimum asset amount for prior year (from Section B, line 8, Column A) 7 Enter greater of line 2 or line 3 7 O 8 Distributable Amount 9 Current Year 9 O 9 O 9 O 9 O 9 O 9 O 9 O 9 O 9 O 9 O	factors (explain in detail in Part VI)	¥,	المرابعة والمعارة المحاربين والمرابعة المرابعة والمرابعة	
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 035  7 Recoveries of prior-year distributions  7 0 0  8 Minimum Asset Amount (add line 7 to line 6)  8 0 0  Current Year  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4 unless subject to	2 Acquisition indebtedness applicable to non-exempt-use assets	2		
see instructions)  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 035  7 Recoveries of prior-year distributions  7 0 0  8 Minimum Asset Amount (add line 7 to line 6)  8 0 0  Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1  2 0  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to	3 Subtract line 2 from line 1d	3	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 0 0 8 Minimum Asset Amount (add line 7 to line 6) 8 0 0  Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to	4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 0 0 8 Minimum Asset Amount (add line 7 to line 6) 8 0 0 9 0 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	see instructions)	4	0	0
7 Recoveries of prior-year distributions 7 0 0 8 Minimum Asset Amount (add line 7 to line 6) 8 0 0  Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
8 Minimum Asset Amount (add line 7 to line 6)  8 0 0 0  Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4 unless subject to	6 Multiply line 5 by 035	6	0	0
Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4 unless subject to	7 Recoveries of prior-year distributions	7	0	0
1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4 unless subject to	Section C - Distributable Amount		Administration of the second o	Current Year
3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 0 4 Enter greater of line 2 or line 3 4 0 5 Income tax imposed in prior year 5 6 Distributable Amount. Subtract line 5 from line 4 unless subject to	2 Enter 85% of line 1	2	AN CHREST PROPERTY OF THE	0
5 Income tax imposed in prior year 5 6 Distributable Amount. Subtract line 5 from line 4, unless subject to	3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	4 Enter greater of line 2 or line 3	4		0
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	5 Income tax imposed in prior year	5		
emergency temporary reduction (see instructions) 6	•	6		0
7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)	7 Check here if the current year is the organization's first as a non-functional	lly inte		

Part	Type iii Non-Functionally integrated 505(a)(5	Supporting Organi	zations (continued)	
Section	on D - Distributions			Current Year
•1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt	pt purposes of supported	j	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiz	ations	
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			0
8	Distributions to attentive supported organizations to which the	nsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2016 from Section C, line 6			0
10	Line 8 amount divided by Line 9 amount	<del>,</del>		0 000
		/:>	(ii)	(iii)
S	ection E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
		EXCOCO DIGUIDATIONS	Pre-2016	Amount for 2016
_1_	Distributable amount for 2016 from Section C, line 6			0
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required—explain in Part VI) See			
	ınstructions	A CONTRACTOR OF THE STATE OF TH		
3_	Excess distributions carryover, if any, to 2016	White the property of the control of		
a		4.48¥ ****		
<u> </u>	and the second s	And the Carlotter Commence	and reflect the second	
<u>C</u>	From 2013 . 0			
<u>d</u>	From 2014 0			And the second second
e	From 2015 0			
f	Total of lines 3a through e	0		
g	Applied to underdistributions of prior years	Markey and the second of the second	0	ig and the
<u>h</u>	Applied to 2016 distributable amount			0
i	Carryover from 2011 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f	0		
4	Distributions for 2016 from	Marie Paris	of the south of the state of th	
	Section D, line 7 \$ 0			
a	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2016 distributable amount			0
<u>c</u>	Remainder Subtract lines 4a and 4b from 4	0		
5	Remaining underdistributions for years prior to 2016, if			
	any Subtract lines 3g and 4a from line 2 For result	Address of the		
	greater than zero, explain in Part VI See instructions	Formation of the Contract of t	0 Marie – militari s. sa. suterst, a malati S. Shillia	
6	Remaining underdistributions for 2016 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			U 200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7	Excess distributions carryover to 2017. Add lines 3j	_		
	and 4c Breakdown of line 7.	<u>l</u> Syrika ay kangangan yang kangan yang ka	Andrew Control of the	
<u>8</u>	breakdown of line 7.	en en en en en en en en en en en en en e		CONTRACTOR OF THE PARTY OF THE
<u>_a</u> b	Excess from 2013 0			A STATE OF THE STA
	Excess from 2014 0			
d	Excess from 2015 0			The state of the state of the
				Re-Cardinal Control of Control of the Control of Contro

