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)

OMB No 1545-1150 2017

Open to Public

For Paperwork Reduction Act Notice, see the separate instructions.

		the Treasury	 ▶ Do not enter social security numbers on this form as it may ▶ Information about Form 990-EZ and its instructions is at w 			Open to Public Inspection
		ue Service 2017 calenda	ar year, or tax year beginning , 2017, and en			, 20
		plicable	C Name of organization		Employer ide	entification number
Ad	ddress cl	nange	HOPE THAT BINDS INC		46-4105	5551
□ N	ame cha	nge	(E-1)	m/suite E	Telephone nu	
$\overline{}$	itial retur	•		1	•	
∏ Fı	nal retur	n/terminated	PO BOX 595		(270) 55	9-9649
一	nended		City or town state or province country and 7IP or foreign postal code)_ F	Group Exemp	
ᆽ		pending	CUNNINGHAM, KY 42035	7 I	Number ▶	
		ing Method.	X Cash Accrual Other (specify) ▶	H Ch		he organization is not
	/ebsite			.	uired to attach	
			check only one) - 🗶 501(c)(3)	i	orm 990, 990-E	
_	_		Corporation Trust Association Other	<u> </u>	7111 330, 330-E	2, 01 330-11).
		-	7b to line 9 to determine gross receipts If gross receipts are \$200,000 or more,	or if total acco		
					⊳ \$	CE 201
Pa			e, Expenses, and Changes in Net Assets or Fund Balance			
			the organization used Schedule O to respond to any question in this	•		· _
ļ	1		-, 3, 3,		<u> </u>	22,400
ł	2		vice revenue including government fees and contracts		<u> </u>	
	3	•	dues and assessments		3	
İ	4	Investment II	1 1		4	
	5a		nt from sale of assets other than inventory			
1	р					
	С		· · · · 5c			
- 1	6	v	fundraising events			
	а	Gross incom	Ì			
, 5		\$15,000)				
Revenue	b	Gross incom	e from fundraising events (not including \$ of c			
&		from fundrais	,			
		sum of such	gross income and contributions exceeds \$15,000) 6b			
i	С	Less direct	expenses from gaming and fundraising events 6c		, ,	
1	d	Net income d	or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract			ш
		line 6c) -			6d	
- }	7a	Gross sales	of inventory, less returns and allowances	42	,892	
	b	Less cost of	goods sold		,995	
}	С	Gross profit	or (loss) from sales of inventory (Subtract line 7b from line 7a)		· · · · 7c	20,89
	8		ue (describe in Schedule O)		8	
- {	9		Add Imag 1 2 2 4 Fo Ed 75 and 9	ال منوم الا منواح	> 9	43,29
	10			CEIVE	10	
	11		I to or for members		11	
Ì	12			9.0. 2018	12	
ses	13		er compensation, and employee benefits · · · · · · · · · · · · · · · · · · ·	1 2 0 20.0	2 13	
Expenses	14			Comp. Belle P. 1	7 14	
훘	15		lications, postage, and shipping	DEN, U	15	
۳	16		ses (describe in Schedule O)		16	
1	17		ses. Add lines 10 through 16			
-+	18			• • • • • • • •		10.55
ts			eficit) for the year (Subtract line 17 from line 9)		18	43,29
sse	19		r fund balances at beginning of year (from line 27, column (A)) (must agree with			
Net Assets	22	-	figure reported on prior year's return)		19	9,09
Se	20		es in net assets or fund balances (explain in Schedule O)		20	
- 1	21	Net assets o	r fund balances at end of year Combine lines 18 through 20		▶ 21	52,39

Form 990-EZ (2017)

52,393

Form 990-EZ (2017) HOPE THAT BINDS INC		_ 	46-4	105	551 Page 2
Part II Balance Sheets (see the instructions for Part II)					
Check if the organization used Schedule O to res	pond to any questio				
20.0		(A) Be	ginning of year	-	(B) End of year
22 Cash, savings, and investments		• • • • • • • • • • • • • • • • • • • •	9,096	22	52,393
23 Land and buildings24 Other assets (describe in Schedule O)			0	24	0
25 Total assets			0 006	25	52,393
26 Total liabilities (describe in Schedule O)		· · · · · · · · · · · · · · · · · · ·	<u>9,096</u> 0	26	52,393
27 Net assets or fund balances (line 27 of column (B) must agree w	uth line 21)		9,096	27	52,393
Part III Statement of Program Service Accomplishme			3,030	1	
Check if the organization used Schedule O to re-	-	•	П		Expenses
What is the organization's primary exempt purpose? PROVIDING I				1 '	uired for section
				1	c)(3) and 501(c)(4)
Describe the organization's program service accomplishments for each as measured by expenses. In a clear and concise manner, describe the				1	nizations, optional for
persons benefited, and other relevant information for each program title				othe	rs)
28 HOPE THAT BINDS SEEKS TO SERVE THE WESTERN	KENTUCKY AND				
SURROUNDING AREAS AS A MINISTRY BY PROVIDE	ING ADOPTION				
RESOURES.					
(Grants \$) If this amount inc	cludes foreign grants, c	heck here	▶ 📋	28a	5,582
29					
					
