Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

2018

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

			ar year, or tax year beginning January 1 , 2016, and ending		ember	
В	heck If ap	plicable:	C Name of organization	D Emple	oyer ide	ntification number
╝	Address ch	nange	2	0-1767865		
	Name char	nge	hone nu	mber		
_	nitlai retun	50	3-313-5118			
=	Anal return	p Exen	notion			
=	Amended : Application		Portland ON 97223	•	ber 🕨	•
-		ing Method:	المراج البراي والمراج والم			the organization is not
	Vebsite:	_	And cash Chocket Chocket)			ch Schedule B
			eck only one) — 501(c)(3) □ 501(c) () (insert no.) □ 4947(a)(1) or □ 527			-EZ, or 990-PF).
				11 01111 01		LL, 01 000 1 1).
		organization:	☐ Corporation ☐ Trust ☐ Association ☐ Other 7b to fine 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	Langata	· · · · · · · ·	
				4 4550(5		
ــــــــــــــــــــــــــــــــــــــ			· · · · · · · · · · · · · · · · · · ·		\$	56,406
<u> </u>	art		e, Expenses, and Changes in Net Assets or Fund Balances (see the			
			the organization used Schedule O to respond to any question in this Part I	• • •		
	1		ons, gifts, grants, and similar amounts received		1	56,406
	2		ervice revenue including government fees and contracts		2	0
	3	Membersh	ip dues and assessments		3	<u> </u>
	4	investment	t income		4	0
	5a	Gross amo	ount from sale of assets other than inventory 5a	0		
	b	Less: cost	or other basis and sales expenses	0	`I	
	C	Gain or (los	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	0
	6	Gaming an		`		
	a	Gross inc	ome from gaming (attach Schedule G if greater than			
9	1	\$15,000) .		o		
Revenue	ь	Gross inco				
ě	1		aising events reported on line 1) (attach Schedule G if the			
_	l		ch gross income and contributions exceeds \$15,000) 6b	o		
	C	Less: direc	et expenses from gaming and fundraising events 6c	0		
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and su	btract	k	
	}	line 6c)			6d	0
	7a	Gross sale	s of inventory, less returns and allowances	0		
	b		of goods sold	0		
	C		it or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	0
	8		nue (describe in Schedule O)		8	
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	56,406
	10		delimiter emounts poid (list in Schodule O)		10:	63,219
	11		aid to or for members	/ED	11/	03,219
ιħ	12	•		<u>~</u>	12	0
ä			101.		03	
Expenses	13		al fees and other payments to independent contractors MAY. 2.0 .	2019	94	0
Š	14		y, rent, utilities, and maintenance	APPA TO		0
ш	15		ublications, postage, and shipping		75	0
	16		enses (describe in Schedule O)	7	16	745
	17	Total expe	enses. Add lines 10 through 16	. ▶	17	63,964
B	18		(deficit) for the year (Subtract line 17 from line 9)		18	-7,558
9	19		s or fund balances at beginning of year (from line 27, column (A)) (must agre	e with		
As	ļ	-	ar figure reported on prior year's return)	• •	19	11,942
Net Assets	20		nges in net assets or fund balances (explain in Schedule O)		20	0
	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	<u>.</u> ▶	21	4,384
For	Papan	work Reduct	tion Act Notice, see the separate instructions. Cat. No. 10642			Form 990-EZ (2018)

