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

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

▶ Go to www.irs.gov/Form990FZ for instructions and the latest information.

Open to Public Inspection

			CO10 Colored				20
	_			ar year, or tax year beginning , 2018, and ending	7		, 20
		Check if a		C Name of organization	D Emp	•	lentification number
	뜬	Address	-	Mississippi Baptist Seminary and Bible College			64-0566269
	≓ ĭ	Name cha	-	Number and street (or P O box, if mail is not delivered to street address) Room/suite	E Tele	phone n	umber
	≈9 ⊨	Initial return Final return/terminated P O Box 764					
(>> =	Amended		City or town, state or province, country, and ZIP or foreign postal code	F Gro	up Exe	mption
ŀ	╮Ё	ξ.	n pending	Canton, MS 39046	Nur	nber I	> 🛐
2	\vec{G}	Accoun	ting Method	✓ Cash	Check	▶ ∑	if the organization is not
	انس	Website	: ▶				ach Schedule B
444	A A	Tax-exer	npt status (che	eck only one) — ☑ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	(Form 9	90, 99	0-EZ, or 990-PF).
<u>8</u>	2 K		organization				
Œ	A L			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if tot	al assets		
S	<u>₹</u> (P			5500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	
ENVELOPE	3	Part I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	e instru	ctions	s for Part I) 🔯
-				the organization used Schedule O to respond to any question in this Part			· —
		2 1		ons, gifts, grants, and similar amounts received		<u> </u>	69,453 00
(\mathcal{P})		2 2		ervice revenue including government fees and contracts		2	07,433 00
///			•	ip dues and assessments		3	<u> </u>
M	り	2 4	Investment	•		4	
N.	→ 6	-					
		5a		/ 664		-	
		b		or other basis and sales expenses			
		C		ss) from sale of assets other than inventory (Subtract line 5b) from line 5a)		5c	
		6	Gaming an	d fundraising events.			
	a	, a	Gross inc	ome from gaming (attach Schedule a if greater than			
တ	Ē	<u> </u>	\$15,000) .	CENED ENTRY 6a		200G	ived In Corres
2 1 2019	Revenue	Ь	Gross inco	me from fundraising events (not included by School 1964) of contribution	ns	TIR.	S-OSC 03
2	ă	<u> </u>	moni lunai	aising events reported on line i) tattacht achteadle a il the			
~				th gross income and contributions exceeds \$15,000) 6b		<u></u>	CT 28 2019
	. 1.	C		t expenses from gaming and fundraising events 6c		: (6)	
0	Q	o d		e or (loss) from gaming and fundraising events (add lines $6\overline{a}$ and $6\overline{b}$ and \overline{s}	ubtract		
2	3	2	line 6c) .			6d(ogden, Utah
	9	- 7a	Gross sale	s of inventory, less returns and allowances			-
9911NON	N	· b	Less: cost	of goods sold			
5	15) c	Gross prof	it or (loss) from sales of inventory (Subtract line 7b from line 7a) .	1.1	7 <u>c</u>	
25		8	Other reve	nue (describe in Schedule O)	-13T	8	
	SC-	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	194	9	69,453 00
53	<u>≽</u>	10	Grants and	I similar amounts paid (list in Schedule O)	XI.	10	
	ANNED	11	Benefits pa	aid to or for members	1	11	
	m	3 12	-	ther compensation, and employee benefits 🔯	Z.,	12	33,407 00
		13		al fees and other payments to independent contractors 🖬	′	13	
	ة	14		y, rent, utilities, and maintenance		14	20,002 00
	JAN	15		ublications, postage, and shipping		15	13,601 00
	_	16	U .,	enses (describe in Schedule O) 🔃		16	2,443 00
	0 2	17		enses. Add lines 10 through 16		17	69,453 00
	ري دي			(deficit) for the year (Subtract line 17 from line 9)		18	-0-
	2020	19		or fund balances at beginning of year (from line 27, column (A)) (must agree			_
_	Ğ	} Î		r figure reported on prior year's return)		19	-4080 00
9		20	-	ages in net assets or fund balances (explain in Schedule O)		20	4000 00
لے	, ž	21		or fund balances at end of year. Combine lines 18 through 20		21	-4080.00
خ	<u>/</u> =						Form 990-EZ (2018)
_	્ર ⊤0	n raper	work neauct	ion Act Notice, see the separate instructions. Cat No 10642I			1 OHH 990-LE (2018)

