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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

2016

OMB No 1545-1150

Open to Public

Inspection

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A	For the	2016 calenda	ar year, or tax year beginning January 1 , 2016, a	and ending	Decemb	er 31 , 20 16
_	Check if ap	1	C Name of organization			identification number
	Address cl		Evans Scholars Foundation - Indiana	1		36-2865957
	Name cha	-	Telephone			
	Initial retur	m		847) 724-4600		
뉘		n/terminated	1 Briar Road City or town, state or province, country, and ZIP or foreign postal code	F	Group Ex	
H	Amended Application		Golf, IL 60029	ļ*	Number	
G		ing Method:	✓ Cash ☐ Accrual Other (specify) ►	H Ch	eck > V	if the organization is not
	Website	•	wgaesf.org			ttach Schedule B
			eck only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or		•	90-EZ, or 990-PF)
		organization				
			7b to line 9 to determine gross receipts If gross receipts are \$200,000 or m	ore, or if total as	sets	
			w) are \$500,000 or more, file Form 990 instead of Form 990-EZ			\$ 141057
	art I		e, Expenses, and Changes in Net Assets or Fund Balance			ns for Part I)
_			the organization used Schedule O to respond to any question in			
	1		ons, gifts, grants, and similar amounts received			T T
	2		ervice revenue including government fees and contracts		. 2	
	3	_	ip dues and assessments		. 3	141,057
	4	Investmen			. 4	111,007
	5a		ount from sale of assets other than inventory 5a			
	b		or other basis and sales expenses			
	C		ss) from sale of assets other than inventory (Subtract line 5b from lin	ne 5a)	. 5c	-
	6		d fundraising events	,		
	а	-	ome from gaming (attach Schedule G if greater than		ŀ	1
ne						
Revenue	Ь	Gross inco	me from fundraising events (not including \$ of	contributions		
چَ	1		aising events reported on line 1) (attach Schedule G if the			
_		sum of suc	ch gross income and contributions exceeds \$15,000) 6b) (
	С	Less: direc	et expenses from gaming and fundraising events 6c			
	d	Net incom	e or (loss) from gaming and fundraising events (add lines 6a and	6b and subtra	act	}
	1	line 6c)			· 6d	
	7a	Gross sale	s of inventory, less returns and allowances			
	b		of goods sold			
	C	Gross prof	it or (loss) from sales of inventory (Subtract line 7b from line 7a) .		. 7c	
	8		nue (describe in Schedule O)		. 8	
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9	141,057
	10		similar amounts paid (list in Schedule O)		. 10	ļ
	11		aid to or for members		. 11	72,991
es	12		ther compensation, and employee benefits		. 12	
Suc	13		al fees and other payments to independent contractors		. 13	
Expenses	14	•	y, rent, utilities, and maintenance		. 14	
Ú	1.0	0.,	ublications, postage, and shipping		. 15	
	16		enses (describe in Schedule O)			
	17		enses. Add lines 10 through 16			
ţ	18		(deficit) for the year (Subtract line 17 from line 9)			-26,222
šše	19		or fund balances at beginning of year (from line 27, column (A))	_		_
Ą]	-	ar figure reported on prior year's return)		<u> </u>	
Net Assets	20	Other char	nges in net assets or fund balances (explain in Schedule O)		20	
	121		or fund balances at end of year. Combine lines 18 through 20 F.I		<u>▶ 21</u>	
Fo	r Paper	work Reduct	ion Act Notice, see the separate instructions. Cat 1	No 10642I		Form 990-EZ (2016)