Page	2

Par	Balance Sheets (see the instructions to Check if the organization used Schedule	•	ny augetion in this F	Part II		П
	Orieck is the organization used occiledule	O to respond to ai		(A) Beginning of year	<u> </u>	B) End of year
22	Cash, savings, and investments			11,942	22	4,384
23	Land and buildings				23	0
24	Other assets (describe in Schedule O)		[0	24	0
25	Total assets		[11,942	25	4,384
26	· · · · · · · · · · · · · · · · · · ·		ļ		26	0
27	Net assets or fund balances (line 27 of column			11,942	27	4,384
Par	Statement of Program Service Accom	•		•		Expenses
Mhot	Check if the organization used Schedule					ired for section
	is the organization's primary exempt purpose?)(3) and 501(c)(4)
	ribe the organization's program service accompli- easured by expenses. In a clear and concise m				other	izations; optional for s.)
	ons benefited, and other relevant information for ea		services provided	, the number of		•
28	Built 12 classrooms, bathrooms & kitchens in partnership wi		Ninos de Zihuatanejo A	ıC,		
	Zihuatanejo government, 200+ local businesses, local and					
	opportunities for low-income children.					
	(Grants \$ 45,000) If this amount			<u> ▶ 🔽</u>	28a	45,000
29	Provided 30,000+ school meals to disadvantaged students	in partnership with local	hotels and local and nat	ional	1	
	food companies.				}	
	(Grants \$ 11.394) If this amount	includes foreign gra	nte check here	▶ 🏻	29a	11,394
30	Provided academic & English language scholarships to high				ZJG	11,394
	school supplies, and transportation	3, 101		***************************************	1	{
					1	
	(Grants \$ 6,826) If this amount	includes foreign gra	nts, check here .	▶ ☑	30a	6,826
31	Other program services (describe in Schedule O)			_		
20	(Grants \$) If this amount Total program service expenses (add lines 28a	includes foreign gra	nts, check here .	<u></u> ▶Ų	31a	0
Par						63,220
	Check if the organization used Schedule				i ioti do	
		(b) Average	(c) Reportable	(d) Health benefits,	1	
	(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC)	contributions to employ benefit plans, and		Estimated amount of ther compensation
		devoted to position	(if not paid, enter -0-)	deferred compensatio	n	· · · · · · · · · · · · · · · · · · ·
	ence A. Marbut	_				
	, Director	10			9_	0
	Cole Hart etary, Director	- 2	{	ļ	0	o
	Romain		<u> </u>		4-	
	surer, Director	15	Ì)	o	0
]	<u> </u>	<u> </u>		
]				
						
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	/F-1/20004-07-1-07-1-07-1-07-1-07-1-07-1-07-1-	.	<u> </u>		1.	
]			
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			 _	 		
		-			+	

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ı aı (instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		-
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
35a	change on Schedule O. See instructions	34		✓
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		Y
C	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	35c 36		Y
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions > 37a	30 22	646°	FEREN
b	Did the organization file Form 1120-POL for this year?	37b	\$2532	1213
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were		264	Park State
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			統談
39	Section 501(c)(7) organizations. Enter:		1	要交
a b	Initiation fees and capital contributions included on line 9	感		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			2
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
. c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
đ	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	1		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed ▶ Oregon			
42a		755-12	9-540	<u> </u>
h	Located at Lote 60B. Calle Barra de Potosi, GRO, Mexico ZIP + 4 >	498	335	N1-
D	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	42b	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country	42c	25130	
· 43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ □
	,		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		Ser.
c	Did the organization receive any payments for indoor tanning services during the year?	44c		
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b		
	-		\	-

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- 490	

		e organization engage, directly or ir ndidates for public office? If "Yes," o				of or in opp	oosition 	46		
Part \	VI	Section 501(c)(3) Organization: All section 501(c)(3) organization 50 and 51.	s Only			l complet	e the ta	bles fo	r line	es
		Check if the organization used Sci	hedule O to respond	l to any question i	n this Part	VI				
				 				7	Yes	No
47	Did th	ne organization engage in lobbying	activities or have a	section 501(h) elec	tion in effe	ect during	the tax			
	year?	If "Yes," complete Schedule C, Par	t11					47		/
48	Is the	organization a school as described in	n section 170(b)(1)(A)(i	i)? If "Yes," comple	te Schedul	θE		48		1
49a	Did the organization make any transfers to an exempt non-charitable related organization?									1
b		s," was the related organization a se	•					49b		Z
50		plete this table for the organization's byees) who each received more than								
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contribu	ealth benefits tions to emplo lans, and defe mpensation	yee (e)	Estimated ther comp		
None										
							_			
					_			·		
					1	·				
				Ì						
	Total	number of other employees paid ov								
51	Comp	olete this table for the organization 000 of compensation from the orga	's five highest comp	ensated independe	ent contrac	tors who	each re	ceived i	more	than
	(a)	Name and business address of each independ	ient contractor	(b) Type of	service		(c) Cor	npensatio	n	
	 -	, 44 a A moderno a supplica de la vesta de la composition della co		1						
				 						