?;

2	Pa	Balance Sheets (see the		<u>-</u>			1		· · · <u>,</u>
		Check if the organization L	ised Schedule	O to respond to ar	ny question in this				
		Cook and an order			-	(A) Beginning of year	<u> </u>	(B) End	d of year
	22	Cash, savings, and investments					22		0-
	23 24	Land and buildings) -		23 /	•	· \ -0-
	25	Total assets	•		F		25	<u> </u>	-0- X v
	26	Total liabilities (describe in Sche			-		26	₩	-0-
	27	Net assets or fund balances (lin	•		-		27	\forall	-4080 00
?	Par					Part III)	~)		-4000 00
يو		Check if the organization u		•		*	i	Ехр	enses
	What	t is the organization's primary exem		<u></u>	<u>,, , , , , , , , , , , , , , , , , , ,</u>				or section
		cribe the organization's program se	•	shments for each o	f its three largest r	rogram services			d 501(c)(4)
	as m	neasured by expenses. In a clear a	and concise m	nanner, describe the	services provided	d. the number of	other		,
	perso	ons benefited, and other relevant inf	ormation for ea	ach program title.		,			
?	28								
								}	
		-					ļ	}	
	7	(Grants \$	If this amount	includes foreign gra	nts, check here .	▶ 🗆	28a		
	29					***************************************		1	
								ļ	
		(Grants \$					29a	├ ─-	
	30)	
		/O					20-		
	24	(Grants \$) Other program services (describe in	if this amount	includes foreign gra	ints, check here .	<u> </u>	30a		
	31			includes foreign gra			31a	1	
	32	Total program service expenses					32	├	
	Par							tions	for Part IV)
		Check if the organization L		- ·		·			
				(b) Average	(c) Reportable 😰	(d) Health benefits,	\top		
		(a) Name and title		hours per week	compensation (Forms W-2/1099-MISC	contributions to employ benefit plans, and			ited amount of impensation
				devoted to position	(if not paid, enter -0-)	deferred compensation	n		
	1 Is	iac jackson		President					
	44	41 Smith Carr Road, Canton, MS 3904		President		<u>-</u>			<u> </u>
	2 S	L Blake		Vice-President			1		
	12	20 Oakwood Drive, Grenada, MS 38901		Vice-i resident	-0	- <u> </u>			
		tis Davis		Registrar			1		
		15 Wesley Lane, Madison, MS			-0	-			
		achel Stiff		Administrative Asst		_1			
		13 Alma Lane, Jackson, MS 39209		 	\$13,604 0	<u> </u>	+		
		hirley Sanders 88 Watkins Drive, Canton, MS		Secretary			1		
		erry Montgomery			-0	<u>-</u>			
		O Box 501, Grenada, MS		Trustee	-0	<u> </u>			
		C Mitchell				<u>-</u>	+		
		21 Highway16W, Canton, MS 39046		Trustee	-0	<u>, </u>			
		arnest Ford, Sr.			<u> </u>				
		9 Newell Road, Natchez, MS 39120		Trustee	-0	<u>,_</u>]			
				· · · · · · · · · · · · · · · · · · ·		† — — — — — — — — — — — — — — — — — — —	\top		
				1					
							\top		
						1			
				i	9	i .	1		



Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			Г
	instructions for fact v.) offects in the organization used schedule of to respond to any question in this	<u>s rart</u>	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 change on Schedule O. See instructions	34		~
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	\vdash	~
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		~
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a	$oxed{oxed}$	~
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	4		
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9	-		
ь	Gross receipts, included on line 9, for public use of club facilities	4		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
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		~
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	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 ▶			
42a	The organization's books are in care of ▶ Telephone no. ▶			
	Located at ► ZIP + 4 ►			
b	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)?	42b	Yes	No Y
	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country	42c	<u></u>	~
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. •	▶ □
			Yes	No
14a	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		~
С	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-FZ. See instructions	45h		
	COUNTRACTOR ARE UNUUGUOUS	1450		•

	_			
- 1	22	α	0	-

46		ne organization engage, directly or in						Yes	NO A	
Part		ndidates for public office? If "Yes," c Section 501(c)(3) Organizations		Part I		· · · · ·	. 46			
		All section 501(c)(3) organization 50 and 51.		stions 47-49b and	d 52, and (complete th	e tables f	or lin	es	
		Check if the organization used Sch	nedule O to respond	to any question in	this Part \	<u>/I</u>	<u></u>		<u>. </u>	
47		he organization engage in lobbying If "Yes," complete Schedule C, Part		section 501(h) elect			l l	Yes	No	
48		organization a school as described in			. 48	<u> </u>	V			
49a	Did ti	ne organization make any transfers to		. 49a		~				
b		"Yes," was the related organization a section 527 organization?								
50		oyees) who each received more than								
		Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	(d) Hea contribution benefit plan	alth benefits, ons to employee ns, and deferred pensation	(e) Estimate	ed amo	unt of	
-	Total	number of other employees paid over	er \$100.000				<u> </u>			
51	Com	plete this table for the organization, 000 of compensation from the organization.	s five highest compe	ensated independer	nt contracto	ors who eacl	n received	more	than	
	-	Name and business address of each independ		(b) Type of se	ervice	(c) Compensat	ion		
				-						
					-				<u>-</u>	
d		number of other independent contra	_		. ▶	.1				
52 		the organization complete Schedu pleted Schedule A		ection 501(c)(3) orç 		must attac	h a . ⊳ 	<u> </u>	No	
Under p	enalties	of perjury, I declare that I have examined this is decomplete. Declaration of preparer (other than	return, including accompan n officer) is based on all info	ying schedules and state ormation of which prepare	ments, and to er has any kno	the best of my k wledge	nowledge and	d belief,	, it is	
		Isiac VacKson	·	· ·		5-14-19				
Sign		Signature of officer				Date				
Here	2	Isiac Jackson, President Type or print name and title				5/14/19				
 Paid		Print/Type preparer's name	Preparer's signature		Date	Check	ıf PTIN	_		
Prep	arer					self-emple	oyed			
Use		Firm's name ►		Firm's EIN ▶				<u>_</u>		
May tl	he IRS	Firm's address ▶ discuss this return with the preparel	r shown above? See	instructions		Phone no	► □ Yes		No No	

(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.