Schedule A (Fo		ENVIRONMENTAL ACTION INC	13-3800068	Page 8
Part VI.	Supplemental Information. Provide the	e 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, Pa	art 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, Sectio	n B, line 1e, Part V, Section D, lines 5, 6, and 8, and P	Part V, Section E,	
		t for any additional information (See instructions)		
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#### **SCHEDULE D** (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name	e or the organization	Employer Identinication number
WES	ST HARLEM ENVIRONMENTAL ACTION INC	13-3800068
Par	organizations Maintaining Donor Advised Funds or Other Si	milar Funds or Accounts.
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 6.
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the asset	ats held in donor advised
•	funds are the organization's property, subject to the organization's exclusive legal	
6	Did the organization inform all grantees, donors, and donor advisors in writing the	
U	used only for charitable purposes and not for the benefit of the donor or donor a	<del>-</del>
	· · · · · · · · · · · · · · · · · · ·	Yes No
	purpose conferring impermissible private benefit?	
Par	rt II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part	
1	Purpose(s) of conservation easements held by the organization (check all that a	pply)
	Preservation of land for public use (e.g., recreation or education)	servation of a historically important land area
	Protection of natural habitat	servation of a certified historic structure
_	Preservation of open space	and the state of a company of a
2	Complete lines 2a through 2d if the organization held a qualified conservation or	
	easement on the last day of the tax year	
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a	·
d	Number of conservation easements included in (c) acquired after 8/17/06, and n	
_	historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguishe	d, or terminated by the organization during
	the tax year	
4	Number of states where property subject to conservation easement is located	<b>•</b>
5	Does the organization have a written policy regarding the periodic monitoring, in	spection, handling of
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and e	enforcing conservation easements during the year
	<b>•</b>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enfor	cing conservation easements during the year
	<b>▶</b> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requir	ements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	∐ Yes ∐ No
9	In Part XIII, describe how the organization reports conservation easements in its	revenue and expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization	ion's financial statements that describes
_	the organization's accounting for conservation easements	
Par	rt III Organizations Maintaining Collections of Art, Historical Trea	
	Complete if the organization answered "Yes" on Form 990, Part	V, line 8.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to repo	rt in its revenue statement and halance sheet
-	works of art, historical treasures, or other similar assets held for public exhibition	
	of public service, provide, in Part XIII, the text of the footnote to its financial state	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in	
-	works of art, historical treasures, or other similar assets held for public exhibition	
	•	, education, or research in furtherance
	of public service, provide the following amounts relating to these items	▶ ♠
	(i) Revenue included on Form 990, Part VIII, line 1	\$
•	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other sim	
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to	o tnese items
a	Revenue included on Form 990, Part VIII, line 1	\$
b	Assets included in Form 990, Part X	<b>▶</b> \$

