Form **990**

Return of Organization Exempt From Income Tax

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

0MB No. 1545-0047 2017

partment of the Treasury email Revenue Service

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

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

Open to Public

	nal Reveni	ue Service	▶ Go to	www.irs.gov/l	orm990 for instruct				1004	Inspection
A	For the	2017 cale	ndar year, or tax yea	beginning	10-01	, 2017, a	nd ending	<u> </u>	09-30	, 20 18
В	Check if	applicable:	C Name of organization	BOONEVILLE	MAIN STREET AS	SOCIATION	Ī		D Employer	identification number
	Address	change	Doing business as						27-13	15060
_	Name ch	ange	Number and street (or	PO box if mail is	not delivered to street a	ddress)	Room/suit	e	E Telephone	number
. .	initial reti	•	100 W CHUR	CH STREE	T			ļ	662-7	28-4130
$\overline{\Box}$		ľ			and ZIP or foreign posta	l code				
										eipts \$ 60,132
\exists		•	F Name and address of					H(a) In this p. a.		bordinates? Yes No
ш	Applicati		PO BOX 250			a	-1			ncluded? Yes No
			501(c)(3)							st. (see instructions)
<u> </u>		npt status	A 501(c)(3)	└ 501(c) () ◀ (insert no) ☐ 4	947(a)(1) or				•
<u></u> -	Website		V			17. 4			exemption n	
			Corporation Trust	Association	☐ Other ►	LYez	ar or formation	on. 2009	IM State o	f legal domicile MS
۲	art I	Summ		 						
	1		scribe the organiza							
Š		PROV1	<u>DE MAIN STR</u>	<u>EET SERV</u>	ICES AND P	ROMOTE	CITY	OF. BO	ONEATT	LE MS
nai										
Vē										
Activities & Governance	2		ıs box ▶□ ıf the or	_	•		-	f more thar	1 25 % of it	s net assets.
රේ	3	Number of	of voting members	of the governir	ng body (Part VI, lin	ie 1a)			3	10
Ęį	4	Number of	of independent voti	ng members o	f the governing boo	dy (Part VI,	, line 1b)		4	10
⋛	5	Total nun	nber of individuals	employed in ca	alendar year 2017 (Part V, line	e 2a) .		5	1
AC	6	Total nun	nber of volunteers (estimate if nec	essary)				6	7
	7a	Total unre	elated business rev	enue from Par	t VIII, column (C), li	ne 12 .			7a	
	, p	Net unrel	ated business taxa	ble income fro	m Form 990-T, line	34			7b	
	1							Pnor Yo	ear	Current Year
•	8 Contributions and grants (Part VIII, line 1h)								8,732	60,132
Ę	9 Program service revenue (Part VIII, line 2g)									
Revenue	10	_	ent income (Part VIII							
ď	11		venue (Part VIII, colu	•						
	12		enue-add lines 8 th					6	8,732	60,132
	13		nd similar amounts						<u> </u>	007102
	14			•		-				
	1		Benefits paid to or for members (Part IX, column (A), line 4)							11,184
Expenses	16a									11,104
ĕ	. b		draising expenses							
Š	17	Other ov	nancas (Dart IV aci	umn (A) lines	110 114 115 240		=	1	4,545	36,258
	1	Total ove	penses (rartin, coi	2 -17 (must ea	ual Part IV column	(A) Anno 35	-, ⊦	- 4	6 023	
	18	Povenue	penses (Fart IX, col penses. Add lines 1: less expenses. Sul	otroct line 19 f	com line 12	WHIT	Eir	°	6,033 2,699	47,442
		nevenue	less expenses. Sui	otract line 16 li	<u> </u>	1	71: 1:17L	Seginning of Ci		12,690 End of Year
Net Assets or	200	Total ar-	oto (Dont V Inno 10)		[8]	1 111-				
SSe	20		sets (Part X, line 16)		· · · · · / / / / / / / / / / / / / / /	· WAR 0	7 2019	 18:1- -	4,655	16,965
e e	21		oilities (Part X, line 2	•		· · · ·	919		380	16 065
			ts or fund balances	. Subtract line	21 from line 20	JANE	NT .	18	4,275	16,965
-	art II		ture Block			- ADE	$\mathbb{W}_{\mathcal{L}}(f)$	F'-		
U	nder pena	alties of perju	iry, I declare that I have of lete. Declaration of preparation	examined this retui	m, including accompany	ring schedule	s and state	nents, and to	the best of m	y knowledge and belief, it is
		1	- Constantion of preparation	are fourer man on		THE HOLL OF WITH		nas any know		
o:										
	gn	1: —	pature of officer		_			Da	ate	
H	ere			PRESIDENT		<u> </u>				
		1	e or print name and title							
P	aid	1 -	pe preparer's name	Pr	parer's/signature	/	ба	te	Check	
	repare									
	se On		name ►JONES	AND JONE	S CPA OF B	ON PA		Firm		4-0685009
_		Firm's a	address ►201 W	MARKET S	T//PO BOX//2	50			one no (66	
_			BOONEV	ILLE MS	38829 V					
M	ay the I	RS discus	s this return with th			structions)		. ,		· · X Yes 🗌 No
_			ection Act Notice co						<u>_</u>	- 000

