В

## **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For the 2017 ca

Check if applicable Address change Name change Initial return Final return/terminate Amended return Application pendin

Tax-exempt status Website: ▶

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public 2

Open to Public

,	► Go to www.irs.gov/Form990 for instruction	ns and	the latest info	rmation.	lnsp	ection
е	ndar year, or tax year beginning Apr 1	, 2017	, and ending	Ма	r 31 <b>,20</b> 18	
	C Name of organization NORTH BRANCH AREA HOCKEY	ASS	OCIATION,	INC.	D Employer identification	n number
I	Doing business as				41-1983605	
I	Number and street (or P O box if mail is not delivered to street add	ress)	Room/suite	-	E Telephone number	
ı	320 MAIN STREET, PO BOX 541				(651)674-415	2
ď	City or town, state or province, country, and ZIP or foreign postal co	ode				
I	NORTH BRANCH, MN 55056		<u> </u>		G Gross receipts \$ 5,	192,758.
,	F Name and address of principal officer			H(a) Is this a g	roup return for subordinates?	Yes 🗵 No
	CRAIG MOLINE, 320 MAIN STREET, PO BOX 541, NORTH	BRANC	CH, MN 55056	H(b) Are all	subordinates included?	Yes 🗌 No
		7(a)(1) or	· □ 527′ <b>)</b> 🦳	If "N	lo," attach a list (see instri	uctions)
h	ttp://www.northbranchhockey.com/	)	$\sim$	H(c) Group	exemption number	
) ۱	X Corporation ☐ Trust ☐ Association ☐ Other ▶	L	ear of formation	198	7 M State of legal domic	ile MN
'n	ary	1				

K	Form of	organization 🔀 Corporation 🛄 Trust	Association _	Other ▶	L Year of fo	rmation 1987	M State	of legal domicile MN
P	art I	Summary			1			
	1	Briefly describe the organization	on's mission o	r most significan	t activities: SU	PPORT YOUTH	HOCK	EY PROGRAMS
Ş								
Governance								
/eu	2	Check this box ▶☐ if the orga	25% of	its net assets.				
ő	3	Number of voting members of	the governing	body (Part VI, lir	ne 1a) .   .   .		3	10
∞ಶ	4	Number of independent voting	members of t	he governing bo	dy (Part VI, line	1b)	4	10
ties	5	Total number of individuals en Total number of volunteers (es	nployed in cale	ndar <u>year 2017</u>	Part y, line 2a)		5	17
Activities	6	Total number of volunteers (es	timate if neces	ssary) Rt	CEIVED	- (a) · · · ·	6	150
	7a	Total unrelated business rever	nue from Part \	/III, colum <del>in (C),</del> T	ine 12		7a	-14,427.
	b	Net unrelated business taxable	e income from	Form 990-T, lune	98401 2019 .	121	7b	-12,764.
				<u> </u>		Prior Yea	.r	Current Year
a	8	Contributions and grants (Part	VIII, line 1h).		GDEN; UT	11,	,792.	10,201.
Revenue	9	Program service revenue (Part	: VIII, line 2g)	<u>. 0</u>	JUEIN, OT	41,	,128.	35,671.
ě	10	Investment income (Part VIII, o	olumn (A), line	s 3, 4, and 7d)		. [		
Œ	11	Other revenue (Part VIII, colum	ın (A), lines 5, (	6d, 8c, 9c, 10c, a	and 11e)	135,	,863.	142,266.
	12	Total revenue - add lines 8 thro	ough 11 (must e	equal Part VIII, co	lumn (A), line 12	) 188,	,783.	188,138.
	13	Grants and similar amounts pa	aid (Part IX, co	lumn (A), lines 1-	-3)			
	14	Benefits paid to or for membe	rs (Part IX, coli	umn (A), line 4)				
S	15	Salaries, other compensation, e						
Expenses	16a	Professional fundraising fees (	Part IX, colum	n (A), line 11e)				
ž.	b	Total fundraising expenses (Pa	熟糖 粒	LANGE TO COLUMN				
Ü	17	Other expenses (Part IX, colum	nn (A), lines 11	a-11d, 11f-24e)		130,	,622.	190,700.
	18	Total expenses. Add lines 13-	17 (must equa	l Part IX, column	(A), line 25) .	130,	,622.	190,700.
	19	Revenue less expenses. Subtr	act line 18 from	m line 12	<u> </u>		,161.	-2,562.
ets or						Beginning of Curr	ent Year	End of Year
a et	20	Total assets (Part X, line 16)				266	,959.	215,462.

Part II Signature Block

Under penalties of perjury, I pectare that I have examined this return, including accompanying schodulos and statements, and to the best of my knowledge and belief, it is of preparer (other than officer) is based on all information of which preparer has any knowledge true, correct, and complete

Sign	
Here	

Preparer

21

22

SCANNED MAY 0 6 2019

Signature

Total liabilities (Part X, line 26) .

Date

62,400

204,559

MOLINE, Type or print name and title Paid

Print/Type preparer's name Landon C. Scott, CPA Firm's name ► Landon C Scot

Date 02/02/2019

REV 10/16/18 PRO

Check | if

Firm's EIN ▶ 81-4529486

self-employed P01507064

**Use Only** Lake Elmo, MN Firm's address ▶ 8985 33rd St N, May the IRS discuss this return with the preparer shown above? (see instructions)

PRESIDENT

Net assets or fund balances. Subtract line 21 from line 20

Phone no. (651) 774-8785 X Yes ☐ No

Form 990 (2017)

13,465.

201,997

Part	
1	Check if Schedule O contains a response or note to any line in this Part III
•	CURPARE VALUE HACKEY PROCESSES
	SUPPORT TOUTH HOCKET PROGRAMS
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program solvies reported.
4a	(Code: ) (Expenses \$ 33,481. including grants of \$ 0.) (Revenue \$ 23,906.)
,	ORGANIZED AND OPERATED YOUTH HOCKEY TEAMS IN THE NORTH
	BRANCH AREA ALLOWING YOUTH TO PLAY ORGANIZED HOCKEY.
	DIMINGILANDA ADDOWING TOOTH TO THAT ONGANIZED HOUNET.
4b	(
	CHARITABLE GAMBLING - LAWFUL PURPOSE EXPENDITURES
	LAWFUL PURPOSE EXPENDITURES PROVIDE SUPPORT FOR NORTH BRANCH AREA YOUTH ACTIVITIES.
	SUCH EXPENDITURES INCLUDE YOUTH ATHLETIC FUNCTION COSTS AND DONATIONS TO OTHER VARIOUS SCHOOL
	RELATED FUNCTIONS AND ACTIVITIES.
4c	(Code: ) (Expenses \$ 11,765. including grants of \$ 0.) (Revenue \$ 21,966.)
	FUNDRAISING EVENTS
	THESE EVENTS ARE USED TO PROVIDE ADDITIONAL MORAL AND FINANCIAL SUPPORT TO THE
	YOUTH OF THE NORTH BRANCH AREA. EVENTS ALSO CREATE A POSITIVE SOCIAL ENVIRONMENT
	IN WHICH THE YOUTH AND THEIR PARENTS CAN INTERACT.
4d	Other program services (Describe in Schedule O.)
TU	(Expenses \$ Including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 189, 379