	cludes foreign grants, c	heck here	<u> ▶ ∐</u>	29a	<u> </u>
30					
(Create C	aluda o faranza anala a	h		200	
	cludes foreign grants, c			30a	
, -	cludes foreign grants, c			31a	
· · · · · · · · · · · · · · · · · · ·				32	5,582
Part IV List of Officers, Directors, Trustees, and Key Employ					
Check if the organization used Schedule O to respond to					~
	(b) Average	(c) Reportable	(d) Health benefits	s. T	
(a) Name and title	hours per week	compensation	contributions to emp		(e) Estimated amount of other compensation
	devoted to position	(Forms W-2/1099-MISC) (If not paid, enter -0-)	benefit plans, and deferred compensa		other compensation
WENDY WILSON]		
EXEC DIRECTOR	0.00	c		0	0
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					Form 990-EZ (2017)

Form 990-E	Z (2017)
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HOPE THAT BINDS INC

46-4105551

Page 3

	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V			$\cdot \square$
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the	}	}	
	change on Schedule O (see instructions)	34	ļ	X_
35 a	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		X
	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,	1	l 	
26	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		<u>X</u>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	1 20		V
37 a	during the year? If "Yes," complete applicable parts of Schedule N	36	 	X _
	Did the organization file Form 1120-POL for this year?	37b		\bar{x}
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	376		 ^-
50 u	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Х
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	30a	, -	Α_
39	Section 501(c)(7) organizations Enter:	-{		
а			*	
b	Gross receipts, included on line 9, for public use of club facilities	1	'	1
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	1 **		ļ.,
	section 4911 ▶ , section 4912 ▶ , section 4955 ▶			(
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958	1.		
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year	» ·	1	
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	1	X
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed			1:
	on organization managers or disqualified persons during the year under sections 4912,			87
	4955, and 4958 · · · · · · · · · · · · · · · · · · ·			
ď	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line		3.	Ş.,
	40c reimbursed by the organization · · · · · · · · · · · · · · · · · · ·	1		
е	,,,	W.	3 >	3
	transaction? If "Yes," complete Form 8886-T	40e	<u> </u>	<u> </u>
41	List the states with which a copy of this return is filed			
42 a	270	<u>59-9</u>	649	
	Located at ► PO BOX 595, CUNNINGHAM, KY ZIP+4 ► 42035			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No_
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country		.	
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and	ă .	Žů.	, V
_	Financial Accounts (FBAR).		-	A
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c	l	<u>X</u>
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	(L
	and office the amount of the exempt interest received of accided during the tax year		Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	·	103	+
	completed instead of Form 990-EZ	44a	'	Х
b		1		1
	completed instead of Form 990-EZ	44b	ļ	X
С	Did the organization receive any payments for indoor tanning services during the year?	44c	†	X
d			1	1
	explanation in Schedule O	44d	1	
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	Ī	Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the		T	1
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b		l x