					·- · · · · · · · · · · · · · · · · · ·					
	Total	number of other independent control	actors each receiving	over \$100,000	. Þ		0		 .	
52		he organization complete Schedu	_		•	s must a				
		eleted Schedule A		• • • • • •	-			✓ Yes		No
		of perjury, I declare that I have examined this d complete. Declaration of preparer (other tha					my knowl	edge and I	belief,	nt is
	T	1 Samera Man bru	Av			5 _1u	. \(\alpha\)			
Sign		Signature of officer	4			Date	- 101	·		······································
Here		Lawrence A Marbut, CEO & Director Type or print name and title								
Paid		Print/Type preparer's name	Preparer's signature		Date	Cho	k 🗌 if	PTIN		
Prepa	arer		<u> </u>				employed			
Use (Firm's name ▶				Firm's EIN I				
		Firm's address ▶				Phone no.				
MACH TH	ים ונוכי	discuss this roturn with the propers	renallin analia? Saa	inem iatione			-	7 V	17	NI

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.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

		s Incorporated						67865			
Par	_	Reason for Public Char		·				ons.			
The d	orga	nization is not a private founda	tion because it i	s: (For lines 1 through	12, ched	k only or	ne box.)				
1		A church, convention of church	nes, or associati	on of churches descri	ibed in se	ection 17	O(b)(1)(A)(ī).	Λ 7			
2	P. ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)										
3											
4		A medical research organization						(iii). Enter the			
•	ويسويا	hospital's name, city, and state		,				(,			
5		An organization operated for t		college or university	owned o	r onerate	d by a government	tal unit described in			
•	سا	section 170(b)(1)(A)(iv). (Comp		college of university	OWIIGG C	Operati	d by a government	tar unit described in			
c			•		l ! 	4700.1	WWW.A				
6		A federal, state, or local govern						. Ab			
7	1	An organization that normally			роп поп	ı a gover	nmental unit or fron	n the general public			
_	_	described in section 170(b)(1)									
8	_	A community trust described in			-						
9	Ш	An agricultural research organi	zation described	d in section 170(b)(1)	(A)(ix) op	erated in	conjunction with a	land-grant college			
		or university or a non-land-gra	nt college of agr	iculture (see instructio	ons). Ente	er the nan	ne, city, and state of	f the college or			
		university:									
10		An organization that normally r	eceives: (1) mon	e than 331/3% of its si	upport fro	m contri	butions, membershi	p fees, and gross			
		receipts from activities related support from gross investment	to its exempt ful	nctions—subject to c	ertain exc	ceptions,	and (2) no more tha	n 331/3% of its			
		acquired by the organization a	Rer June 30, 197	75. See section 509 (a	112). (Coi	nplete Pa	art III.)	Dusillasses			
11		An organization organized and									
12	_	An organization organized and	=	•	_			my out the numoses			
		of one or more publicly suppo									
		Check the box in lines 12a thro									
а		☐ Type I. A supporting organ	=	•		-	=	· · · · · · · · · · · · · · · · · · ·			
q		the supported organization									
		supporting organization. Ye					ile dilectors or trust	ees of the			
		_ '' '	•	•							
b		Type II. A supporting organ									
		control or management of t				persons	that control or man	age the supported			
		organization(s). You must	•								
C		☐ Type III functionally integ						ally integrated with,			
		its supported organization(- •	•		-	• •				
d		☐ Type III non-functionally i									
		that is not functionally integ						nd an attentiveness			
		requirement (see instruction	ns). You must c	omplete Part IV, Sec	tions A	and D, ar	nd Part V.				
е		Check this box if the organ	ization received	a written determination	on from t	ne IRS th	at it is a Type I, Type	e II, Type III			
		functionally integrated, or T						• ••			
f	E	nter the number of supported o	organizations .					0			
g	Ρ	rovide the following informatior	about the supp	orted organization(s).				<u> </u>			
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization	(lv) Is the c	rgenization	(v) Amount of monetary	(vi) Amount of			
	•			(described on lines 1-10		ır governing	support (see	other support (see			
				above (see instructions))	docui	nent?	instructions)	instructions)			
					Yes	No					
(A)											
				" 							
(B)											
					 						