Form 99	90 (2017) _x .	Page 2
Part	' Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	. 🗆
1	Briefly describe the organization's mission: PROVIDE MAIN STREET SERVICES AND PROMOTE CITY OF BOONEVILLE MS	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	X No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as mea expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 47.442 including grants of \$) (Revenue \$ 60.132 PROVIDE MAIN STREET SERVICES AND PROMOTE CITY OF BOONEVILLE	_)
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	_)
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	· · · · · · · · · · · · · · · · · · ·	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$	

19

orm 99	0 (2017)	21,		eage 3
Part	V Checklist of Required Schedules	<u> </u>		
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
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		X
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		532.54
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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		X
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		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	1			
	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		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	\ <u>``</u>	 	 ^

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 18

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Part	'Checklist of Required Schedules (continued)		Yes	No
20 -	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	200	res	├ —
zu a b		20a 20b		X
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	21		X
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	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			^
20	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		X
24a		24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С		24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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		X
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	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
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>	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		X
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	+	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
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	3,	1-	X

19? Note. All Form 990 filers are required to complete Schedule O.

38

Form **990** (2017)

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>		
			التعتبة	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ndors and			#
С	reportable gaming (gambling) winnings to prize winners?	1	1c		3865.4
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	<u> </u>			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	1			i kan
b	If at least one is reported on line 2a, did the organization file all required federal employment tax ref	turns? .	2b	X	- Granding
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	287	24:	22	201
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	NATION AND DESCRIPTION OF THE PERSON	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedul	le O 🧯	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	er authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other	er financial	1		
	account)?		4a		X
b	If "Yes," enter the name of the foreign country: ▶		翿		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	il Accounts 🎼			
	(FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	_	5b		X
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
Va	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contri	· ·	- Ca		^
_	gifts were not tax deductible?		6b		l
7	Organizations that may receive deductible contributions under section 170(c).		10 A	PG.	To an
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	/ for goods 📳			
	and services provided to the payor?	`· · · [7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? $$.		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for whether the contract of the contra				
	required to file Form 8282?		7c	Since In	X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
e 4	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		7e	 	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit coll the organization received a contribution of qualified intellectual property, did the organization file Form 8899 and the organization file Form 8899 are contribution of qualified intellectual property, did the organization file Form 8899 and the organization file Form 8899 are contributions.	<u> </u>	7f	 	X
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a For	· · -	7g 7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain			3457	
	sponsoring organization have excess business holdings at any time during the year?		8		X
9	Sponsoring organizations maintaining donor advised funds.			温学	
а	Did the sponsoring organization make any taxable distributions under section 4966?	126	9a	diam	X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	Section 501(c)(7) organizations. Enter:		38		100
а	Initiation fees and capital contributions included on Part VIII, line 12	<u> </u>			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		5		
11	Section 501(c)(12) organizations. Enter:	1			200
a	Gross income from members or shareholders				
р	and the second s		数		美国教
12a	against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Foi	10412		22.2	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	. —	12a	Karati	X
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>			
a	Is the organization licensed to issue qualified health plans in more than one state?		13a	* 138 5 15°	X
	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			强烈	
	the organization is licensed to issue qualified health plans	22			LEE.
С	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Scheol	dule O	14b		Y

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response or note to any line in this Part VI			
Section	on A. Governing Body and Management	· · ·	• •	X
000	The Action is a second		Yes	No
1a	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 if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 10 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	l	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		X
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6 7a	X	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b	X	X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14 15	Did the organization have a written document retention and destruction policy?	14		X
a b	The organization's CEO, Executive Director, or top management official	15a 15b		X X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b 	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	att po tra	
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed MISSISSIPPI Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	terest	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re			
Ca	rson I Gamble 100 WEST CHURCH STREET BOONEVILLE MS 38829 662-73	20_1	130	١

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Page	7
raye	•

	<u> </u>		
Part VII	· Compensation of Officers, Directors	Trustees, Key Employees, Highest	Compensated Employees, and
	Independent Contractors		