Form 990-EZ (2	(017) HOPE THAT BINI	S INC		46-4	105551		age 4
, -						Yes	No
	e organization engage, directly or indirectly,		• •		100		3,
Part VI	didates for public office? If "Yes," complete Section 501(c)(3) organization			 	46_	<u> </u>	<u> X</u>
· art vi	All section 501(c)(3) organization		tions 47 - 49b and 5	2. and complete the	e tables for	rline	s
	50 and 51.			2, a.i.a co.i.p.o.c a			
	Check if the organization used S	chedule O to respond	d to any question in	this Part VI			$\cdot \square$
						Yes	No
47 Did th	e organization engage in lobbying activities	or have a section 501(h) ele	ection in effect during the	tax			
•	If "Yes," complete Schedule C, Part II				47		X
	organization a school as described in section		•		• • 48	<u> </u>	Х
	e organization make any transfers to an ex		organization? · · ·		• • 49a		X
	s," was the related organization a section 52	*	(4)		· · 49b	<u> </u>	1
	elete this table for the organization's five high eyees) who each received more than \$100,		•				
emplo	yees) who each received more man \$100,0	oo or compensation from tr			T		
	(a) Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	(d) Health benefits, contributions to employee	(e) Estimate		
	(a) Name and the oreach employee	devoted to position	(Forms W-2/1099-MISC)	benefit plans, and deferred compensation	other co	mpensa	tion
			<u> </u>				
NONE							
						_	
				Ì			
					ļ		
				}	}		
				-	 		
f Total r	number of other employees paid over \$100	000	L		J		
	elete this table for the organization's five high		lent contractors who each	received more than			
	000 of compensation from the organization			, roco.roc more man			
(;	Name and business address of each independent co	ntractor	(b) Type of service	e	(c) Compensation	n	
NONE							
				İ			
			ļ				
			 				
d Total r	number of other independent contractors ea	ich receiving over \$100,000) ▶				
52 Did the	e organization complete Schedule A? Note	: All section 501(c)(3) orgar	nizations must attach a				
compl	eted Schedule A				► 🛛 Yes		No
Under penaltie	es of perjury, I declare that I have examined this	eturn, including accompanying	schedules and statements,	and to the best of my knowle	edge and belief	, it is	
true, correct, a	and complete Declaration of preparer (other tha	n officer) is based on all inform	ation of which preparer has a	any knowledge			
C!	William Uso	M		8/15/18			_
Sign	Signature of officer			Date			
Here	WENDY WILSON, EXEC DIRE	CTOR					
	Print/Type preparer's name	Preparer's signature	Date		PTIN		
Paid		Toparci signature	1001	Check if self-employed		100	
Preparer	KEVIN S PUGH CPA	I PAC DILC	08-15-20	710	P00321	123	_
Use Only			<i>!</i>	Firm's EIN			_
	Paducah KY 420			Phone no 270	-408-148	3	
May the IRS	discuss this return with the preparer showi				► X Yes]	No
EEA				 	Form 9		(2017

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2017

Open to Public Inspection

Name of the organization Employer identification number HOPE THAT BINDS INC 46-4105551 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.) 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-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 5 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). 6 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)(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 X 10 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 III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 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. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s) (r) Name of supported organization (III) Type of organization (v) Amount of monetary (ii) EIN (iv) is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E) Total

46-4105551 Schedule A (Form 990 or 990-EZ) 2017 HOPE THAT BINDS INC Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support Subtract line 5 from line 4 · · Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2015 (f) Total (a) 2013 (b) 2014 (d) 2016 (e) 2017 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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) 1 . 4 Total support. Add lines 7 through 10 11 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2016 Schedule A, Part II, line 14 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this 16a box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test - 2016. 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 10%-facts-and-circumstances test - 2017. 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 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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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.)

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")				16,321	22,401	38,722
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				10,321	22,402	30,122
3	Gross receipts from activities that are not an unrelated trade or business under section 513 •						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5				16,321	22,401	38,722
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b · · · · · · · · · · · · · · · · · ·		22 000 100				
8	Public support. (Subtract line 7c from line 6)						38,722
	ction B. Total Support			······			
_	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6 · · · · · · · · · · · · · · · · · ·	ļ			16,321	22,401	38,722
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b · · · · · · · · · · · · · · · · · · ·						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on • • •						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12) · · · · · · · · · · · · · · · · · · ·	o		0	16,321	22,401	38,722
	First five years. If the Form 990 is for the organization, check this box and stop here	<u> </u>	<u></u> <u>.</u>	•	, , , ,		▶ 🏻
	ction C. Computation of Public Su						
15	Public support percentage for 2017 (line 8, co)		15	%
16	Public support percentage from 2016 Schedu					16	<u> %</u>
	ction D. Computation of Investme						
17	Investment income percentage for 2017 (line			umn (f))		17	<u>%</u>
18	Investment income percentage from 2016 Sc					18	%
19a	33 1/3% support tests - 2017. If the organiz 17 is not more than 33 1/3%, check this box	ation did not check and stop here . The	the box on line 14, e organization quali	and line 15 is more fies as a publicly si	e than 33 1/3%, and upported organizati	i line on · · · · ·	▶ 🗆
b	33 1/3% support tests - 2016. If the organiz line 18 is not more than 33 1/3%, check this	box and stop here .	. The organization o	jualifies as a public	ly supported organ	1/3%, and ization - · · ·	▶ □
20	Private foundation. If the organization did n	ot check a box on li	ine 14, 19a, or 19b,	check this box and	d see instructions		···· > []

Part 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.)

			nization	

- 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.)