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						- 1 ago =
Pa	Balance Sheets (see the instructions f			Down II		
	Check if the organization used Schedule	O to respond to an	y question in this	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		t	43,853	22	17,631
23	Land and buildings			10/000	23	17,001
24	Other assets (describe in Schedule O)		[24	
25	Total assets			43,853	25	17,631
26	Total liabilities (describe in Schedule O)				26	
27	Net assets or fund balances (line 27 of column			43,853	27	17,631
Par						Expenses
M/h a	Check if the organization used Schedule t is the organization's primary exempt purpose?	O to respond to an Educational	ly question in this	Part III 📋	(Rec	quired for section
						(c)(3) and 501(c)(4)
	cribe the organization's program service accomplisheasured by expenses. In a clear and concise m				othe	
	ons benefited, and other relevant information for ea		CONTIOUS PROVIDE	a, the named of		
28					1	
	Support for 58 Indiana Evans Scholars students				}	
					ŀ	
	(Grants \$) If this amount	includes foreign gra	nts, check here .	<u> ▶ □</u>	28a	141,057
29					l	
					1	}
	(Grants \$) If this amount	ıncludes foreign gra	nte chack hara	<u> </u>	29a	J
30					294	'
30					İ	
					l	
	(Grants \$) If this amount	ıncludes foreign gra	nts, check here .	▶ 🛚	30a	,
31						
		ıncludes foreign gra			31a	·
	Total program service expenses (add lines 28a t				32	1
Par				•	nstru	ctions for Part IV)
	Check if the organization used Schedule		y question in this (c) Reportable	(d) Health benefits,		<u> </u>
	(a) Name and title	(b) Average hours per week	compensation	contributions to employ		
	(b) Mario and the	devoted to position	(Forms W-2/1099-MIS)			other compensation
	Kaczkowski			 	十	
	ident & CEO	0		o	0	0
Jeffr	ey Harrison					
	or Vice President, Education	0		0	0	0
Davi	d Robinson					
<u>Chai</u>	rman	0		0	0	0
	e Brueggeman	}		1	- }	
Chie	f Financial Officer	00		<u> </u>	0	0
-		-			- [
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Part '				Ť
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	3 Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	00	Yes	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	33		✓
34	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		_
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
_	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
b 38a	Did the organization file Form 1120-POL for this year?	37b	 	1
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		1
39	If "Yes," complete Schedule L, Part II and enter the total amount involved	1		
	Initiation fees and capital contributions included on line 9	-		
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0	1		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			,
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶		·	
42a	The organization's books are in care of ▶ Telephone no. ▶			
.	Located at ► ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over		1	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	42b	Yes	No ✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country: ▶	42c		1
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		,)	► □
			Yes	No
	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		√
	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		✓
	Did the organization receive any payments for indoor tanning services during the year?	44c		√
	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	444		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44d 45a		
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			<u> </u>
	Form 990-EZ (see instructions)	45b		

Page	4

	ъ							Yes	NO
46		ne organization engage, directly or in ndidates for public office? If "Yes," o							
				raili	 -		· 46	<u></u>	✓
Part		Section 501(c)(3) organizations		otions 17 10h and	E2 and a	omnista th	o tablaa i	iar lıa	00
		All section 501(c)(3) organization	s must answer que	Suons 47–49D and	oz, and c	omplete tri	e tables i	Or III	es
		50 and 51.		ta amu ausantian in	thia Dart VII				
		Check if the organization used Scl	nedule O to respond	to any question in	this Part VI		· · · · · ·	1	
47	D. 4 A	an average the course in John was	antimution or house a	anation FO1/h) clasti	aa in affaat	ــــــــــــــــــــــــــــــــــــــ		Yes	No
47		ne organization engage in lobbying If "Yes," complete Schedule C, Par				auring the		1	
40	•	•		00 If (0) (= 0 =		· · · ·	47	├	1
48		organization a school as described in		•				├ ──	1
49a		ne organization make any transfers to							-
- b		s," was the related organization a se							1 100
50		plete this table for the organization's byees) who each received more than							
	empic	byees) who each received more than	T \$ 100,000 of compet	isation from the orga		h benefits,	e, enter i	vone.	
	(0)	Name and title of each employee	(b) Average	(c) Reportable		s to employee	(e) Estimat	ed amo	unt of
	(a)	Name and title of each employee	hours per week devoted to position	compensation (Forms W-2/1099-MISC		s, and deferred	other cor	npensa	tion
			<u> </u>		Comp	ensation			
					- }				
					 				
NONE					1				
							<u> </u>		
	 -								
			<u> </u>						
)		
			,		1				
			<u> </u>	<u> </u>					
f	Total	number of other employees paid ov	er \$100,000	, >					
51		plete this table for the organization			t contracto	rs who eacl	h received	i more	e than
	\$100,	,000 of compensation from the orga	anization. If there is no	one, enter "None."					
	(a)	Name and business address of each independ	dent contractor	(b) Type of se	rvice	(0) Compensa	tion	
				 		ļ			
				-		{			
						 			
NONE				_					
				<u> </u>		 			
	-			1		1			
				ļ					
				1					
				<u> </u>		 			
	 -			1					
				<u></u>		1			
d	Total	number of other independent contra	actors each receiving	over \$100,000 .	. ▶				
52	Did 1	the organization complete Schedu	ule A? Note: All se	ection 501(c)(3) org	anızatıons	must attac	h a		
	comp	oleted Schedule A	<u> </u>	<u> </u>	<u></u>	<u> </u>	. ▶	s 🔲	No
		of perjury, I declare that I have examined this					nowledge an	d belief	f, ıt ıs
true, co	rrect, an	d complete Declaration of preparer (other tha	n officer) is based on all info	ormation of which prepare	r has any know				
	T	Otro				6-28-5	710		
Sign		Signature of officer	-		D	ate			
Here	1	Steve Brueggeman, Chief Financia	al Officer						
		Type or print name and title							
Paid	-	Print/Type preparer's name	Preparer's signature	t	Date	Check] if PTIN		
Prep	arer		<u></u>			self-empl			
Use		Firm's name ▶			F	ırm's EIN ▶			
		Firm's address ▶			P	hone no			
May tl	he IRS	discuss this return with the prepare	r shown above? See	instructions			► □ Ye	s 🗌	No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Open to Public