Part IV	Checklist of F	Required Schedules
---------	----------------	--------------------

			162	140
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		×
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		- +	
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		×
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\hat{\mathbf{x}}$
14 a		14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	×	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	· •	~	
	If "Yes," complete Schedule G, Part III	19	×	
		Forn	990	(2017)

Part	V Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	ļ	×
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	ļ <u>.</u> .	<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		,	
00		21	ļ	×
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	00		١.,
02	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		×
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	ļ	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	-20	-	×
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	056	ĺ	١.,
00	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	25b		×
26	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			<del>  ^</del>
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	×	<u> </u>
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	l		
	Schedule L, Part IV	28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			<del>  ^</del>
	conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			i –
	Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	ļ	×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	24		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	00a		<u> </u>
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		<u> </u>	<del>  ``</del>
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		!	
	19? Note. All Form 990 filers are required to complete Schedule O.	38	×	) (0017

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		<u>, [</u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3	Ĭ``		;
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-	• '	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	×	<del> </del>
20	Statements, filed for the calendar year ending with or within the year covered by this return 2a 17		}	4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b	×	\ <del></del>
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	<del>  ^</del>	<del> </del>
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	×	1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	×	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		<u> </u>	$\vdash$
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		×
b	If "Yes," enter the name of the foreign country: ▶			Ι.
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	٠, ا	'	1
	(FBAR).			<u> </u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	١_		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	C.L		
7	gifts were not tax deductible?	6b	50 %	10 11
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1 20 0	F1 .	
_	and services provided to the payor?	7a	وسفيسد	×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del>  ^</del>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	• •		<u> </u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<u> </u>		
	sponsoring organization have excess business holdings at any time during the year?	8		<u>×</u>
9	Sponsoring organizations maintaining donor advised funds.		1	
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
_ b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		, ×
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	ļ	, ,	
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	*		1 1
11	Section 501(c)(12) organizations. Enter:	1,		
	Gross income from members or shareholders			١.
b	Gross income from other sources (Do not net amounts due or paid to other sources	Ĭ.		. '
	against amounts due or received from them.)			.l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			· -
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u>.                                    </u>		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	L	
	Note. See the instructions for additional information the organization must report on Schedule O.	:	.	
b	Enter the amount of reserves the organization is required to maintain by the states in which	100		1
	the organization is licensed to issue qualified health plans	-1'.	. ′	· .
С	Enter the amount of reserves on hand	1 1	<del> </del>	<del>                                     </del>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<del>                                     </del>	×
-	it "Yee" has it tiled a Form (20 to renori these navments / it "No " orovide an explanation in Schedule ( )	140		

Part	Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedu						
	Check if Schedule O contains a response or note to any line in this Part VI			<u> </u>	<u>×</u>		
<u>Secti</u>	on A. Governing Body and Management						
4-		l <b>4.</b>		Yes	No		
та	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or	<b>1a</b> 10			.		
	if the governing body delegated broad authority to an executive committee or similar		•				
	committee, explain in Schedule O.		<u>-</u> 'l				
b	Enter the number of voting members included in line 1a, above, who are independent .	1 <b>b</b> 10			1 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business		· '	1			
	any other officer, director, trustee, or key employee?		2		×		
3	Did the organization delegate control over management duties customarily performed by or	under the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		×		
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4		×		
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets? .	5		×		
6	Did the organization have members or stockholders?		6	×			
7a	Did the organization have members, stockholders, or other persons who had the power to			.    -			
	one or more members of the governing body?		7a	×			
b	Are any governance decisions of the organization reserved to (or subject to approva						
	stockholders, or persons other than the governing body?		7b	×	ļ		
8	Did the organization contemporaneously document the meetings held or written actions un	idertaken during			.		
	the year by the following:		<u> </u>				
a	The governing body?		8a	×	<u> </u>		
b	Each committee with authority to act on behalf of the governing body?	ot ha reached at	8b	×			
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		×		
Secti	on B. Policies (This Section B requests information about policies not required by th		-	ode )			
3000	on B. I dides (This deciding requests information about policies not required by the	o mitornar movem		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?		10a		×		
b	If "Yes," did the organization have written policies and procedures governing the activities o	f such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befo	re filing the form?	11a	×			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	į		٠ ۵	.26.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12b		×		
С	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done.	policy? If "Yes,"	12c		×		
13	Did the organization have a written whistleblower policy?		13		×		
14	Did the organization have a written document retention and destruction policy?		14		×		
15	Did the process for determining compensation of the following persons include a review a	and approval by		.,,			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?		:	•		
а	The organization's CEO, Executive Director, or top management official		15a		×		
b	Other officers or key employees of the organization		15b		×		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		1 -		<sup> </sup>		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar than a standard devices the contribute assets.	ilar arrangement			لــــا		
	with a taxable entity during the year?		16a		×		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to the procedure of the procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to the procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to the procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to the procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to the procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to the procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to the procedure requiring the procedure requirements are procedured requirements.		4	r	· · ·		
	organization's exempt status with respect to such arrangements?		16b	<u></u>			
Secti	on C. Disclosure	<del> </del>	IUD		Ь—		
17	List the states with which a copy of this Form 990 is required to be filed ► MN	-					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	and 990-T (Section	5010	c)(3)s	onlv)		
	available for public inspection. Indicate how you made these available. Check all that apply.			-,,-,-			
	☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Sc.	hedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume	•	erest	policy	, and		
	financial statements available to the public during the tax year.	-	,	•			
20	State the name, address, and telephone number of the person who possesses the organization KELLY EIKLENBORG, PO BOX 541, NORTH BRANCH, MN 55056 (651) 674-		cords	<b>&gt;</b>			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

⊠ Check this box if neither the organization not	r any relate	d orga	aniz	atio	n c	ompe	nsa	ited any currer	it officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per	(do n box, office	ot ch	Pos neck ss pe d a d	c) ition more	e than o	one n an tee)	(D)  Reportable compensation from	(E)  Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CRAIG MOLINE PRESIDENT	5.00	×		×						
(2) DON SCHMITT VICE PRESIDENT	5.00	×		×						
(3) KELLY EIKLENBORG TREASURER	5.00	×		×						
(4) AUTUMN HANES SECRETARY	5.00	×		×						
(5) BRITTANY WYANDT REGISTRAR	5.00	×		×						
(6) RYAN SWENSON COACHING DIRECTOR	5.00	×								
(7) JESSIE MAGNISON FUNDRAISING DIRECTOR	5.00	×								
(8) CHRISTINE BORTZ PUBLICITY DIRECTOR	5.00	×								·
(9) MIKE RUNDLE ICE DIRECTOR	5.00	×								
(10) DAVID GERTEN MITE DIRECTOR	5.00	×								
(11)										
(12)										
(13)										
(14)										

	Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box. office Individua	ot ch unles	s pe	ition more	than of the state	an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation related organizatior (W-2/1099-MI	from Is	Estil amo of compo fror organ and	(F) mated punt of ther ensation m the nization related nization	on n I
(15)				H			<u> </u>							
(16)				$\mid \mid \mid$										
				H										
				$\vdash$										
		1		$\vdash$										
				H								<del>.</del> .		
(23)														
(24)														
(25)														
c d	Sub-total	VII, Sectio	on A 	•	· •	 <u></u>		<b>&gt; &gt; &gt;</b>						
2	Total number of individuals (including but reportable compensation from the organi		to th	ose	list	ed a	above	e) w	ho received m	ore than \$10	0,000 (	of 		
3	Did the organization list any former of employee on line 1a? If "Yes," complete S								oloyee, or high	est comper	sated	3	Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations individual											4		×
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or indi		5		·
Sectio	on B. Independent Contractors				_									<u> </u>
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of s	ervices	С	(C) ompens	ation	
					_									
2	Total number of independent contractor	ro (includia	b.			: ! <b>4</b>			and Based also			# m		

Part	VIII	Statement of Revenue Check if Schedule O contains a resp	onse or note to	any line in this	Dart VIII		
	š.		Johnse of Hote to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions)  All other contributions, gifts, grants, and similar amounts not included above 1f	10,201.				
Sontrib and Oth	g h	and similar amounts not included above 1f  Noncash contributions included in lines 1a-1f  Total. Add lines 1a-1f		10,201.			٠
	- 11	Total. Add lines Ta=11	Business Code	10,201.			
Program Service Revenue	2a b c	HOCKEY PROGRAM ASSESSMENTS	713000	35,671.	35,671.	0.	0.
gram Servi	d e f	All other program service revenue .					
ဥ	g	Total. Add lines 2a-2f	•	35,671.		!	
	3 4 5	Investment income (including divide and other similar amounts) Income from investment of tax-exempt be Royalties	ends, interest,				
	6a b c	Gross rents Less: rental expenses Rental income or (loss)  Net rental income or (loss)	(ii) Personal				
	7a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses .  Gain or (loss)	(ii) Other				
	d d	Net gain or (loss)	▶	-			
Other Revenue		Gross income from fundraising events (not including \$ 10,201. of contributions reported on line 1c). See Part IV, line 18 a	11,765.		:	į	
ð	1	Less: direct expenses b	11,765.				
	9a	Net income or (loss) from fundraising Gross income from gaming activities.  See Part IV, line 19 a	events . ►	0.		0.	<u>0</u> .
	С	Less: direct expenses b  Net income or (loss) from gaming acti	vities ►		· · · · · · · · · · · · · · · · · · ·		
		Gross sales of inventory, less returns and allowances a		.]			-
	b b	Less: cost of goods sold b  Net income or (loss) from sales of inve  Miscellaneous Revenue	4,992,855. entory ▶ Business Code	142,266.	144,133.	-14,427.	12,560.
	4.	Miscellaneous Revenue	Business Code				
	11a b c d	All other revenue					
	e	Total revenue See instructions	🟲	100 130	170 904	-14 427	12 560

### Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con			s must complete col	umn (A).
	Check if Schedule O contains a respon			<u></u>	
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22			,	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9 10	Other employee benefits				
11 a	Fees for services (non-employees):  Management				···
b	Legal	1,207.	0.	1,207.	0.
d	Accounting	1,207.		1,207.	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				,
12	Advertising and promotion	280.	280.	0.	0.
13	Office expenses	114.	0.	114.	0.
	Information technology				•
15	Royalties				
16 17	Occupancy	-			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20 21	Interest	21,600.	21,600.	0.	0.
22	Depreciation, depletion, and amortization .	2,722.	2,722.	0.	0.
23	Insurance	3,161.	3,161.	0.	<u> </u>
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	UTILITIES	1,626.	1,626.	0.	0.
b	LAWFUL PURPOSE DONATIONS	144,133.	144,133.	0.	0.
c	PROGRAM EXPENSE	8,373.	8,373.	0.	0.
d	REPAIR & MAINTANENCE	1,938.	1,938.	0.	0.
е	All other expenses	5,546.	5,546.	0.	0.
25	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	190,700.	189,379.	1,321.	0.
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Р	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this	s Part X		<u> 🗅</u>
	•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	172,984.	1	120,126.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	5,391.
	5	Loans and other receivables from current and former officers, directo		4	
		trustees, key employees, and highest compensated employee	es		
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under sect 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers a sponsoring organizations of section 501(c)(9) voluntary employees' beneficial	and		,
Ø		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
-	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			5
		other basis. Complete Part VI of Schedule D 10a 106, 16	64.	1.4	
	ь	Less: accumulated depreciation 10b 16,21		10c	89,945.
	11	Investments—publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	215,462.
	17	Accounts payable and accrued expenses		17	13,465.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	<u> </u>
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	<u>.</u>	21	
Liabilities	22	Loans and other payables to current and former officers, directo trustees, key employees, highest compensated employees, a	ind r	, 1 mg	The same of the sa
ap		disqualified persons. Complete Part II of Schedule L	00/000.	22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related the parties, and other liabilities not included on lines 17-24). Complete Part of Schedule D	t X	25	
	26	Total liabilities. Add lines 17 through 25		26	13,465.
es –		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ complete lines 27 through 29, and lines 33 and 34.	and		
anc	27	Unrestricted net assets		27	
3al	28	Temporarily restricted net assets		28	
ğ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 区 complete lines 30 through 34.	and		
ts	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	201,997.
<b>Vet</b>	33	Total net assets or fund balances	204,559.	33	201,997.
_	34	Total liabilities and net assets/fund balances	266,959.	34	215,462.
					Form <b>990</b> (2017)

Part	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<u>.                                     </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		188,1	138.
2	Total expenses (must equal Part IX, column (A), line 25)	2		190,7	700.
3	Revenue less expenses. Subtract line 2 from line 1	3		-2,5	562.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		204,5	559.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		201,9	997.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>	<u>. X</u>
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other STATE MANDATE				l i
	If the organization changed its method of accounting from a prior year or checked "Other," ex	cplain	in		
	Schedule O.		<u></u>		
2a					X
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or		
	reviewed on a separate basis, consolidated basis, or both:				.
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a	-	
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		ļ	_	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or				
	of the audit, review, or compilation of its financial statements and selection of an independent according				×
	If the organization changed either its oversight process or selection process during the tax year, ex	xplain	in		
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in		
	the Single Audit Act and OMB Circular A-133?		· 3a	$\perp$	×
b					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	audits.	3b		
			Fc	rm <b>990</b>	(2017)

#### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **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. Employer identification number