		Yes	No
	1		-
	1		
	2		
	3a		
			_
	3b		
	_		
	3c		
i	_ 4a		-
	4b	,	,
	40	***	
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	5b 5c		
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	8_	,	
			*
	9a		<u> </u>
			, .
	9b		
	- 9c]	}
			_
	10a		

	Sule A (Form 990 or 990-EZ) 2017 HOPE THAT BINDS INC 46-4105551	_	P	age 5
Pa	rt IV Supporting Organizations (continued)		Vaa	Ala.
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	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		-
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		i
	etion B. Type I Supporting Organizations	1110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
_				
2	Did the organization operate for the benefit of any supported organization other than the supported			ĺ
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			ĺ
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		1
Sec	supervised, or controlled the supporting organization. stion C. Type II Supporting Organizations	2		<u> </u>
	nion of Type in 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			9 3
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			9 de 1
	or management of the supporting organization was vested in the same persons that controlled or managed			3, 3
	the supported organization(s).	1		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Sec	tion D. All Type III Supporting Organizations			<u></u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			,
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		1,0%	
	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		<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		, , , , , , , , , , , , , , , , , , ,	1
	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		
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	4		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			ľ
	supported organizations played in this regard.	3		^
Sec	tion E. Type III Functionally Integrated Supporting Organizations	1 -	·	
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	and any and the property of the dephasical dispersion of the property of the p			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	, and the second	[,	
	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	2-		
b	that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a	-	
	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	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.		+-	
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a]	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	_	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	ganiza	ations	
1	trust o	on Nov. 20, 1970 (explai	n in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	ization	s must complete Section	ns A through E
Section A. Adjusted Not Income		(A) Dries Voor	(B) Current Year
Section A - Adjusted Net Income	- 1	(A) Prior Year	(optional)
1 Net short-term capital gain	1		
2 Recovenes of pnor-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Continue D. Minimum Anna Anna and		(A) D	(B) Current Year
Section B - Minimum Asset Amount	- {	(A) Prior 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 ın detail ın 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	y-integ	rated Type III supporting	organization (see
inetructions)		• • • • • • • • • • • • • • • • • • • •	-

46-4105551

Par	<u> </u>	3) Supporting Organi	zations (continued)	·····
	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purpose	es of supported organiza	tions	
	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ie organization is respon	sive	
	(provide details in Part VI). See instructions.			
	Distributable amount for 2017 from Section C, line 6			_
10	Line 8 amount divided by Line 9 amount	· · · · · · · · · · · · · · · · · · ·		
s	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
	Distributable amount for 2017 from Section C, line 6	,		
2	Underdistributions, if any, for years prior to 2017	*		
	(reasonable cause required - explain in Part VI). See	,		<i>'</i>
	instructions.			· · · · · · · · · · · · · · · · · · ·
3_	Excess distributions carryover, if any, to 2017			·
a	*	*		
b	From 2013	*, \$,		
С	From 2014			
d	From 2015	1 1 1		
е	From 2016			
f	Total of lines 3a through e		•	
g	Applied to underdistributions of prior years			·
h	Applied to 2017 distributable amount	1	*	
i	Carryover from 2012 not applied (see instructions)	G. N. W.	< .	** ,
j	Remainder Subtract lines 3g, 3h, and 3i from 3f.		, ,	Q Q
4	Distributions for 2017 from			,
	Section D, line 7.			· · · · · · · · · · · · · · · · · · ·
а	Applied to underdistributions of prior years	**		
b	Applied to 2017 distributable amount	, b,	*	
С	Remainder Subtract lines 4a and 4b from 4.		,	*
5	Remaining underdistributions for years prior to 2017, if	15		*
	any. Subtract lines 3g and 4a from line 2. For result			,
	greater than zero, explain in Part VI. See instructions.	,		,
6	Remaining underdistributions for 2017. Subtract lines 3h	, , , , , , , , , , , , , , , , , , , ,		
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c			*
8	Breakdown of line 7:			* •
а	Excess from 2013			1
b	Excess from 2014			
С	Excess from 2015			, , , , , , , , , , , , , , , , , , , ,
d	Excess from 2016			
е	Excess from 2017			

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

Open to Public Inspection

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

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

▶ Complete if the organization is described below.