(C)		(
					 						
(D)		İ			l						
						<u> </u>		<u> </u>			
E)											

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32,535.	70,974.	54,740.	48,725.	56,406.	263,380.
2	Tax revenues levied for the	32,303.	70,374.	34,740.	40,125.	30,400.	200,000.
-	organization's benefit and either paid						
	to or expended on its behalf	ام	0	o	0	o	0
3	The value of services or facilities						
-	furnished by a governmental unit to the]	
	organization without charge	o	0	o	o	o	0
4	Total. Add lines 1 through 3	32,535.	70,974.	54,740.	48,725.	56,406.	263,380.
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	3					
	shown on line 11, column (f)						25,000.
6	Public support. Subtract line 5 from line 4						238,380.
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	32,535.	70,974.	54,740.	48,725.	56,406.	263,380.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	0	0	0	0	0	0
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10						263,380.
12	Gross receipts from related activities, etc					12	0
13	First five years. If the Form 990 is for the	-			-		
	organization, check this box and stop he			· · · · ·	<u></u>		· · > 🗅
	on C. Computation of Public Suppor					· · · · · · · · · · · · · · · · · · ·	
14	Public support percentage for 2018 (line 6			1, column (t))		14	90 %
15 160	Public support percentage from 2017 Sch 331/3% support test—2018. If the organi				 .d line 14 is 23	15	89 %
100	box and stop here. The organization qua	lifies as a nubli	icly supported	omanization	IG IIII 14 15 50	on more,	
Ь	331/2% support test—2017. If the organi	zation did not	check a box o	n line 13 or 16	a and line 15	ie 331 <i>e</i> % or m	ore check
	this box and stop here. The organization						
172	10%-facts-and-circumstances test —20	•		•			G-A
174	10% or more, and if the organization meets the "organization	eets the "facts facts-and-circ	-and-circumsta umstances" te	ances" test, chest. The organiz	eck this box a zation qualifies	and stop here. as a publicly	Explain in supported
ь	10%-facts-and-circumstances test—20						_
-	15 is 10% or more, and if the organization in Part VI how the organization is supported organization	ition meets the neets the "fact	e "facts-and-d ts-and-circums	circumstances' stances" test.	' test, check t The organizati	this box and son qualifies as	a publicly
18	Private foundation. If the organization di						
10	instructions						