Check if Schedule O contains a response or note to any line in this Part VII

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 employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor	any related	d orga	anız	_		ompe	nsa	ted any curren	t officer, director	, or trustee.
				Pos	C) thon					
(A)	(B)			eck	more	than o		(D) Reportable	(E)	(F)
Name and Title	Average hours per	Average box, unless person is both an officer and a director/trustee)							Reportable compensation from	Estimated amount of
	week (list any		_					compensation from	related	other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CHRISTINA LAWLESS	2									
VICE PRESIDENT		X		X			<u>.</u>			
(2) CHRISTY SCHELL	1							}		
DIRECTOR		X						İ		
(3) TONY SMITH	1									
DIRECTOR		X								
(4) MARK MCANALLY	1									
SECRETARY		X						L		
(5) DUSTIN CHILDERS	1									
DIRECTOR		X								
(6) RANDY TOLAR	1				-					
DIRECTOR	_	X								
(7) TATE HILL										
PRESIDENT		X	}	X		1	İ	}		
(8) CARSON LEXIE GAMBLE										
TOURISM DIRECTOR		X			X	1				
(9) SERGIO WARREN										
DIRECTOR		X		ļ	ļ	l	ļ		ļ	
(10) MATTHEW CAIN	1			Γ						
DIRECTOR		X	i]	
(11)							Ì			
(12)		-					\vdash			
(13)				-			-	 		<u> </u>
(14)			\vdash		-	-	\vdash	-		

	• (A) Name and title	(B) Average hours per week (list any hours for related	box, office	Position do not check more than or ox, unless person is both fficer and a director/truste Individual to the control of the control ox to the control of the control of the control ox to the control of			an	(D) Reportable compensation from the organization	(E) Reportable compensation froi related organizations (W-2/1099-MISC	n from	other compensation C) from the		
		organizations below dotted line)		Institutional trustee	=	Key employee	Highest compensated employee	Br	(W-2/1099-MISC)		-	and	nization related nizations
(15)													
(16)													
(17)													
(18)			-										
(19)													
(20)								<u></u>					
(21)			-										
(22)			<u> </u>						 	<u> </u>			
(23)					_				 				
(24)						-		-					
			<u> </u>					_			-	···	-
(25)			1				<u></u>	<u> </u>					
1b c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	•					 	► ►			-		
2	Total number of individuals (including bu reportable compensation from the organ	t not limited						e) w	vho received m	ore than \$1	00,00	0 of	
3	Did the organization list any former or employee on line 1a? If "Yes," complete	fficer, direc						emp	oloyee, or high	nest compe	nsate	d	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re	porta	ble	con	npe	nsatio					e 🙀	X
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc			<u> </u>
Section 1	on B. Independent Contractors Complete this table for your five highest	200000000	tod in	don		lant			one that we said		¢10	0.000	
	compensation from the organization. Re year.	port compe	ensatio	on fo	or t	he c	alend	dar	year ending wi	th or within	the or	ganizatı	on's tax
	(A) Name and business add	dress							(B) Description of s	ervices		(C) Compens	
								-					
								F					
2	Total number of independent contractor received more than \$100,000 of compensations.							o ti	hose listed ab	ove) who	19894 - War Art	All and an a	