OMB No 1545-0047 2018

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

ıssippi	Baptist Seminary and Bible C	ollege				64-05	66269
rt I	Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instruction	ns.
ne organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1							
			college or university	owned o	r operate	ed by a government	al unit described in
☐ Ar	n organization that normally	receives a subs	tantial part of its sup				n the general public
\square A	community trust described in	n section 170(b)	(1)(A)(vi). (Complete l	Part II.)			
or ur	university or a non-land-graniversity:	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or
re su ac	ceipts from activities related upport from gross investment cquired by the organization a	to its exempt fuil t income and uni fter June 30, 197	nctions—subject to c related business taxal 75. See section 509(a	ertain exc ble incom a)(2). (Cor	ceptions, le (less se nplete Pa	and (2) no more that ection 511 tax) from art III.)	n 33¹/₃% of its
	•	•	-	-			
of	one or more publicly suppo	rted organizatio	ns described in secti	ion 509(a)(1) or se	ection 509(a)(2). Se	e section 509(a)(3) .
	the supported organization	(s) the power to	regularly appoint or e	lect a ma	jority of t		
• 🗆	control or management of	the supporting o	rganization vested in	the same			
: 🗆							ally integrated with,
· 🗆	that is not functionally integ	grated. The orga	nization generally mu	st satisfy	a distribi	ition requirement an	
• 🗆							e II, Type III
		-					
		about the supp	(iii) Type of organization (s). (described on lines 1-10 above (see instructions))	(iv) Is the d	ir governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
		·					_
	organii organi	Reason for Public Chair organization is not a private founda	organization is not a private foundation because it in A church, convention of churches, or associating A school described in section 170(b)(1)(A)(ii). A hospital or a cooperative hospital service organization operated in organization operated in organization operated in organization operated for the benefit of a section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or govern An organization that normally receives a subsidescribed in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b) An agricultural research organization described or university or a non-land-grant college of agruniversity: An organization that normally receives: (1) mor receipts from activities related to its exempt fusupport from gross investment income and university: An organization organization after June 30, 19: An organization organized and operated exclusion one or more publicly supported organization Check the box in lines 12a through 12d that described in the supporting organization operated the supported organization. You must complete the supported organization. You must complete Type II. A supporting organization operated the supported organization. You must complete Type III functionally integrated. A supporting organization its supported organization(s) (see instruction Type III non-functionally integrated. The organization organization received functionally integrated, or Type III non-functionally integrated. The organization organization organization received functionally integrated, or Type III non-functionally integrated. Provide the following information about the supported organizations. Provide the following information about the supported organization abou	Reason for Public Charity Status (All organizations must organization is not a private foundation because it is: (For lines 1 through A church, convention of churches, or association of churches descr A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (F A hospital or a cooperative hospital service organization described in A medical research organization operated in conjunction with a hosp hospital's name, city, and state: An organization operated for the benefit of a college or university section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in An organization that normally receives a substantial part of its sup described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete III.) A community trust described in section 170(b)(1)(A)(vi). (Complete III.) An arginultural research organization described in section 170(b)(1) or university or a non-land-grant college of agriculture (see instruction university: An organization that normally receives: (1) more than 33½% of its single receipts from activities related to its exempt functions—subject to a support from gross investment income and unrelated business taxal acquired by the organization after June 30, 1975. See section 509(a) An organization organized and operated exclusively to test for public of one or more publicly supported organizations described in section Check the box in lines 12a through 12d that describes the type of supporting organization organization operated, supervised, or control the supporting organization. You must complete Part IV, Sections A and Complete III. A supporting organization supervised or controlled in control or management of the supporting organization operated its supporting organization. You must complete Part IV, Sections A and Complete III. In on-functionally integrated. A supporting organization operated its supported organization (see instructions). You must complete Part IV, S	Reason for Public Charity Status (All organizations must comples organization is not a private foundation because it is: (For lines 1 through 12, check A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 A hospital or a cooperative hospital service organization described in section A medical research organization operated in conjunction with a hospital described hospital's name, city, and state: An organization operated for the benefit of a college or university owned or section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) op or university or a non-land-grant college of agriculture (see instructions). Enter university: An organization that normally receives: (1) more than 331/3% of its support from acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An agricultural research organization described in section support from acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See the organization organized and operated exclusively for the benefit of, to perfice of one or more publicly supported organizations described in section 509(a) (2). (Complete Part III.) Type II. A supporting organization operated, supervised, or controlled by the supporting organization operated exclusively for the benefit of to perfice of one or more publicly supported organization operated, supervised, or controlled by it the supporting organization operated in connection control or management of the supporting organization vested in the same organization(s). You must complete Part IV, Sections A and B. Type III func	Reason for Public Charity Status (All organizations must complete this p organization is not a private foundation because it is: (For lines 1 through 12, check only or A church, convention of churches, or association of churches described in section 17 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-E: A hospital or a cooperative hospital service organization described in section 170(b)(1) A medical research organization operated in conjunction with a hospital described in shospital's name, city, and state: An organization operated for the benefit of a college or university owned or operate section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b) An organization that normally receives a substantial part of its support from a gover described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in or university or a non-land-grant college of agriculture (see instructions). Enter the nan university: An organization that normally receives: (1) more than 337-% of its support from contril receipts from activities related to its exempt functions – subject to certain exceptions, support from gross investment income and unrelated business taxable income (less sacquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the fit of one or more publicly supported organizations described in section 509(a)(1) or scheck the box in lines 12a through 12d that describes the type of supporting organization. Tou must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled by its supporting organization. You must complete Part IV, Sections A and B. Type III non-functionally integrated. A supportin	Reason for Public Charity Status (All organizations must complete this part.) See instruction organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches acscribed in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). A reganization operated for the benefit of a college or university owned or operated by a government section 170(b)(1)(A)(iii). (Complete Part II.) A reganization operated for the benefit of a college or university owned or operated by a government section 170(b)(1)(A)(ii). (Complete Part II.) A organization that normally receives a substantial part of its support from a governmental unit or from described in section 170(b)(1)(A)(ii). (Complete Part III.) A agnicultural research organization described in section 170(b)(1)(A)(ii) operated in conjunction with a lor university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of university: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more that support from gross investment income and unrelated business taxable income (less section 511 tax) from acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). (Complete Part IIII.) An organization organized and operated exclusively for the benefit of, to perform the func