OMB No. 1545-0047

Open to Public Inspection

OR	ΤH	BR	ANCH	AREA	A HC	CKE	EY P	ASSO	CIAT	'ION,	INC.					41-1983	605			
Pa	rt I		Reas	on fo	r Pu	blic	Cha	arity	Statı	IIA) au	organ	ization	s must	comple	te this p	art.) See ir	nstructio	ns.		
he	orga	aniza	ation is	not a	priva	ate f	ound	ation	beca	use it i	s: (For	lines 1	through	12, chec	k only or	ne box.)	Λ			
1																0(b)(1)(A)(i)	· 61			
2											•		•		or 990-E		1)			
3															170(b)(1					
4						•		•	perate	ed in co	onjunct	ion witl	h a hosp	oital desc	ribed in s	ection 170	(b)(1)(A)	(iii). Er	nter the	
_	_		spital's										<b></b>							
5		sec	ction 1	70(b)(	1)(A)	(iv).	(Con	nplete	Part	II.)						d by a gov	/ernment	ai uni	( describ	iea in
6 7		An	organi	zation	that	nor	mally	/ rece	eives	a subs		part of			on 170(b) n a govern	(1)(A)(v). nmental un	it or fron	n the q	general p	oublic
8		Αc	ommu	nity tru	ust d	escr	ibed	in se	ction	170(b)	(1)(A)(	vi). (Co	mplete l	Part II.)						
9		or u uni	univers versity	ity or a :	a noi	n-Ian	ıd-gr	ant co	ollege	of agr	iculture	e (see ir	nstructio	ons). Ente	er the nan	conjunction ne, city, and	d state of	the c	ollege or	
10	X	rec	eipts f	rom ac	ctiviti oss i	es re	elate stme	d to it nt inc	s exe	mpt fu	nctions related	s—subj busine	ect to c	ertain exc ble incom	ceptions.	outions, me and (2) no i ection 511 t art III.)	more tha	n 331/:	₃% of its	SS
11																ion 509(a)(4				
12		] An	organi	zation	orga	ınize	d an	d ope	rated	exclus	sively fo	or the b	enefit o	f, to perfo	orm the fu	inctions of,	or to ca	rry out	the purp	oses
		of	one or	more	pub	licly	supp	orted	lorga	ınizatio	ns des	cribed	in secti	ion 509(a	)(1) or se	ection 509(	a)(2). Se	e seci	tion 509	(a)(3).
								-								on and com				
í	1		the su	pporte	ed or	gani	zatio	n(s) tl	he po	wer to	regula	rly appo	oint or e		jority of t	rted organiz he directors				ving
ı	,	П		_	_					-						supported o	rganizatı	on(s).	bv havin	a
			contro	ol or m	anaç	jeme	ent o	f the s	suppo	orting o	rganiza	ation ve		the same		that contro				
•	;															n with, and i <b>ons A, D,</b> a		ally ınt	egrated	with,
(	1		that is	not fu	unctio	onall	y inte	egrate	ed. Th	ne orga	nizatio	n genei	rally mu	st satisfy	a distribu	ection with ution require nd Part V.	its suppo ement ar	orted on a	organizat attentiver	ion(s) ness
•	<b>;</b>														he IRS the organizat	at it is a Typi ion.	oe I, Typ	e II, Ty	pe III	
1										ons .										
9	j F	rov	ide the	follow	ving i	nfor	matic	on ab	out th	ie supp	orted	organiz	ation(s).							
	(1)	Nam	e of sup	oorted o	organiz	ation			(ii) El	IN	(descri	pe of orga bed on lii (see instr	nes 1-10	listed in you	organization ur governing ment?	(v) Amount of support instruct	t (see	othe	i) Amount o er support ( nstructions	see
													· ·	Yes	No					
A)																				
3)										·										
C)																				
D)																				
Ε)	•																			
		-			_			1						عتيني ا				<b>—</b> —		

Schedu	le A (Form 990 or 990-EZ) 2017						Page <b>2</b> ,
Part	Support Schedule for Organiza (Complete only if you checked the Part III. If the organization fails to	e box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	•
Secti	on A. Public Support	quality und	Ci tile testo li	sted below, p	nease comple	oto i art iii.j	$\overline{}$
	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(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			/			
	on B. Total Support		7				<del> </del>
Calen 7	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources				:		
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 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for thorganization, check this box and stop he	e organizatio	n's first, secon	d, third, fourth	n, or fifth tax y	12 ear as a section	` -
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2017 (line 6					14	<u>%</u>
15 16a b	Public support percentage from 2016 Sch 331/3% support test—2017. If the organi box and stop here. The organization qual 331/3% support test—2016. If the organi	zation did no lifies as a pub zation did not	t check the book licly supported t check a box o	l organization on line 13 or 16	nd line 14 is 3  6a, and line 15		▶ 🗆
17a	this box and stop here. The organization  10%-facts-and-circumstances test—20  10% or more, and if the organization me Part VI how the organization meets the " organization	O17. If the org	janization did r s-and-circumst	not check a bo ances" test, c	ox on line 13, 1 heck this box	and <b>stop here</b>	. Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization in Part VI how the organization in supported organization	ition meets the "faction of the state of the	ne "facts-and- cts-and-circum	circumstances stances" test.	test, check. The organizat	this box and ion qualifies as	stop here. s a publicly ▶ □
18	Private foundation. If the organization di instructions	a not check a	Dox on line 13	, 16a, 16b, 17	a, or 1/b, chec	ck this box and	see ▶ □

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

(Complete only if you checked the box on line 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.)

S-ati	on A Dublic Support	under the tec	TIS IISTOG BOIL	, piodoc co	inplote i dit i	1.7	
	on A. Public Support	( ) 0040	41.0044	( ) 0045	/ !! 0040	(1) 0047	(0 T-1-1
	dar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	64,048.	98,481.	73,213.	52,920.	45,872.	334,534.
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	9,503.	2,069.	7,916.	11,443.	11,765.	42,696.
3	Gross receipts from activities that are not an	3,000.	2,0000	,,,,,,,			
•	unrelated trade or business under section 513						
							<del></del>
4	Tax revenues levied for the						
	organization's benefit and either paid to					Ì	
	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	73,551.	100,550.	81,129.	64,363.	57,637.	377,230.
	Amounts included on lines 1, 2, and 3					•	
	received from disqualified persons .						
	· ·						
D	Amounts included on lines 2 and 3			ļ			
	received from other than disqualified	i :					
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						<del></del>
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from	``	٠	<b>`</b>	•	in a proper	
	line 6.)		, pr.			45	377,230.
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	73,551.	100,550.	81,129.	64,363.	57,637.	377,230.
-	Gross income from interest, dividends,	, , , , , , , , , , , , , , , , , , , ,				<del></del>	
	payments received on securities loans, rents,						
	royalties, and income from similar sources.	51.	103.	127.	0.	0.	281.
		31.	103.	127.		·	201.
D	Unrelated business taxable income (less						
	section 511 taxes) from businesses						60 000
	acquired after June 30, 1975	0.	50,112.	0.	12,088.	0.	62,200.
С	Add lines 10a and 10b	51.	50,215.	127.	12,088.	0.	62,481.
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.)	73 602	150,765.	81,256.	76,451.	57,637.	439,711.
14	First five years. If the Form 990 is for the						
17	organization, check this box and stop he						
Casti					<u> </u>	• • • • •	•••
	on C. Computation of Public Suppor			2 column (6)	·····	15	0E 70 0/
15	Public support percentage for 2017 (line 8						85.79 %
16	Public support percentage from 2016 Sch			· · · · ·	· · · · ·	16	82.23 %
	on D. Computation of Investment In					<del></del>	<del></del>
17	Investment income percentage for 2017 (						14.21 %
18	Investment income percentage from 2016						<u> 17.77 %</u>
19a	331/3% support tests-2017. If the organ	ization did not	check the box	on line 14, ar	nd line 15 is m	ore than 331/39	
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2016. If the organiz						
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	•	<del>-</del>		•		
£U	i i i tute i vui iuativii. II tiie vi yai iizativii ui	a not officer a	20A OH III 10 17	, , , , , , , , , , , , , , , , , , , ,	TOOK WIND DOX	w. 10 000 11 10 11 0	