Part	VIII -	Statement of Reve Check if Schedule O		nonse or note to	any line in this	Part VIII		
		One of the state o			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ons, Gifts, Grents Similar Amounts	1a b c	Federated campaigns Mombership dues . Fundraising events .	1b	8,710	Aller Joseph Committee Com			
Contributions, Gi and Other Simila	d e f	Related organizations Government grants (com All other contributions, gi and similar amounts not incl	tributions) 1e	51,422				
Contri anc O	g h	Noncash contributions include Total. Add lines 1a-11		-	60,132			organisma participation in a folialism Materialisma proposition in a folialisma proposition in a folialisma proposition in a folialisma proposition Materialisma proposition in a folialisma proposition in a folialisma proposition in a folialisma proposition in
Reverue (2a b			Business Code			The Annual Continues and Samuel	
Program Service Reverue	c d				-			
Progran	f g	All other program sen Total. Add lines 2a-2 Investment income	f	ands interest				
	4	and other similar amo	ounts)					
	5 6a	Royalties	(i) Real	(ii) Personal				
	c d	Less: rental expenses Rental income or (loss) Net rental income or						
	7a b	Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities	(ii) Other				
	c	and sales expenses Gain or (loss) Net gain or (loss) .		>				
venue	8a	events (not including \$	_					
Other Revenue	Ь	of contributions reported See Part IV, line 18 . Less: direct expenses	···a	·				
0	С	Net income or (loss) to Gross income from gross e Part IV, line 19	from fundraising aming activities.	events . ▶				
	1	Less: direct expenses Net income or (loss) t Gross sales of ir returns and allowance	from gaming act	tivities >				
	c b	Less: cost of goods s Net income or (loss) t	sold					
	11a b	WISCEIIANEOUS F	- Neveriue	DUSINGSS CODE				
	d e 12	All other revenue . Total. Add lines 11a-			60 130	2		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX										
	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	, (D) 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							
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 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	- 9,981	9, 981							
9	Other employee benefits									
10	Payroll taxes	1,203	1,203							
11	Fees for services (non-employees):			•	1					
а	Management									
b	Legal	100		100						
C	Accounting	100		100						
d	Lobbying ,		4-9000-43-450-202-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5	English and No. And State Williams						
e	Professional fundraising services. See Part IV, line 17				<u> </u>					
· g	Investment management fees	• • •	•							
12	Advertising and promotion	6,313	6,313							
13	Office expenses	501		501						
14	Information technology	80		80						
15	Royalties		,							
16	Occupancy									
17	Travel	,								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings .	1,588		1,588						
20	Interest ·									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	. 134		134						
23	Insurance	May with the first that the self-blowed they	And realization and realizatio	(2015	Parister To Upper outroons #125 flore meaning					
24	Other expenses Itemize expenses not covered									
•	above (List miscellancous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column			para (1922), produktoji se se krajog Projektovi se se se se se se se se se se se se se						
	(A) amount, list line 24e expenses on Schedule O.)									
2	MAIN STREET SERVICES	21,940	21 040							
a b	TELEPHONE AND UTILITY	1,795			 ` 					
C	BANK CHARGES	. 1, 793		1,795						
d	Licenses, Dues, & Subscrip			2,902						
e	All other expenses OTHER MISC EXPE		 	807						
25	Total functional expenses. Add lines 1 through 24e	47,442	39,437							
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if	11,442		8,003						
	following SOP 98-2 (ASC 958-720)			1	İ					

_ ._ ,

Part X Balance Sheet

		Check if Schedule O contains a response or	note to an	y line in this P	art X		🗆
		•			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			4,319	1	16,763
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	<u></u>
	4	Accounts receivable, net				4	
- }	5	Loans and other receivables from current and f	ormer offic	ers, directors,	Annier Joseph (m. 1. 200)		
		trustees, key employees, and highest co	mpensated	employees.			
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified pers	ons (as define	ed under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), an					
l		sponsoring organizations of section 501(c)(9) volun					
ts		organizations (see instructions). Complete Part II of Sche	dule L			6	
Assets	7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use				8	
	9	· · · · · · · · · · · · · · · · · · ·				9	ALABA ALABA TATAN DA TATAN
	10a	Land, buildings, and equipment: cost or		7 50			
}		other basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	1,298	336	10c	202
	11	Investments—publicly traded securities		11			
	12	Investments—other securities. See Part IV, line 1				13	· · · · · · · · · · · · · · · · · · ·
	13 14	Investments—program-related. See Part IV, line Intangible assets				14	
	15	Other assets. See Part IV, line 11		15	 		
	16	Total assets. Add lines 1 through 15 (must equa			4,655		16,965
	17	Accounts payable and accrued expenses			380		10/303
	18	Grants payable		18			
l	19	Deferred revenue				19	
ļ	20	Tax-exempt bond liabilities				20	-
	21	Escrow or custodial account liability. Complete I				21	
တ္ထ	22	Loans and other payables to current and for	ormer office	ers, directors,			
III		trustees, key employees, highest compen		W S			
Liabilities		disqualified persons. Complete Part II of Schedu				22	
=	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	•			24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lines of Schedule D	-	-			
	00				300	25	
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958			380	26	
S		complete lines 27 through 29, and lines 33 and					
nc I	27	Unrestricted net assets			4,275	27	16,965
ala	28	Temporarily restricted net assets			1,2,	28	10, 503
P	29	Permanently restricted net assets				29	
֖֚֚֚֚֚֚֡֡֟֝֟֟֟֝֟֝֟֟ ֚		Organizations that do not follow SFAS 117 (ASC 9					
J.C		complete lines 30 through 34.		_			
ţ	30	Capital stock or trust principal, or current funds			A CONTRACT OF THE PERSON OF THE PROPERTY OF THE PERSON OF	30	A STATE OF THE STA
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed				31	
ţ	32	Retained earnings, endowment, accumulated in				32	
Š	33	Total net assets or fund balances			4,275	33	16,965
	34	Total liabilities and net assets/fund balances .	<u> </u>	<u> </u>	4,655	34	16,965