Part	III . Organizations Maintaining	Collections of A	rt, Histo	orical Tr	easures, o	r Othe	<u>r Similar Ass</u>	ets (con	<u>tinuec</u>	1)
3	Using the organization's acquisition, ac	cession, and other i	records, o	check any	of the follow	ing that	are a significan	t use of its	S	
,	collection items (check all that apply).	ı								
а	Public exhibition		d $\square$	Loan	or exchange	progran	ns			
b	Scholarly research		e 🗍	Other		_				
С	Preservation for future generation	ns	_							
4	Provide a description of the organization XIII		explain h	ow they fu	rther the org	anızatıd	on's exempt purp	oose in Pa	ırt	
5	During the year, did the organization so							П.,		
	assets to be sold to raise funds rather t		ed as part	of the org	ganization's o	collectio	n'/ 	Ye	<u>.s</u>	No
Part	Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1a	Is the organization an agent, trustee, councluded on Form 990, Part X?	ustodian or other int	ermediar	y for conti	ributions or o	ther as	sets not	☐ Ye	es 🗀	No
b	If "Yes," explain the arrangement in Pa	rt XIII and complete	the follow	ving table						
-				J				Amount		
С	Beginning balance					10	c			(
d	Additions during the year					10	d			
е	Distributions during the year					10	e			
f	Ending balance					1	f			
2a	Did the organization include an amoun	t on Form 990, Part	X, line 2	1, for escr	ow or custod	lial acco	ount liability?	Ye	es X	No
b	If "Yes," explain the arrangement in Pa	rt XIII Check here if	f the expl	anation ha	as been prov	ided on	Part XIII			
Part	V Endowment Funds.		· · ·							
	Complete if the organization	answered "Yes"	on Form	990, Pa	rt IV, line 1	0				
		(a) Current year	(b) Pro	or year	(c) Two years	s back	(d) Three years bad	ck (e) Fo	ur years	back
1a	Beginning of year balance	0		0		0		0		
b	Contributions									
С	Net investment earnings, gains,			-						
	and losses		_							
d	Grants or scholarships									
е	Other expenditures for facilities						-			
	and programs									
f	Administrative expenses									
g	End of year balance	0		0		0		0		0
2	Provide the estimated percentage of the	e current year end t	oalance (i	line 1g, co	olumn (a)) he	ld as				
а	Board designated or quasi-endowment	<b>•</b>	<u>%</u>							
b	Permanent endowment	%								
С	Temporarily restricted endowment	<b>&gt;</b>								
_	The percentages on lines 2a, 2b, and 2									
3a	Are there endowment funds not in the	oossession of the or	ganızatıo	n that are	held and ad	mınıste	red for the			
	organization by	ı						<u> </u>	Yes	No
	(i) unrelated organizations	1						3a(i)		
_	(ii) related organizations			0 - 1	d D0			3a(ii)		
b	If "Yes" on line 3a(ii), are the related on							3b		L
Gord	Describe in Part XIII the intended uses		s endowr	nent tuna:	<u> </u>					
Part	• • • • • • • • • • • • • • • • • • • •			000 D-	-4 () / 1: 4:	4- 0-	- F 000 D		- 40	
-	Complete if the organization									
	Description of property	(a) Cost or oth (investme			st or other s (other)		Accumulated depreciation	( <b>d</b> ) Bo	ook value	е
1a	Land		0		0		(1) A. C.			0
b	Buildings		0		0		0			0
С	Leasehold improvements		0		230,316		126,075		10	4,241
d	Equipment		0		104,937		83,376			1,561
<u>e</u>	Other		0		16,000	L	0		1	6,000
Total.	. Add lines 1a through 1e (Column (d) n	nust equal Form 990	), Part X,	column (E	3), line 10c )		▶		14	1,802