## 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.)

Sectio	n A.	All	Supporting	<b>Organizations</b>

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		]
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? 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 <b>Part VI</b> .	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI.</b>	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

CHEUU	REA (1 01111 330 01 330-LZ) 2011			aye •
Part	IV Supporting Organizations (continued)		1	r
			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		
b	A family member of a person described in (a) above?	11b		
С	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		
Secti	on B. Type I Supporting Organizations			
			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		1	
	tax year? If "No," describe in <b>Part VI</b> 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	<del></del>		<del>                                     </del>
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>	1		١.
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		١.,	١٠,
	supervised, or controlled the supporting organization.	2		<u></u>
2 o o ti	ion C. Type II Supporting Organizations		L	1
secu	on C. Type ii Supporting Organizations		Yes	No
			168	140
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	'	ļ " <b>,</b> ,	
	or management of the supporting organization was vested in the same persons that controlled or managed	<u> </u>	حت	`
	the supported organization(s).	<u> 1</u>		L
Secti	on D. All Type III Supporting Organizations		,	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1, , , 3	1.	3-
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1.0	] 7	-
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		<u>.</u>	<u></u>
	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			ļ -
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		1.
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	100	1	r.
	significant voice in the organization's investment policies and in directing the use of the organization's	Spra.	1 (4)	, a .
	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.	3		
Secti	ion E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	inctru	otion	<u>-1</u>
1		nou u	CHOIL	<b>3</b> ).
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 (	sce in	struct	ions)
2	Activities Test. Answer (a) and (b) below.		Yes	No
		-4	1	
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 <b>Part VI identify</b>		ļ' ,	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	. •	i'	, '
	how the organization was responsive to those supported organizations, and how the organization determined		1	
	that these activities constituted substantially all of its activities.	2a		
1	·	20	-	-
þ	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 <b>Part VI</b> the	ļ, · · ·	: :	
	reasons for the organization's position that its supported organization(s) would have engaged in these		<u> </u>	<del> </del>
	activities but for the organization's involvement.	2b	<u> </u>	ļ.,
3	Parent of Supported Organizations. Answer (a) and (b) below.	14 11		'
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		<del> </del>	<u> </u>
	trustees of each of the supported organizations? Provide details in Part VI.	3a	<u> </u>	L
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	_48	شمعا	
	of its supported organizations? If "Ves." describe in Part VI the role played by the organization in this regard	3b	1	I

instructions).

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 (B) Current Year (optional)  1 Net short-term capital gain 1 1 2 Recoveries of prior-year distributions 2 2 3 0 ther gross income (see instructions) 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
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 2 3 Other gross income (see instructions) 3 4 Add lines 1 through 3. 4 Add lines 1 through 3. 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4). 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly value of securities 1 A drough lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Can be deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section B, line 8, Column A) 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Income tax imposed in prior year				ain in Part VI). See
1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4). 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 Aggregate fair market value of difference or assets held for part of year): 1 Average monthly value of securities 1 Average monthly cash balances 1 b Average monthly cash balances 1 b C Fair market value of other non-exempt-use assets 1 c d Total (add lines 1a, 1b, and 1c) 1 d D D D D D D D D D D D D D D D D D D				
2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4). 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly value of securities 1 b Average monthly value of securities b Average monthly cash balances 1 th 0 c Fair market value of other non-exempt-use assets 1 c d Total (add lines 1a, 1b, and 1c) 1 e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Other consempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035. 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 7 A Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year (from Section B, line 8, Column A) 5 Income tax imposed in prior year (from Section B, line 8, Column A) 6 Distributable Amount subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Distributable Amount. Subtract line 6 income fee instructions (see instructions).	Section A - Adjusted Net Income		(A) Prior Year	1 ' '
3 Other gross income (see instructions) 4 Add lines 1 through 3. 4 Add lines 1 through 3. 5 Depreciation and depletion 5 Formatication and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4). 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly value of securities 1 b Average monthly value of securities 1 c d Total (add lines 1a, 1b, and 1c) 1 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). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section B, line 8, Column A) 2 Enter 85% of line 1. 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount Subtract line 4 from line 4, unless subject to emergency temporary reduction (see instructions). 6 mergency temporary reduction (see instructions). 7 emergency temporary reduction (see instructions). 8 distributions of the column and the prior year (from Section B, unless subject to emergency temporary reduction (see instructions).	1 Net short-term capital gain	1		
4 Add lines 1 through 3. 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of properly held for production of income (see instructions) 7 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4). 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly value of securities b Average monthly value of other non-exempt-use assets c Fair market value of other non-exempt-use assets t c d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indetail in Part VI): 2 Acquisition indetail in Part VI): 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035. 6 Pecoveries of prior-year distributions 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 B, line 8, Column A) 1 A Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount Subtract line 4, unless subject to emergency temporary reduction (see instructions). 6 Distributable Amount Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	2 Recoveries of prior-year distributions	2		
5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).  Section B - Minimum Asset Amount  1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly value of securities b Average monthly cash balances 10 c Fair market value of other non-exempt-use assets 11 c d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035. 6 Recoveries of prior-year distributions 7 Recoveries of prior-year distributions 7 Alimimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6		3		
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)  7 Other expenses (see instructions)  8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).  8 Section B - Minimum Asset Amount  (A) Prior Year  (B) Current Year (optional)  1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  a Average monthly value of securities  b Average monthly value of securities  c Fair market value of other non-exempt-use assets  t t t t T t t t t t t t t t t t t t t		-		
collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)  7 Other expenses (see instructions)  8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).  8 Section B - Minimum Asset Amount  1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  a Average monthly value of securities  b Average monthly cash balances  c Fair market value of other non-exempt-use assets  c Fair market value of other non-exempt-use assets  d Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets  2 3 Subtract line 2 from line 1d.  4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  7 Recoveries of prior-year distributions  8 Minimum Asset Amount (add line 7 to line 6)  8 Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	5 Depreciation and depletion	5		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).  8 Section B - Minimum Asset Amount  1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  a Average monthly value of securities  b Average monthly value of other non-exempt-use assets  c Fair market value of other non-exempt-use assets  d Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets  2 3 Subtract line 2 from line 1d.  4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  7 Recoveries of prior-year distributions  7 A Minimum Asset Amount (add line 7 to line 6)  8 Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6 (B) Current Year	collection of gross income or for management, conservation, or	6		;
Section B - Minimum Asset Amount  (A) Prior Year  (B) Current Year (optional)  1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  a Average monthly value of securities  b Average monthly cash balances  t To Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets  2 Subtract line 2 from line 1d.  3 A Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  7 Recoveries of prior-year distributions  7 A Minimum Asset Amount (add line 7 to line 6)  Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	7 Other expenses (see instructions)	7		
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  a Average monthly value of securities  b Average monthly value of securities  c Fair market value of other non-exempt-use assets  d Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets  3 Subtract line 2 from line 1d.  4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  7 Recoveries of prior-year distributions  8 Minimum Asset Amount (add line 7 to line 6)  8 Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
instructions for short tax year or assets held for part of year):  a Average monthly value of securities  b Average monthly cash balances  c Fair market value of other non-exempt-use assets  d Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets  2 3 Subtract line 2 from line 1d.  4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  7 Recoveries of prior-year distributions  7 Recoveries of prior-year distributions  8 Minimum Asset Amount (add line 7 to line 6)  Section C - Distributable Amount  Current Year  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  2 Inter greater of line 2 or line 3.  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6	Section B - Minimum Asset Amount		(A) Prior Year	
a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Instributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Instributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	1 Aggregate fair market value of all non-exempt-use assets (see			
b Average monthly cash balances c Fair market value of other non-exempt-use assets c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 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) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount, Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	instructions for short tax year or assets held for part of year):	<u> </u>		
c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 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) 2 Enter 85% of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Instributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).				
d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 6	<b>b</b> Average monthly cash balances	_		
e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets  3 Subtract line 2 from line 1d.  4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  7 Recoveries of prior-year distributions  7 Minimum Asset Amount (add line 7 to line 6)  Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		-		
factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets  3 Subtract line 2 from line 1d.  4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  7 Recoveries of prior-year distributions  7 Minimum Asset Amount (add line 7 to line 6)  Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	d Total (add lines 1a, 1b, and 1c)	1d		
3 Subtract line 2 from line 1d.  4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  7 Recoveries of prior-year distributions  7 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)  2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).				
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  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)  2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6	2 Acquisition indebtedness applicable to non-exempt-use assets	2		
see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by .035.  7 Recoveries of prior-year distributions  7 Minimum Asset Amount (add line 7 to line 6)  Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	3 Subtract line 2 from line 1d.	3		
6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 7 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 Enter 85% of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6	· · · · · · · · · · · · · · · · · · ·	4		
7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6)  8 Current Year  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6	5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
8 Minimum Asset Amount (add line 7 to line 6)  8 Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6	6 Multiply line 5 by .035.	6		
Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  Current Year  Current Year	7 Recoveries of prior-year distributions	7		
1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6	8 Minimum Asset Amount (add line 7 to line 6)	8		
2 Enter 85% of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	Section C - Distributable Amount			Current Year
3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6	1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  6	2 Enter 85% of line 1.	2		
5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).  5	3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	4 Enter greater of line 2 or line 3.			
emergency temporary reduction (see instructions).	5 Income tax imposed in prior year	5		
energency temperary reduction (see include energy.		6	'	
7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see			tegrated Type III supporting	ng organization /see