Page	12

Part	XI Reconciliation of Net Assets			·
	Check if Schedule O contains a response or note to any line in this Part XI			🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1		0,132
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	7,442
3	Revenue less expenses. Subtract line 2 from line 1	3	1	2,690
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,275
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	1	6,965
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> D</u>
			,	res No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	cplain in		
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of			
	of the audit, review, or compilation of its financial statements and selection of an independent acco		2c	X
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	xplain in		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	222	
	the Single Audit Act and OMB Circular A-133?	• •	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo the		1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such	audits.	3b	X
			Form	990 (2017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name	of the organization						Employer identification	number
	NEVILLE MAI						27-1315060	
Par				organizations must				ns.
The c	•	•		s: (For lines 1 through	-	-	•	1
1				on of churches descri				Y
2				Attach Schedule E (F			•	7
3 4				anization described in Injunction with a hosp				iii) Enter the
į	hospital's name	e, city, and state):			 _		
5	section 170(b)	(1)(A)(iv). (Comp	olete Part II.)	college or university		-		al unit described in
6 7	X An organization	that normally		mental unit described tantıal part of its sup _l e Part II.)				the general public
8	☐ A community tr	ust described in	section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	or university or university:	a non-land-grad	nt college of agri	I in section 170(b)(1)(iculture (see instruction	ns). Ente	r the nam	ne, city, and state of	the college or
10	receipts from a support from g	ctivities related ross investment	to its exempt fur income and unr	e than 33½% of its sunctions—subject to corelated business taxal 75. See section 509(ertain exc ole incom	eptions, le (less se	and (2) no more thar ection 511 tax) from	n 331/3% of its
11	☐ An organization	n organized and	operated exclus	sively to test for public	safety.	See sect i	on 509(a)(4).	
12				ively for the benefit o				
				ns described in secti scribes the type of sup				
а	the support	ed organization	(s) the power to	i, supervised, or contr regularly appoint or e ete Part IV, Sections	lect a ma	jority of t		
b	control or n	nanagement of	the supporting o	ed or controlled in co rganization vested in V, Sections A and C	the same			
c				ting organization oper				ally integrated with,
d	that is not f	unctionally integ	grated. The orga	pporting organization nization generally mu omplete Part IV, Sec	st satisfy	a distribu	ition requirement an	
е				a written determination				e II, Type III
f	Enter the numbe							
g	Provide the follo	wing information	n about the supp	orted organization(s).			· · · · · · · · · · · · · · · · · · ·	
	(i) Name of supported	organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in yo	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)					i 			
(B)								
(C)								
(D)								
(E)								
Tota	ıl		_ = - = = = = 		3 550	1 -		

	(Complete only if you checked the		•				lify under
D = 41.	Part III. If the organization fails to	quality unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support	(=) 0010	(h) 0044	(-) 001E	(4) 0016	(e) 2017	(f) Total
Jaieno 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(i) Total
•	membership fees received. (Do not include any "unusual grants.")	69,704	64,905	67,168	68,732	60,132	330,641
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	69,704	64,905	67,168	68,732	60,132	330,641
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						330,641
	on B. Total Support	1					
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	69,704	64,905	67,168	68,732	60,132	330,641
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	Total support. Add lines 7 through 10				建设进步 管		330,641
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for t						
Casti	organization, check this box and stop he on C. Computation of Public Suppo			· · ` · · · ·	· · · · · ·	· · · · ·	· · •
<u> </u>	Public support percentage for 2017 (line			1 column (fl)		14	100.00%
15	Public support percentage from 2016 Sc		-				100.00%
16a	331/3% support test—2017. If the organ						
	box and stop here. The organization qua						
b	331/3% support test—2016. If the organithis box and stop here. The organization						ore, check
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization m Part VI how the organization meets the organization	2017. If the organized states the "facts "facts-and-circ	anization did n -and-circumst umstances" te	not check a bo ances" test, chest. The organi	x on line 13, 1 neck this box a zation qualifie	6a, or 16b, and	d line 14 is Explain in supported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiz Explain in Part VI how the organization supported organization	ation meets th meets the "fac	e "facts-and-d ts-and-circum	circumstances stances" test.	" test, check The organizat	this box and sion qualifies as	stop here. a publicly
18	Private foundation. If the organization dinstructions	lid not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