141,802

Complete if the organizati		(c) Method of valu	
(including name of security)	(b) Book value	Cost or end-of-year ma	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			<del></del>
(E)			
(F)		<del> </del>	
(G) (H)			
Total (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>&gt;</b>		
Part VIII Investments—Program	<del></del>		
		90, Part IV, line 11c. See Form	990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valu	ation
		Cost or end-of-year ma	arket value
_(1)			
(2)			
(3)			<del></del>
(4)			
(5)			
(6)		<del></del>	
(7)	l l	1	
		<del> </del>	
(8)			
(8) (9)		Similaring where a state the same is a gradual deposit of the same and same	goga, gan ya 151-1841-884 ya ji hur Jiliyaniya 1844,
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>&gt;</b> (	Similar Control of the Control of th	gram dang dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah di Anggar (1944) dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah dialah
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets.			
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets.	on answered "Yes" on Form 9	90, Part IV, line 11d. See Form	990, Part X, line 15
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizati			990, Part X, line 15 (b) Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organizati	on answered "Yes" on Form 9		990, Part X, line 15 (b) Book value 8,000
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizati (1) Security deposit (2) Construction in progress	on answered "Yes" on Form 9		990, Part X, line 15 (b) Book value 8,000
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(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organizati  (1) Security deposit (2) Construction in progress (3) (4)	on answered "Yes" on Form 9		990, Part X, line 15 (b) Book value 8,000
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizati  (1) Security deposit (2) Construction in progress (3)	on answered "Yes" on Form 9		990, Part X, line 15 (b) Book value 8,000
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(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets.  Complete if the organizate  (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9)	on answered "Yes" on Form 9 (a) Description		990, Part X, line 15 (b) Book value
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(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizate  (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities.	on answered "Yes" on Form 9 (a) Description  (X, col (B) line 15)	90, Part IV, line 11d. See Form	990, Part X, line 15 (b) Book value  8,000 406,42
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizati (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizati	on answered "Yes" on Form 9 (a) Description  (X, col (B) line 15)	90, Part IV, line 11d. See Form	990, Part X, line 15 (b) Book value  8,000 406,42
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets.  Complete if the organizate  (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities.  Complete if the organizate line 25	on answered "Yes" on Form 9  (a) Description  f X, col (B) line 15)  on answered "Yes" on Form 9	90, Part IV, line 11d. See Form	990, Part X, line 15 (b) Book value  8,000 406,42
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(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizate  (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizate line 25 1. (a) Description of liability (1) Federal income taxes (2) Other payable	on answered "Yes" on Form 9  (a) Description  f X, col (B) line 15)  on answered "Yes" on Form 9	90, Part IV, line 11d. See Form  90, Part IV, line 11e or 11f See	990, Part X, line 15 (b) Book value  8,000 406,42  414,42  Form 990, Part X,
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizati (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizati line 25 1. (a) Description of liability (1) Federal income taxes (2) Other payable (3)	on answered "Yes" on Form 9  (a) Description  (X, col (B) line 15)  on answered "Yes" on Form 9  (b) Book value	90, Part IV, line 11d. See Form  90, Part IV, line 11e or 11f See	990, Part X, line 15 (b) Book value  8,000 406,42  414,42  Form 990, Part X,
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13)  Part IX Other Assets. Complete if the organizati  (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizati line 25 1. (a) Description of liability (1) Federal income taxes (2) Other payable (3) (4)	on answered "Yes" on Form 9  (a) Description  (X, col (B) line 15)  on answered "Yes" on Form 9  (b) Book value	90, Part IV, line 11d. See Form  90, Part IV, line 11e or 11f See	990, Part X, line 15 (b) Book value  8,00  406,42  414,42  Form 990, Part X,
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizate  (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizate line 25 1. (a) Description of liability (1) Federal income taxes (2) Other payable (3) (4) (5)	on answered "Yes" on Form 9  (a) Description  (X, col (B) line 15)  on answered "Yes" on Form 9  (b) Book value	90, Part IV, line 11d. See Form  90, Part IV, line 11e or 11f See	990, Part X, line 15 (b) Book value  8,00  406,42  414,42  Form 990, Part X,
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizate  (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizate line 25 1. (a) Description of liability (1) Federal income taxes (2) Other payable (3) (4) (5) (6)	on answered "Yes" on Form 9  (a) Description  (X, col (B) line 15)  on answered "Yes" on Form 9  (b) Book value	90, Part IV, line 11d. See Form  90, Part IV, line 11e or 11f See	990, Part X, line 15 (b) Book value  8,000 406,42  414,42  Form 990, Part X,
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizati (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizati line 25 1. (a) Description of liability (1) Federal income taxes (2) Other payable (3) (4) (5) (6) (7)	on answered "Yes" on Form 9  (a) Description  (X, col (B) line 15)  on answered "Yes" on Form 9  (b) Book value	90, Part IV, line 11d. See Form  90, Part IV, line 11e or 11f See	990, Part X, line 15 (b) Book value  8,000 406,42  414,42  Form 990, Part X,
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13)  Part IX Other Assets. Complete if the organizati  (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizati line 25 1. (a) Description of liability (1) Federal income taxes (2) Other payable (3) (4) (5) (6) (7) (8)	on answered "Yes" on Form 9  (a) Description  (X, col (B) line 15)  on answered "Yes" on Form 9  (b) Book value	90, Part IV, line 11d. See Form  90, Part IV, line 11e or 11f See	990, Part X, line 15 (b) Book value  8,000 406,42  414,42  Form 990, Part X,
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organizati (1) Security deposit (2) Construction in progress (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X Other Liabilities. Complete if the organizati line 25 1. (a) Description of liability (1) Federal income taxes (2) Other payable (3) (4) (5) (6) (7)	on answered "Yes" on Form 9  (a) Description  (X, col (B) line 15)  on answered "Yes" on Form 9  (b) Book value	90, Part IV, line 11d. See Form  90, Part IV, line 11e or 11f See	990, Part X, line 15 (b) Book value  8,000 406,42  414,42  Form 990, Part X,