Schedu	le A (Form 990 or 990-EZ) 2018						/ Page 3
Part						/	
	(Complete only if you checked the						nder Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	omplete Part	II.) <u>/</u>	
	on A. Public Support				, -	/_	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) _/ 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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					1	
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5]	<u> </u>	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons		<u> </u>				
b	Amounts included on lines 2 and 3				}		}
	received from other than disqualified						
	persons that exceed the greater of \$5,000			/	1	1	
	or 1% of the amount on line 13 for the year			/	<u> </u>		
C	Add lines 7a and 7b			İ	İ	<u> </u>	
8	Public support. (Subtract line 7c from		/				
	line 6.)		7 7 7 7		1		į
	on B. Total Support						,
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6		/				
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.)	1					
14	First five years. If the Form 990 is for the organization, check this box and stop he				-		
Santi	on C. Computation of Public Suppor			<u> </u>	· · · ·	<u> </u>	· · · · · ·
				12 (6)		45	
15 16	Public support percentage for 2018 (line 8 Public support percentage from 2017 Sch					15	<u>%</u> %
				· · · · · ·	· · · · ·	10	90
	on D. Computation of Investment Inc			nu line 40 and	(A)	147	0.
17 10	Investment income percentage for 2018 (iirie TUC, COIUN 7 Cabadula ^ 1	uri (i), divided l	y iinė 13, colu	mm (1))	17	<u>%</u>
18	Investment income percentage from 2017 331/2% support tests—2018. If the organ	r ochequie A, i ization did net	chock the be-			10	
19a	17 is not more than 33½%, check this box	and ston here	The organization	con mie 14, 2 on qualifies es	na iine 10 is ii a publiciv euro	orted organizat	
ь	331/3% support tests-2017. If the organiz	ation did not c	heck a box on	line 14 or line	19a, and line 16	is more than	331/3%, and
	line 18 is not more than 331/3%, check this I	oox and stop h	ere. The organi	zation qualifies	s as a publicly s	upported organ	nization 🕨 🔲

Part IV Suppor

Supporting Organizations

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

Section A.	All S	Supporti	ng Orgai	nizations

- 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 IBS determination of status.
- 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," arswer (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 (as 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).
- B 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.)

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	;	}	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		نّســـ
ь	A family member of a person described in (a) above?	11b	-	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations	11.0	<u></u>	<u> </u>
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	۳,	٠,,	١. ,
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	٠,	,	
	-tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised; or	7	3 cm	ئے <u>ش</u> ر
	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.	<u></u>		
	organizations and what conditions of restrictions, if any, applied to such powers during the tax year.	1		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported	1	,	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			E 14
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	<u></u>		أحدا
<u> </u>	supervised, or controlled the supporting organization.	2	<u> </u>	<u> </u>
Section	on C. Type II Supporting Organizations		120	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	34 ;	'	'e, \
	or management of the supporting organization was vested in the same persons that controlled or managed	, `		
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations		L	i
	on birair 1750 in dapporting diguinations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	Ţ.		-
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		ľ	100
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		١.	29
	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	j i	. 4"	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			<u> </u>
	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			İ
	significant voice in the organization's investment policies and in directing the use of the organization's	ŀ.,		
	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.	-1-	استما	ļ
Cooki		3	L	L
Secure 1	on 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 i		-4:	-1
' a	The organization satisfied the Activities Test. Complete line 2 below.	nstru	Cuon	S).
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions)
2	Activities Test. Answer (a) and (b) below.		Yes	
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	,		1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1		-1
	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	0	. 5	, 2
	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	1	,, ,	٠.
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	'		7
	reasons for the organization's position that its supported organization(s) would have engaged in these		~	<u> </u>
_	activities but for the organization's involvement.	2b	ļ	
3	Parent of Supported Organizations. Answer (a) and (b) below.	. 4	,	. 1
а	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	, 1,	
Ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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

Part	Type III Non-Functionally Integrated 509(a)(3	Supporting Organi	zations (continueu)	
Section D—Distributions				Current Year
1				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3				
4	Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets			
5				
	Other distributions (describe in Part VI). See instructions.			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	<u> </u>		
	Line o amount divided by line o amount		(ii)	(iii)
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.	:		
3	Excess distributions carryover, if any, to 2018			
a	From 2013	-	·	
Ь	From 2014			
C	From 2015			
d	From 2016			
ө	From 2017			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			1
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
<u>a</u>	Applied to underdistributions of prior years]
b	Applied to 2018 distributable amount			
<u>C</u>	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Page	8

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.)