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

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

	(Complete only if you checked the lf, the organization fails to qualify						nder Part II.
Section	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(9)			
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			_•			
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge			/			
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .				,		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8	Add lines 7a and 7b						Q and to the
	on B. Total Support		/				
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013 /	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6		 			L	<u> </u>
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			•			
C	Add lines 10a and 10b /						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						,
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				-		
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he				n, or fifth tax y		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2017 (line	8, column (f) d	ivided by line	13, column (f))		15	%
16	Public support percentage from 2016 Sci	hedule A, Part	III, line 15	<u> </u>	<u> </u>	16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2017 (%
18	Investment income percentage from 2010						%
19a	331/3% support tests—2017. If the organ						
	17/s not more than 331/3%, check this box						
b	331/3% support tests - 2016. If the organiz	zation did not d	check a box on	line 14 or line	19a, and line 1	6 is more than	33 ¹ /3%, and
	line 18 is not more than 331/3%, check this					• • •	
20	Private foundation. If the organization d	id not check a	box on line 14	l, 19a, or 19b,	check this box	and see instr	uctions 🕨 🗌

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.)

Section A	 A		. 🔷		-
SOATION A	 Sunn	OMIN	7 () 17/7	コロリマコモ	IANC
Jeculon F	 CUPD	VI 111113	4 0191	41 11 2 4 L	10113

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	1	Yes	No
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Part	N Supporting Organizations (continued)			
		Street and the street	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?			
b	A family member of a person described in (a) above?	11a 11b		XX
	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		Ŷ
	on B. Type I Supporting Organizations	بلتيني		
		,	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	Yes	No Williams
Secti	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the pnor tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instruc	tion	ŝ).
a b c	 ☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity. 			
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	5438		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
þ	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	Si k	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations				
1 Check here if the organization satisfied the Integral Part Test as a qualifying	tru	st on Nov. 20, 1970 (explain	in Part VI). See			
instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3.	4					
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or						
collection of gross income or for management, conservation, or						
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7					
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	1					
instructions for short tax year or assets held for part of year):	A.					
a Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other						
factors (explain in detail in Part VI):	3.					
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d.	3					
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,		,				
see instructions).	4	<u> </u>	·			
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035.	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount	_		Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1.	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3.	4	为中心是"创起"。				
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		连续数据的				
emergency temporary reduction (see instructions).	6		<u> </u>			
7 Check here if the current year is the organization's first as a non-functional instructions).	ly in	tegrated Type III supporting	organization (see			

Part	V 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			
2	Amounts paid to perform activity that directly furthers exe	rted		
٠	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	<u> </u>		
_5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	sponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		(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		HISTORY HOLDER	
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			more miles and an experience
а				THE PARTY OF THE ST
b	From 2013		and the construction of the construction of	
С	From 2014			
d	From 2015			
е	From 2016		はいる。	ははは、一般には、一般には、
1	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)	and the street of the street o	and the state of t	
_ <u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	The second second and the second seco		
4	Distributions for 2017 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years		renior (paremented accessor	
b	Applied to 2017 distributable amount			SPT Washing Towns of the Washington of the State of the
<u>c</u>	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 Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
U	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j	and natification of the state provided as a significant		
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			
b	Excess from 2014	家庭独洲群群		
c	Excess from 2015			The second of the second
<u>d</u>	Excess from 2016	STATES TO SEE STATES OF THE SECOND	李严重是第一次	
е	Excess from 2017	阿里罗斯斯斯		

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Part VI ·	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

BOON	EVILLE MAIN STREET ASSOCIATION		27-1315060
Part			
	Complete if the organization answered '	"Yes" on Form 990, Part IV, line 6	•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets h	neld in donor advised
	funds are the organization's property, subject to th	•	
6	Did the organization inform all grantees, donors, a		
•	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		
Part			
. aru	Complete if the organization answered	"Ves" on Form 990 Part IV line 7	
			·
1	Purpose(s) of conservation easements held by the	· · · · · · · · · · · · · · · · · · ·	of a historically important land area
	Preservation of land for public use (e.g., recrea		of a certified historic structure
	Protection of natural habitat		of a certified historic structure
	Preservation of open space	- -	an in the form of a panconistion
2	Complete lines 2a through 2d if the organization he	eid a qualified conservation contributi	Held at the End of the Tax Year
	easement on the last day of the tax year.		
а			· ·
þ	Total acreage restricted by conservation easemen		
C	Number of conservation easements on a certified		
d	Number of conservation easements included in		1 i
_	3		2d
3	Number of conservation easements modified, tran	sterred, released, extinguished, or ter	minated by the organization during the
	tax year ▶		
4	Number of states where property subject to conse		 ,
5	Does the organization have a written policy re		·
	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting	ng, handling of violations, and enforcing	g conservation easements during the year
_	\$		
8	Does each conservation easement reported on line		
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		1e3 140
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text	_	inancial statements that describes the
	organization's accounting for conservation easem		
Part			
	Complete if the organization answered		
1a	If the organization elected, as permitted under SF	FAS 116 (ASC 958), not to report in it	ts revenue statement and balance sheet
	works of art, historical treasures, or other simila	r assets held for public exhibition, e	education, or research in furtherance of
	public service, provide, in Part XIII, the text of the		
þ	If the organization elected, as permitted under S	SFAS 116 (ASC 958), to report in its	s revenue statement and balance sheet
	works of art, historical treasures, or other simila	r assets held for public exhibition, e	education, or research in furtherance of
	public service, provide the following amounts related	•	
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art	t, historical treasures, or other simila	ar assets for financial gain, provide the
	following amounts required to be reported under S	SFAS 116 (ASC 958) relating to these	items:
а	Revenue included on Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·
b	Assets included in Form 990, Part X	<u> </u>	> \$
			