Schedule A (Form 990 or 990-EZ) 2017

Part	Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets	-·		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2017 from Section C, line 6			· = :: :
		<del></del>		
10_	Line 8 amount divided by line 9 amount	<u> </u>	(ii)	(iii)
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2017	f u	1 1	
ą				,
b	From 2013 .		r <sub>n</sub>	
C	From 2014	- 1		v.
d	From 2015			,
e	From 2016			, , ,
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7: \$			•
а	Applied to underdistributions of prior years			ţ
b	Applied to 2017 distributable amount			
С	Remainder, Subtract lines 4a and 4b from 4.		•	
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
	Excess from 2017			<del> · · · · · · · · · · · · · · · · · ·</del>

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.)
	·
	· · · · · · · · · · · · · · · · · · ·
	<del>`</del> <del>`</del>
<b></b>	
	<del></del>
	·
••••	
·	

#### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

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

OMB No. 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2017

Employer identification number

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

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

41-1983605 NORTH BRANCH AREA HOCKEY ASSOCIATION, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . 3 Aggregate value at end of year . . . . . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2a Total number of conservation easements . 2b Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and 9 balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X . . .

REV 10/16/18 PRO

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

BAA

Part								
3	Using the organization's acquisition, accollection items (check all that apply):	ession, and oth	ner recor	ds, chec	k any of the fo	ollowir	ng that are a sig	gnificant use of its
а	☐ Public exhibition		d [	☐ Loan	or exchange p	orogra	ms	
b	☐ Scholarly research		<b>e</b> [	☐ Other	r			
С	☐ Preservation for future generations							
4	Provide a description of the organization XIII.	n's collections a	nd expla	in how t	hey further the	orgai	nization's exem	pt purpose in Part
5	During the year, did the organization so assets to be sold to raise funds rather that							
Part	V Escrow and Custodial Arrang	jements.			•			
	Complete if the organization ar	nswered "Yes"	on For	n 990, F	Part IV, line 9	, or re	ported an am	ount on Form
	990, Part X, line 21.							
1a	Is the organization an agent, trustee, co	ustodian or othe	er interm	ediary fo	or contribution	s or c	ther assets not	
	included on Form 990, Part X?							☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part	XIII and comple	te the fo	llowing ta	able:			
							Am	nount
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount of					odial a	ccount liability?	Yes No
b	If "Yes," explain the arrangement in Part	XIII. Check here	if the ex	planatio	n has been pro	ovided	on Part XIII .	$\square$
Par								
•	Complete if the organization ar	nswered "Yes"	on For	m 990, F	Part IV, line 1			
		(a) Current year	(b) Prid	r year	(c) Two years ba	ack (d	d) Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
e	Other expenditures for facilities and			-				
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the	current year end	d balanc	e (line 1g	, column (a)) h	eld as	:	
а	Board designated or quasi-endowment	•	%					
b		%	-					
С	Temporarily restricted endowment ▶	- %						
	The percentages on lines 2a, 2b, and 2c	should equal 10	00%.					
3a	Are there endowment funds not in the p	ossession of the	e organi:	zation tha	at are held and	d adm	inistered for the	
	organization by:							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" on line 3a(ii), are the related orga	inizations listed	as requi	red on So	chedule R? .			3b
4	Describe in Part XIII the intended uses of	the organizatio	n's endo	wment fu	unds.			
Part								
	Complete if the organization ar	nswered "Yes"	on For	m 990, F	Part IV, line 1	1a. S	ee Form 990, I	Part X, line 10.
	Description of property	(a) Cost or oth		• •	or other basis		cumulated	(d) Book value
		(investme	ent)	(0	ther)	depi	reciation	
1a	Land							
b	Buildings			1	06,164.		16,219.	89,945.
C	Leasehold improvements							<u> </u>
d	Equipment							
е	Other							
Total	Add lines 1a through 1e (Column (d) mus	et equal Form 00	O Part	Column	(R) line 10c )		<b>—</b>	89,945.