Section 527 organizations: Complete Part I-A only.

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

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

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

•	Section 501(c)(4), (5), or (6) organizations	: Complete Part III.			
Nam	e of organization	-		Em	ployer identification number
нс	PE THAT BINDS INC			46	-4105551
		ization is exempt under section	on 501(c) or i		
1	Provide a description of the organization's	s direct and indirect political campaign ac	ivities in Part IV (see instructions for	
	definition of "political campaign activities")			
2	Political campaign activity expenditures (s	see instructions)			\$
3	Volunteer hours for political campaign act	ivities (see instructions)			
Pa	rt I-B Complete if the organ	ization is exempt under section	on 501(c)(3).	· · · · · · · · · · · · · · · · · · ·	
1	Enter the amount of any excise tax incurre	ed by the organization under section 495	5		\$
2	Enter the amount of any excise tax incurre	ed by organization managers under secti	on 4955 · · ·		\$
3	If the organization incurred a section 4955	5 tax, did it file Form 4720 for this year?			Yes X No
4a	Was a correction made?				
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organ	ization is exempt under section	on 501(c), exc	cept section 50)1(c)(3).
1	Enter the amount directly expended by th	e filing organization for section 527 exem	pt function		
	activities				\$
2	Enter the amount of the filing organization	s funds contributed to other organization	s for section		
	527 exempt function activities				\$
3	Total exempt function expenditures Add I	ines 1 and 2 Enter here and on Form 11	20-POL,		
	line 17b				\$
4	Did the filing organization file Form 1120-				
5	Enter the names, addresses and employe				
	organization made payments. For each o		-		
	the amount of political contributions receive	ved that were promptly and directly delive	red to a separate	political organization	n, such
	as a separate segregated fund or a politic			=	
	(a) Name	(b) Address	(a) EIN	(d) Amount paid	from (e) Amount of political
	(a) Name	(b) Address	(c) EIN	filing organization	
				funds If none, ente	1 ' ' '
					delivered to a separate political organization
					If none, enter -0-
/4\					
(1)					
···					
(2)	`				
'0 \					
(3)					
(4)					
(4) 		[
(E)					
(5) 		[
/C\			<u> </u>		
(6)		[1	l l

	rt II-A Complete if the organization	is evernt	for section EA4	(c)/3) and filed	Form 5768 (elec	tion under	
ra	rt II-A Complete if the organization section 501(h)).	ı is exempt und	iei Section 30 i	(C)(S) and med	i orini ovoo (elec	adii uiluei	
_		- efficient and annual factor	ad liet in Dart IV agai	h official group mo	mharla nama		
Α (Check Inf the filing organization belongs to a			n anniated group me	mber s name,		
ь,	address, EIN, expenses, and share		•				
В (Check I if the filing organization checked bo		roi provisions apply		(a) Edua	(h) Affiliated	
		ying Expenditures	l ar inquered \		(a) Filing organization's totals	(b) Affiliated group totals	
	(The term "expenditures" m				Organization o totalo	9,000 101010	
1a	Total lobbying expenditures to influence public opin						
b	Total lobbying expenditures to influence a legislative						
C	Total lobbying expenditures (add lines 1a and 1b)	-					
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures (add lines 1c a						
f	Lobbying nontaxable amount Enter the amount from						
	columns	_ _T					
	If the amount on line 1e, column (a) or (b) is:	The lobbying r	ontaxable amount	is:			
	Not over \$500,000	20% of the amo					
]	Over \$500,000 but not over \$1,000,000		5% of the excess ov				
]	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 1	0% of the excess or	ver \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5	% of the excess over	er \$1,500,000			
	Over \$17,000,000	\$1,000,000				· · · · · · · · · · · · · · · · · · ·	
g	Grassroots nontaxable amount (enter 25% of line	1f) • • • • • • •					
h	Subtract line 1g from line 1a If zero or less, enter						
i	i Subtract line 1f from line 1c If zero or less, enter -0-						
j	If there is an amount other than zero on either line						
	reporting section 4911 tax for this year?					∐ Yes	
	(Some organizations that made a se	4-Year Averagin			of the five colum	ns below.	
				es 2a through 21			
	Lobby	ing Expenditures [Ouring 4-Year Avera	iging Period		· · · · · · · · · · · · · · · · · · ·	
	0.1.1	4-> 2044	(L) 2045	(-) 2016	(4) 2017	(e) Total	
	Calendar year (or fiscal year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total	
	beginning in)						
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount			, ,			
	(150% of line 2a, column (e))		*			·	
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))			4			
f	Grassroots lobbying expenditures						