Part	Organizations Maintaining	Collection <u>s</u> of Art, Hi	storical Treasures,	or Other Similar Ass	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and other rec	ords, check any of the	e following that are a sign	gnificant use of its
а	☐ Public exhibition	d	Loan or exchang	e programs	
b	☐ Scholarly research	е	Other		
С	☐ Preservation for future generations		 -		
4	Provide a description of the organizate XIII.	on's collections and exp	plain how they further	the organization's exem	ipt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather				
Part	IV Escrow and Custodial Arra	ngements.			
	Complete if the organization 990, Part X, line 21.				
	Is the organization an agent, trustee, included on Form 990, Part X?				
b	If "Yes," explain the arrangement in Pa	art XIII and complete the	following table:	Ar	nount
C	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 amour			stodial account liability	? 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa				
Par		_			
	Complete if the organization	answered "Yes" on Fo	orm 990, Part IV, line	e 10.	
			Prior year (c) Two year		(e) Four years back
1a	Beginning of year balance				
b	Contributions				
С	Net investment earnings, gains, and losses				
d	Grants or scholarships				
е	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				
2	Provide the estimated percentage of the	he current year end bala	nce (line 1g, column (a)) held as:	<u> </u>
а	Board designated or quasi-endowmer	=	, , , , ,	,,	
b	Permanent endowment ▶				
С	Temporarily restricted endowment ▶	 %		1	
	The percentages on lines 2a, 2b, and	2c should equal 100%.			
3a	Are there endowment funds not in the		nization that are held	and administered for th	e
	organization by:				Yes No
	(i) unrelated organizations				3a(i)
	(ii) related organizations				3a(ii)
b	If "Yes" on line 3a(iı), are the related or	rganizations listed as req	uired on Schedule R?		3b
4	Describe in Part XIII the intended uses	of the organization's en	dowment funds.		
Par					
	Complete if the organization		orm 990, Part IV, line	e 11a. See Form 990,	Part X, line 10.
	Description of property	(a) Cost or other basis (investment)		(c) Accumulated depreciation	(d) Book value
1a	Land	.			
b	Buildings				
C	Leasehold improvements				
d	Equipment		1,500	1,298	202
е	Other		1 2,000	1,230	
Total	Add lines 1a through 1e. (Column (d) n	nust equal Form 990. Par	t X. column (B), line 10	Oc.)	202

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Part VII	Investments — Other Securities. Complete if the organization answ	vorod "Vos" on Fo	rm 000 Port IV lir	ne 11h Son Form	o 000 Part Y line 12
	(a) Description of security or category	eled les off Fol	(b) Book value		thod of valuation.
	(including name of security)	·	(b) Book value		d-of-year market value
(1) Financial				•	
	neld equity interests				<u> </u>
(3) Other				<u> </u>	
(A)	<u> </u>			<u> </u>	·
(B)				 	
(C) -				ļ	
(D)				 -	
(E) (F)			 	 	
(G) 1		`	· · · · · · · · · · · · · · · · · · ·		
(H)				4	•
	b) must equal Form 990, Part X, col. (B) line 12.) ▶		 		
Part VIII	Investments—Program Related		L		
·	Complete if the organization answ		rm 990 Part IV. lir	ne 11c. See Form	n 990. Part X. line 13.
	(a) Description of investment	0.00 100 0.110	(b) Book value		ethod of valuation: T
			- (-,		d-of-year market value
(1) -				†,	, , , , , , , , , , , , , , , , , , ,
(2)	v.		· · · · · ·		•
(3)					,
(4)			,		
(5)					
(6)	•				
(7)					
(8)	•				<u> </u>
(9)			<u> </u>		
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶	· · · · · · · · · · · · · · · · · · ·			
Part IX	Other Assets.				
	Complete if the organization ansv		rm 990, Part IV, III	ne_11dSee_Eorn	
		Description		· ·	(b) Book value
(1)	·				
(2)				- 	 '
(3)					
(4)	······································				
(5) (6)		<u> </u>			
(7)			t,		
(8)					
(9)					
	ımn (b) must equal Form 990, Part X, co	ol. (B) line 15)			,
Part X	Other Liabilities.				
	Complete if the organization answ	vered "Yes" on Fo	rm 990, Part IV, li	ne 11e or 11f. Se	e Form 990, Part X,
	line 25.				•
1.	(a) Description of liability	(b) Book value			
(1) Federal I	ncome taxes		Wind Transfer of Table 1977 And The Control of Table 1977 And Tabl	engonic karrolle prance d'uce se l'uc Les distributions de l'acceptant	
(2)					
(3)	. +				
(4)					and the state of t
(5)	•			ORDER DOUBLE OF THE SERVICE OF THE S	
(5) (6)					
(5) (6) (7)			Animale for a first control of the c		
(5) (6) (7) (8)					
(5) (6) (7) (8) (9)					
(5) (6) (7) (8) (9) Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25) ▶ or uncertain tax positions. In Part XIII, provi				