OMB No 1545-0047

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. Inspection

Name of the organization Employer					Employer identification	n number		
_	s Scholars Foundation - Indiana	· · · · · · · · · · · · · · · · · · ·					65957	
Par							ons.	
The c	The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)							
1	I ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)							
2								
3 4	☐ A hospital or a cooperative hos ☐ A medical research organization						(iii) Entartha	
•	hospital's name, city, and state	e:						
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in	
6 7	☐ A federal, state, or local govern ☐ An organization that normally described in section 170(b)(1)	receives a subs	tantial part of its supp				n the general public	
8	☐ A community trust described in			Part II.)				
9	An agricultural research organi or university or a non-land-grauniversity:	ization described nt college of agr	d in section 170(b)(1) iculture (see instruction	(A)(ix) op ons). Ente	r the nan	ne, city, and state of	the college or	
10	An organization that normally receipts from activities related support from gross investment acquired by the organization a	to its exempt fur t income and uni	nctions—subject to co related business taxal	ertaın exc ble incom	ceptions, ie (less si	and (2) no more that ection 511 tax) from	n 33¹/3% of its	
11	An organization organized and	operated exclus	sively to test for public	safety.	See sect i	ion 509(a)(4).		
12	☐ An organization organized and							
	of one or more publicly support the box in lines 12a thro							
а	Type I. A supporting organithe supported organization supporting organization. Yes	(s) the power to	regularly appoint or e	lect a ma	jority of t			
b	☐ Type II. A supporting organization(s). You must	the supporting o	rganization vested in	the same				
c	T. T	rated. A support	ting organization oper	ated in c			ally integrated with,	
đ			•			* *	orted organization(o)	
u	that is not functionally integrequirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ution requirement an		
е	Check this box if the organ functionally integrated, or 1						il, Type III	
f g	Enter the number of supported or Provide the following information							
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) is the c	rganization	(v) Amount of monetary	(vi) Amount of	
	W	, ,	(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)	
				Yes	No			
(A)								
(B)								
(C)								
(D)								
(E)								
Tota					 -			

Scriedu	18 A (FORTH 330 OF 330-EZ) 20 TO						Page Z
Part	II Support Schedule for Organiza	tions Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(v	i)
	(Complete only if you checked the	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support			<u>, </u>			
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	i	<u> </u>	l <u>.</u>	l <u></u>	I	<u> </u>
	on B. Total Support		1	1	T		1-2=
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015_	(e) 2016	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10					<u> </u>	<u> </u>
12	Gross receipts from related activities, etc	•				12	
13	First five years. If the Form 990 is for the		n's first, secor	nd, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he			<u> </u>	<u> </u>	· · · ·	▶ <u></u>
	ion C. Computation of Public Support						
14	Public support percentage for 2016 (line	. ,,	-			14	%
15	Public support percentage from 2015 Sci	hedule A, Part	II, line 14 .			15	%
16a	331/3% support test—2016. If the organ						
	box and stop here. The organization qua	•		_			
b	this box and stop here. The organization	qualifies as a	publicly supp	orted organizat	tion		🕨 🗀
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the organization	eets the "facts "facts-and-circ	s-and-circums	tances" test, c	heck this box	and stop here	. Explain ın
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization is Explain in Part VI how the organization is supported organization	ation meets th	ne "facts-and- cts-and-circum	circumstances stances" test.	" test, check	this box and	stop here.
18	Private foundation. If the organization dunstructions						lsee ▶ ┌