Part VII	Complete if the organization answ	vered "Yes" on Fo	rm 990, Part IV, liı	ne 11b. See Form	990, Part X, line 12:
•	(a) Description of security or category (including name of security)		(b) Book value	(c) Met	hod of valuation -of-year market value
(1) Financial	derivatives				<del> </del>
	neld equity interests		,		
/A\					
(B)			•		
(C)			·		
(D)			,		
(E)					
(F) •					
(G)			·		•
(H)				Warrantee and Bullow I . How	AN ARTHUR SERVICE AND ARTHUR AND A SERVICE SER
	b) must equal Form 990, Part X, col. (B) line 12.)			是是"大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大	
Part VIII	Investments — Program Related Complete if the organization answ		rm 990 Part IV lii	ne 11c. See Form	990 Part X line 13
	(a) Description of investment	vered res on o	(b) Book value		thod of valuation
	(a) Description of investment		(b) Book value		-of-year market value
(1)	•	<u>-</u>			,
(2)					
(3)					
(4)					
(5)					
(6)	, , , , , , , , , , , , , , , , , , , ,				<u> </u>
(7)				· ·	
(8)					
(9)		···			
	b) must equal Form 990, Part X, col. (B) line 13.)		<u> </u>		
Part IX	Other Assets. Complete if the organization answ	vered "Vee" on Ee	m 000 Bort IV li	no 11d Coo Form	. 000 Part V lina 15
·	· · · · · · · · · · · · · · · · · · ·	Description	111 990, Fart IV, III	ne i iu. See Foili	(b) Book value
/4)	10	Dodonpalon			(0) 20011 14100
(1)	•			•	
(3)	•				
(4)					,
(5)			L		
(6)					
(7)				·	
(8)					
(9)					
	mn (b) must equal Form 990, Part X, co	l. (B) line 15.)	<u></u>	<b>.</b> ▶	
Part X	Other Liabilities.		000 5 + 11 / 11		5 000 D 1V
	Complete if the organization answ	vered "Yes" on Fo	rm 990, Part IV, III	ne ine or int. Se	e Form 990, Part X,
	line 25.	(h) Dealcoolea	na s maller culture to the Pro-	Mar Departed to high figurests reported that the state of	
(1) Federal II	(a) Description of liability	(b) Book value			
(2)	iconie taxes				
(3)					
(4)	•	<del></del>			The state of the state of
(5)					
(6)					
(7)				A PARTY OF THE	
(8)					
(9)				<b>FEBRUARY</b>	
	b) must equal Form 990, Part X, col. (B) line 25 ) ▶				
2. Liability fo	r uncertain tax positions. In Part XIII, provid	de the text of the footr	ote to the organization	on's financial stateme	ents that reports the

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

Part		-	Return.	
	Complete if the organization answered "Yes" on Form 990,		<u> </u>	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
a	Net unrealized gains (losses) on investments		-	
b	Donated services and use of facilities		<b>⊣,</b> 1	
C	Recoveries of prior year grants		4	
d	Other (Describe in Part XIII.)	-	<del>                                     </del>	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	· · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4-		
a	Investment expenses not included on Form 990, Part VIII, line 7b		4.	
b	Other (Describe in Part XIII.)		<u> </u>	
C	Add lines <b>4a</b> and <b>4b</b>		4c 5	
5 Dost	XII Reconciliation of Expenses per Audited Financial States			
rait	Complete if the organization answered "Yes" on Form 990,		er netarri.	
4		raitiv, iiie iza.	11	
1 2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		<del>                                     </del>	
	Donated services and use of facilities	2a		
a	Prior year adjustments		<b>⊣</b> .`}	
b	Other losses		┥	
d	Other (Describe in Part XIII.)		- ;	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		;	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	, ,	
b	Other (Describe in Part XIII.)	<del></del>	ન કુક	
c	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, III		5	
Part	XIII Supplemental Information.			
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar			line
2; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	t to provide any additional i	nformation.	
			•••••	
		••••••		
				<b></b>

Schedule D (For	m 990) 2017	Page 🖁
Part XIII	Supplemental Information (continued)	
•••••		
	,	
		•
	·	
	·	
	•	
	·	
	,	
	•	
	- 	
··		<b>-</b>
	,	
		_

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

#### **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.

OMB No 1545-0047

▶ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest instructions.

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization NORTH BRANCH AREA HOCKEY ASSOCIATION, INC. 41-1983605 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 e Solicitation of non-government grants ☐ Mail solicitations ☐ Internet and email solicitations f Solicitation of government grants b g 

Special fundraising events ☐ Phone solicitations d ☐ In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (or retained by) (iii) Did fundraiser have (i) Name and address of individual (iv) Gross receipts (or retained by) fundraiser listed in (ii) Activity custody or control of contributions? or entity (fundraiser) from activity organization col (i) Yes Nο 1 2 3 6 8 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

F	art II	than \$15,000 of fundraising gross receipts greater that		and gross income on	Form 990-EZ, lines 1 a	nd 6b. List events with
		g-c-c	(a) Event #1 HEGGIES PIZZA (event type)	(b) Event #2 NONE (event type)	(c) Other events  NONE (total number)	(d) Total events (add col (a) through col (c))
Revenue	1	Gross receipts	21,966.			21,966.
Œ	2 3	Less: Contributions Gross income (line 1 minus	10,201.		1	10,201.
	3	line 2)	11,765.			11,765.
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Öre	8	Entertainment				
	9	Other direct expenses .	11,765.			11,765.
	10 11	Direct expense summary. Ad Net income summary. Subtra	act line 10 from line 3, c	olumn (d)	• [	11,765. 0.
Pa	ırt III	Gaming. Complete if the than \$15,000 on Form 99		ed "Yes" on Form 99	90, Part IV, line 19, or i	reported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col (c))
<u>&amp;</u>	1	Gross revenue	84,436.	5,014,175.	36,510.	5,135,121.
ses	2	Cash prizes	64,743.	4,377,429.	24,420.	4,466,592.
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs		126,381.	917.	127,298.
	5_	Other direct expenses .	7,133. <b>Yes</b> %	532,106.	3,859.	543,098.
	6	Volunteer labor	⊠ No	⊠ No	⊠ No	•
	7	Direct expense summary. Ad	d lines 2 through 5 in co	olumn (d)		5,136,988.
	8	Net gaming income summary	y. Subtract line 7 from li	ne 1, column (d)		-1,867.
g	_	nter the state(s) in which the or	ganization conducts gai	ming activities: MN		
	a Is	the organization licensed to co			s?	