Page	4

Part	ΧI¤	Resonciliation of Revenue per Audited Financial Stateme			Retur	n.
		Complete if the organization answered "Yes" on Form 990, F				
1		revenue, gains, and other support per audited financial statements			1	
2 -	•	nts included on line 1 but not on Form 990, Part VIII, line 12:				
а		nrealized gains (losses) on investments	2a			
b		ed services and use of facilities	2b			
C		veries of prior year grants	2c			
d		(Describe in Part XIII.)	2d			
е		nes 2a through 2d			2e	
3		act line 2e from line 1	· · ·		3	
4		nts included on Form 990, Part VIII, line 12, but not on line 1:			1	
а		ment expenses not included on Form 990, Part VIII, line 7b	4a			
b		(Describe in Part XIII.)			\$ ****	
C		nes 4a and 4b			4c	
5		revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part	XII	Reconciliation of Expenses per Audited Financial Statem		•	er Ket	urn.
		Complete if the organization answered "Yes" on Form 990, I		/, line 12a.		
1		expenses and losses per audited financial statements	•		1	
2		nts included on line 1 but not on Form 990, Part IX, line 25:	ا ما			
a		ted services and use of facilities	2a			
b		year adjustments	2b			
C		losses				
d		(Describe in Part XIII.)				
e		nes 2a through 2d			2e	
3		act line 2e from line 1	· ·		3	
4		ints included on Form 990, Part IX, line 25, but not on line 1:				
a		tment expenses not included on Form 990, Part VIII, line 7b			-	
b		(Describe in Part XIII.)				
C		nes 4a and 4b			4c	
5	XIII	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.	10.)	· · · · · · · · · · · · · · · · · · ·]]	
		descriptions required for Part II. lines 3, 5, and 9; Part III, lines 1a and	d 4. D	art IV lines 1b and 2l	h: Bart	V line 4: Part V line
		es 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
•	·		•	•		
				·		
						
	_					
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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.

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Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization 27-1315060 BOONEVILLE MAIN STREET ASSOCIATION PART VI LINE 11A -- THE ASSOCIATION MAINTAINS A COPY OF FORM 990-IN THE OFFICE AND IT IS AVAILABLE TO MEMBERS TO REVIEW UPON REQUEST. THE DIRECTORS REVIEW THE FORM 990 PRIOR TO MAILING TO THE INTERNAL REVENUE SERVICE. PART VI LINE 19 -- THE ASSOCIATION CONDUCTS OPEN BOARD MEETINGS. ALL THE ASSOCIATIONS' MEETING MINUTES AND ANNUAL FINANCIAL STATEMENTS ARE MAINTAINED IN THE OFFICE AND ARE AVAILABLE TO THE PUBLIC UPON REQUEST. THE ASSOCIATION HAS NO CONFLICT OF INTEREST POLICY. PART VI LINE 6 -- YEARLY MEMBERSHIP FEES AND BOARD OF DIRECTORS TO VOTE ON THE IMPROVEMENTS TO IMPROVE THE CITY. PART IX LINE 24 E OTHER EXPENSES CONSIST OF RENT ON STORAGE UNIT, SUPPLIES. & OUTSIDE SERVICES PART IX LINE 24 A -- MAIN STREET SERVICES (FOOD COSTS, ENTERTAINMENT FOR COST OF PRIZES, ETC...) EACH EVENT, ACTIVITY COST,