EEA

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form'990 or 990-EZ) 2017 HOPE THAT BINDS INC

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(b))

For	each "Yes " response on lines 1a through 1, below, provide in Part IV a detailed		a)		(b)
For each "Yes," response on lines 1a through 1ı below, provide ın Part IV a detailed description of the lobbying activity.				A	mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local				
	legislation, including any attempt to influence public opinion on a legislative matter or				
	referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
ď	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?	<u> </u>			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		ļ		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>	<u> </u>		
i	Other activities?				
J	Total Add lines 1c through 1!		-		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912	-	*	<u> </u>	
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	/	-4.		·
D _a	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1/51	Or se	ction	
ı a	501(c)(6).	·)(IJ),	01 36	Cuon	
					Yes N
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1.00
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	 -
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			3	
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5),	or se	ection	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C	R (b) Par	t III-A,	line 3,
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		1		
	political expenses for which the section 527(f) tax was paid).		, ,		
а	Current year		2a		
b	Carryover from last year		2b		
С	Total · · · · · · · · · · · · · · · · · · ·	• •	2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	• •	3	ļ	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		`		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
	and political expenditure next year?	• •	4_	<u> </u>	
5	Taxable amount of lobbying and political expenditures (see instructions)	• •	5_		
·	rt IV Supplemental Information de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line	nes 1 a	and		
	e instructions), and Part II-B, line 1. Also, complete this part for any additional information				

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ

Go to www.irs.gov/Form990 for the latest instructions

OMB No 1545-0047

2017

Open to Public Inspection

ame of the organization					Employer id	entification number		
OPE THAT BINDS INC					46-41	.05551		
Part I Fundraising Activities	. Complete if	the organ	ization an	swered "Yes" on	Form 990, Part IV	/, line 17		
Form 990-EZ filers are no	t required to co	mplete this	part.					
1 Indicate whether the organization rais	ed funds through		_					
a Mail solicitations				of non-government gra	ants			
b 🔲 Internet and email solicitations f 🔲 Solicitation of government grants								
c Phone solicitations g Special fundraising events								
d In-person solicitations								
2a Did the organization have a written or	oral agreement w	ıth any indivi	dual (ıncludi	ng officers, directors, f	trustees,	_		
or key employees listed in Form 990,						′es 📙 No		
b If "Yes," list the 10 highest paid individ	uals or entities (fu	ındraisers) p	ursuant to a	greements under whic	th the fundraiser is to b	e		
compensated at least \$5,000 by the o	rganization							
			-	 	(v) Amount poid to			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization		
		Yes	No					
						1		
?								
!					· · · · · · · · · · · · · · · · · · ·			
ı								
i i	<u> </u>							
3		 -						
·								
								
)		-						
ntal .	<u> </u>							
	us requetored or lu		host contribut	tions or has been not	Fied it is exempt from			
3 List all states in which the organization registration or licensing.	is registered or III	censea to so	IICIL CONTRIBUI	iions oi nas deen notii	iled it is exempt from			
	· · · · · · · · · · · · · · · · · · ·	 ,						

			E THAT BINDS INC			4105551 Page 2
Pa	rt I		-			-
		than \$15,000 of fundraising		d gross income on Forn	n 990-EZ, lines 1 and 6l	b. List events with
		gross receipts greater than				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
		<u> </u>	(event type)	(event type)	(total number)	col (c))
Jue			,			
Revenue	1	Gross receipts				
_	2	Less Contributions				
	3	Gross income (line 1 minus				
		line 2)				
	4	Cash prizes				
	5	Noncash prizes		'		
ses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses	· · · · · · · · · · · · · · · · · · ·			
	10 11	Direct expense summary Add lines 4 Net income summary Subtract line 1				
Pa						more
		than \$15,000 on Form 990	-		•	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1	Gross revenue				
es	2	Cash prizes				
xpenses	3	Noncash prizes				
Direct Expe	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	Yes%	,
	7	Direct expense summary Add lines 2				<u> </u>
	8	Net gaming income summary Subtra		on (d)		
				<u> </u>		
9	En					
а	· · · · 📗 Yes 📗 No					
b	If "	No," explain:				
	_					
		ere any of the organization's gaming lid Yes," explain.	•	ed or terminated during the	•	· · · · · · Yes . No
	_					