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Socti	on A. Public Support	4.140. 110.101	NO HOLOG DOIC	W, picaso oc	inpicto i ait	11.7	
		(a) 2012	(h) 0010	(=) 0014	(4) 0015	(-) 0040	(O T-1-1
Calen 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise	70934	155934	129199	167627	141057	664751
_	sold or services performed, or facilities					İ	
	furnished in any activity that is related to the		Ì	1		i	
_	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the	1		}		1	
	organization's benefit and either paid	1					
	to or expended on its behalf						
5	The value of services or facilities	İ	ŀ				
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	70934	155934	129199	167627	141057	664751
7a	Amounts included on lines 1, 2, and 3		ļ			ļ	
	received from disqualified persons .						
b	Amounts included on lines 2 and 3		ì				
	received from other than disqualified	,				Į.	
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support. (Subtract line 7c from		*	*	20 m		
	line 6.)				3, Y 15,		664751
<u>Secti</u>	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	70934	155934	129199	167627	141057	664751
10a	Gross income from interest, dividends,	<u>}</u>			ł		
	payments received on securities loans, rents,	ļ				ļ	
	royalties and income from similar sources .	120	73	28	0	0	221
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses	4					
	acquired after June 30, 1975						
C	Add lines 10a and 10b	120	73	28	0	0	221
11	Net income from unrelated business	İ					
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or	1			7		
	loss from the sale of capital assets	Ţ	Į		1	l	
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,		ľ		Ì	<u> </u>	_
	and 12.)	71054	156007	129227	167627	141057	664972
14	First five years. If the Form 990 is for the				_		
	organization, check this box and stop her			<u>· · · · · · · · · · · · · · · · · · · </u>	<u>· · · · · · · · · · · · · · · · · · · </u>	<u></u>	· · > 🗀
	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8		-	3, column (f))		15	99.97 %
16	Public support percentage from 2015 Sch			<u> </u>	<u></u>	16	99.96 %
	on D. Computation of Investment Inc				(0)	T 4= T	
17	Investment income percentage for 2016 (I					17	.03 %
18	Investment income percentage from 2015					18	.04 %
19a	331/3% support tests—2016. If the organi						
	17 is not more than 331/8%, check this box		-			-	_
b	331/3% support tests—2015. If the organiz						
	line 18 is not more than 331,8%, check this k	=	_	•			_
20	Private foundation. If the organization di	d not check a t	oox on line 14,	19a, or 19b, c	heck this box	<u>and see instruc</u>	tions_ 🕨 🗌

Part IV Su

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 A. All Supporting Organizations

- 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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Schedule A	(Form	990 or	990-F7	2016

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Part	V Supporting Organizations (continued)			
-			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		L
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u> </u>
Section	on B. Type I Supporting Organizations		-	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		,	
	controlled the organization's activities. If the organization had more than one supported organization,	1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	ļ		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
		,	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		ļ
Section	on D. All Type III Supporting Organizations			Щ
0000	on b. All Type in Supporting Significations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		<u> </u>
3	By reason of the relationship described in (2), did the organization's supported organizations have a		,	
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.			
Socti	on E. Type III Functionally Integrated Supporting Organizations	_3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	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 ins	structi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify]		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			اـــــا
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			, 1
	activities but for the organization's involvement.	- Oh		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	2b		
ა a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? Provide details in Part VI .	3a		J
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations					
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3.	4					
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7		<u> </u>			
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
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	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other factors (explain in detail in Part VI):						
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d.	3					
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035.	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1.	2		,			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3.	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6					
 7 Check here if the current year is the organization's first as a non-functional 	1 —	tegrated Type III supporti	no organization (see			
instructions).	y ""	togration Type III supporti	ng organization (see			

Part		Supporting Organi	zations (continued)		
Secti	on D - Distributions			Current Year	
1	Amounts paid to supported organizations to accomplish e	exempt purposes			
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted		
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations		
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.				
7	Total annual distributions. Add lines 1 through 6.	_			
8					
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2016 from Section C, line 6				
10	Line 8 amount divided by Line 9 amount	-			
		/n\	(ii)	(iii)	
Se	ection E - Distribution Allocations (see instructions)	(i)	Underdistributions	Distributable	
	·	Excess Distributions	Pre-2016	Amount for 2016	
1	Distributable amount for 2016 from Section C, line 6				
	Underdistributions, if any, for years prior to 2016				
2	(reasonable cause required—explain in Part VI). See				
2	instructions.				
3	Excess distributions carryover, if any, to 2016:				
a	Excess distributions carryover, if arry, to 2010.				
<u>a</u>	<u> </u>				
	From 2013				
	5 0044				
<u>d</u>	F 0045				
e	From 2015				
f	Total of lines 3a through e				
<u>g</u>	Applied to underdistributions of prior years		<u> </u>		
	Applied to 2016 distributable amount				
<u> </u>	Carryover from 2011 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2016 from				
	Section D, line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2016 distributable amount				
<u>c</u>					
5	Remaining underdistributions for years prior to 2016, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2016. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2017. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a					
b	Excess from 2013				
c					
d	Excess from 2015				
е	Excess from 2016				

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	