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part	XI. Reconciliation of Revenue per Audited Financial Sta Complete if the organization answered "Yes" on Form 9		nue per Return.	
1 .	Total revenue, gains, and other support per audited financial statements		1	1,665,885
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		Miles Jelo.	1000[900
- а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities .	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII )	2d		
e	Add lines 2a through 2d	<u></u>	2e	(
3	Subtract line 2e from line 1		3	1,665,885
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a		
b	Other (Describe in Part XIII )	4b		
С	Add lines 4a and 4b	<u> </u>	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	5	1,665,885
Part	XII Reconciliation of Expenses per Audited Financial St	atements With Exp	enses per Return	) <b>.</b>
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 12a		0.404.04
1	Total expenses and losses per audited financial statements		1 1	2,101,84
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	ا ۔ما		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII )	2d		,
е	Add lines 2a through 2d		2e	0.404.04
3	Subtract line 2e from line 1	1 1	3	2,101,84
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	4-		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		,
_ C	Add lines 4a and 4b	40.)	4c	
5 Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.	ie 18)	5	2,101,84
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a are t XI, lines 2d and 4b Also complete this part			
	······································			
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WEST HARLEM ENVIRONMENTAL ACTION INC	13-3800068	Page <b>5</b>
mental Information (continued)		
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		• • • • • • • • • • • • • • • • • • • •
	mental Information (continued)	mental Information (continued)

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public 2016

OMB No 1545-0047

Inspection

Employer Identification number

13-3800068

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X Yes

WEST HARLEM ENVIRONMENTAL ACTION INC

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Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II

990, Part IV, line 21	, for any recip	ient that received	more than \$5,000.	990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	ated if additional spa	ice is needed.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Connecticut Coalition for Environm	06-1511861	501(c)(3)	22,000			-	Clean Power Rule Work
(2) Jesus People Against Pollution	42-8022360	501(c)(3)	25,000	;			Clean Power Rule Work
(3) Little Village Environmental Justice	36-4259477	501(c)(3)	20,000				Clean Power Rule Work
(4) Kingdom Living Temple	27-5165334	501(c)(3)	5,000				Clean Power Rule Work
(5) East Michigan Environmental Actio	23-7241219	501(c)(3)	000'9				Clean Power Rule Work
(6) Communities for Better Environme	94-2998086	501(c)(3)	20,000			į	Clean Power Rule Work
(7) Advocates for Environmental Hums	68-0589886	501(c)(3)	2,000				Clean Power Rule Work
(8) The Green Door Intrative	27-3467703	501(c)(3)	5,000				Clean Power Rule Work
(9) Deep South Center For Environme	56-2466977	501(c)(3)	20,000				Clean Power Rule Work
(10) Kentucky Coalition Inc	31-1113237	501(c)(3)	4,000				Clean Power Rule Work
(11)							
(12)							

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the instructions for Form 990.  $^{
m HTA}$ 

Schedule I (Form 990) (2016)

Jedule 1 (Eorm 990) (2016)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Clean F	Clean Power Plan advocacy	-	000'6		Book	
Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information r	equired in Part I, line	2; Part III, column	(b); and any other addit	tional information.

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

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2016

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

WEST HARLEM ENVIRONMENTAL ACTION INC		13-3800068		
Form 990, Part III, Line 4d Program Service Expe	nses 0, Grants and allocations 0, Revenue			
0 Movement Building				
Form 990, Part VI, Section B, Line 11A. FORM IS I				
GIVEN FOR FEEDBACK BEFORE SIGNING IN M	AILING			
Form 990, Part VI, Section B, Line 15 COMPENS	ATION IS DETERMINED BY THE BOARD OF I	DIRECTORS		
USING COMPARABLE INFORMATION AVAILABLE				
Form 990, Part VI, Section B, Line 12 DIRECTORS AND OFFICERS ARE ISSUED A COPY OF COI POLICY				
UPON APPOINTMENT ANNUAL DECLARATION IS GIVEN TO CONFIRM IF OR ANY CONFLICTS				
Form 990, Part VI, Section C, Line 19 DOCUMEN	T ARE AVAILABLE UPON REQUEST TO ANY	BOARD MEMBER		
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Name of the organization		Page ∠ Employer identification number
WEST HARLEM ENVIRONMENTAL ACTION INC		13-3800068
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