Schedu	le G (Form 990 or 990-EZ) 2017 Page <b>3</b>
11 12	Does the organization conduct gaming activities with nonmembers?
13 a b	Indicate the percentage of gaming activity conducted in:  The organization's facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ► LANDON C. SCOTT, PLLC
	Address► 8985 33RD STREET NORTH LAKE ELMO MN 55042
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b c	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$ If "Yes," enter name and address of the third party.
	Name ▶
	Address►
16	Gaming manager information:
	Name ► RYAN COLEMEN
	Gaming manager compensation ► \$ 26,015.
	Description of services provided ► MANAGEMENT OF INVENTORY, CASH, EMPLOYEES, REGULATIONS AND INTERAL CONTROLS
	□ Director/officer ☑ Employee □ Independent contractor
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ 352,611.
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
	,

REV 10/16/18 PRO

BAA

Schedule G (Form 990 or 990-EZ) 2017

## SCHEDULE L

**Transactions With Interested Persons** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2017

Department of the Treasury

internal f	Revenue Service		► Go t	o www.irs.gov/F	orm990	ofor instru	etions and t	he late	est information.			In	spec	tion	
Name o	f the organization			-		<u>-</u> .				yer ide	ntıficat	ion nu	mber		
NORT	H BRANCH A	REA HO	CKEY AS	SOCIATION,	INC	2.			41-	1983	3605				
Part		<b>Benefit 1</b> e if the o	ransaction	s (section 501 answered "Ye	l(c)(3), s" on	section Form 99	501(c)(4), a 0, Part IV, I	nd 50 ine 25	1(c)(29) organiz a or 25b, or Fo	ations	only) 0-EZ,	). Part '	V, line	40b.	
				(b) Relationship be	etween o	disqualified	person and	T	4.5					(d) Cor	rected?
1	(a) Name of disqu	alified pers	ion		organiz		<b>F</b> * · · · · · · · · · · · · · · · · · ·		(c) Descriptio	n of trai	nsactio	n		Yes	No
(1)								<b></b>							
(2)			·						<del>-</del>						
(3)			-												
(4)							-								
(5)															
(6)															
2									ied persons du			ar			
	under section	4958.										▶ \$	}		
3	Enter the amo	unt of ta	x, if any, on	line 2, above,	reimb	ursed by	the organi	izatio	n		!	▶ \$	S		
Part				ested Person		_									
				answered "Ye ount on Form :					38a or Form 99	90, Pa	irt IV,	line 2	6; or	t the	
	Urganizai	lion repu	TIEU all alli	Junt on Form	330, F	art ^, IIII	1	<u> </u>							
(a) Na	ame of interested pe		Relationship	(c) Purpose of		oan to or	(e) Origin		(f) Balance due	(g) In (	default?	(h) Ap		, ,,	rıtten
		wit	h organization	on loan from the p		principal an	amount				oard or	ard or   agreement			
					<u> </u>	-,					<del>,                                     </del>				
(4)		<u> </u>			То	From				Yes	No	Yes	No	Yes	No
(1)					<u> </u>					<del> </del>	-	┼		-	
(2)					-	-				1		├	<del></del>		
(3) (4)										╁	-	<del>                                     </del>	<del> </del>		
(5)	<del></del>				<del>                                     </del>					<del> </del>		<del>                                     </del>			
(6)					<u> </u>					†		<del>                                     </del>	<del> </del>	l	
(7)						<del></del>				1		<del>                                     </del>			
(8)								•			<u> </u>	<b></b>	<del> </del>		
(9)			-	-	ļ					1		<b>—</b>			
(10)										1					
Total								.▶	\$	<u>;</u>	, , .	,			·
Part				fiting Interest								•			
	Complete	e if the o	rganization	answered "Ye	s" on	Form 99	0, Part IV, I	ine 27	<b>7.</b>						
(a)	Name of interested	person		ship between inter		(c) Amount	of assistance	,	d) Type of assistance	e:e	(ө	) Purpo	se of a	ssistan	се
(1)			<u> </u>												
(2)							<del></del> -								
(3)			ļ ·									-			
(4)			<u> </u>												12121
(5)			· ·												
(6)		-		·		_									
(7)							, .					-			
(8)			<b></b>								1				

(9) (10)

) CRAIG MOLINE PRESIDENT 81,600. REPAYMENT OF LOAN PLUS INTEREST X	' (a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing organization revenues	
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  ART IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION						No
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  ART IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION		PRESIDENT	81,600.	REPAYMENT OF LOAN PLUS INTEREST		×
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  ART IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION	2)				_	
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  ART IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION	3)					
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  ART IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION	1)					
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  ART IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION	5)					
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  ART IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION	7)				<u> </u>	
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  ART IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION	) )				<del>                                     </del>	
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  RT IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION						
Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).  RT IV LINE 1: MEMBER (NOW OFFICER) LOANED ASSOCIATION \$60,000 IN 2012. ASSOCIATION						
	rt V Supplemental Information Provide additional information	on for responses to questions	on Schedule L (see	e instructions).		
ID BACK LOAN AMOUNT PLUS INTEREST OF \$21,600.	RT IV LINE 1: MEMBER(NOW	OFFICER) LOANED ASSO	OCIATION \$60,	000 IN 2012. ASSOCIATI	ON	
	ID BACK LOAN AMOUNT PLUS	INTEREST OF \$21,600				
	•••••					
			•••••			
					<b>-</b>	
			•••••			
· · · · · · · · · · · · · · · · · · ·			•••••			
······································						
·						
		······································				
		······		······································		

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

#### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NORTH BRANCH AREA HOCKEY ASSOCIATION, INC.

Employer identification number
41-1983605

Pt VI, Line 6: THE ORGANIZATION IS MADE UP OF MEMBERS.
Pt VI, Line 7a: ALL MEMBERS OF THE GOVERNING BODY ARE ELECTED BY THE GENERAL
MEMBERSHIP.
Pt VI, Line 7b: ALL SIGNIFICANT OR UNUSUAL TRANSACTIONS ARE SUBJECT TO APPROVAL
BY THE GENERAL MEMBERSHIP.
Pt VI, Line 11b: THE ORGANIZATION'S FORM 990 IS PREPARED BY AN OUTSIDE AGENCY
AND IS SUBJECT TO REVIEW AND APPROVAL BY THE GOVERNING BODY.
Pt XII, Line 1: THE ORGANIZATION USES A STATE MANDATED HYBRID FORM OF ACCOUNTING
FOR ITS GAMBLING OPERATIONS. ALL FINANCIAL INFORMATION FOR THE ORGANIZATION'S
GAMBLING ACTIVITIES ARE COMPILED AND AUDITED BY PUBLIC ACCOUNTANTS. THE ORGANIZATION'S
GENERAL FUND USES THE CASH BASIS. FINANCIAL INFORMATION FOR THE GENERAL FUND
IS ASSEMBLED BY A PUBLIC ACCOUNTANT.
Pt IX, Line 24e:
Description: STORAGE
Total: \$840
Program services: \$840
Management and general: \$0
Fundraising: \$0
Description: WEB SITE
Total: \$2,580
Program services: \$2,580
Management and general: \$0
Fundraising: \$0
Description: ATTORNEY GENERAL
Total: \$75

Schedule O (FOITH 990 of 990-E2) (2017)	i age =
Name of the organization	Employer identification number
NORTH BRANCH AREA HOCKEY ASSOCIATION, INC.	41-1983605
Program services: \$75	
Management and general: \$0	
Fundraising: \$0	
Description: CASH SHORTAGE REIMBURSEMENT	
Total: \$2,051	
	•••••
Program services: \$2,051	
Management and general: \$0	·····
Fundraising: \$0	
•	
<b>'</b> .	
	••••••