Part							
\	(Complete only if you checked the				•	•	ılıfy under,
	Part III. If the organization fails to	o qualify unde	er the tests lis	ted below, p	lease comple	te Part, III.)	
	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.")	21/4		34/0	21/2	/ ,,,,	
_	•	N/A	N/A	N/A	N/A	/ N/A	
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		<u> </u>		/		
•	furnished by a governmental unit to the				/		
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by				<i>"</i>		
3	each person (other than a						
	governmental unit or publicly						
	supported organization) included on				51 +		
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support			(1) 2212			
_	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	/(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	 					
8	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business	$\overline{\mathbf{x}}$					
•	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						
12	Gross receipts from related activities etc					12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	-		•	, or fifth tax ye	ear as a section	1 501(c)(3)
Sacti	on C. Computation of Public Suppor			· ·/· · ·		· · · · ·	· · · ·
14	Public support percentage for 2018 (line			1 columb (fi)		14	
15	Public support percentage from 2017 Sci		-	1, 00101111 (1))		15	
16a	331/3% support test—2018. If the organi			on line 13, ar	nd line 14 is 33		
	box and stop here. The organization qua				.\		▶ 🗆
b	331/3% support test 2017. If the organi	zation did not	check a box o	n line 13 or 16	a, and line 15	is 331/3% or mo	ore, check
	this box and stop here. The organization	qualifies as a	publicly suppo	rted organizati	on . 🔍		▶ 🗆
17a	10%-facts-and-circumstances test -2						
	10% or more, and if the organization me						
	Part VI how the organization meets the "	facts-and-circ	umstances" te	st. The organi	zation qualifies	s às a publicly :	supported
	organization					. /	▶ 🗆
b	10%-facts-and-circumstances test—2						
	15 is 10% or more, and if the organization of						
	Explain in Part VI how the organization r supported organization	neets the "tact	is-and-circums	stances" test.	rne organizati	on quaimes as	a publicly
18	Private foundation. If the organization di	d not check a	hox on line 13		or 17b chec	k this hov and s	
10	instructions				., 51 175, 61166	, , , ,	~ > ¬

Schedule A (Form 990 or 990-EZ) 2018

Part							
•	· _ ·					•	nder Part II.
	If the organization fails to qualify	under the tes	ts listed belo	w, please co	mplete Part I	<u>l.) </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		i				
	received. (Do not include any "unusual grants.")	N/A	N/A	N/A	N/A	N/A	
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						
_	The value of services or facilities				/		
5	furnished by a governmental unit to the						
	organization without charge				/		
_	•						
6	Total. Add lines 1 through 5		-				
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified			/			
	persons that exceed the greater of \$5,000		. /	'			
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b		_ \				
8	Public support. (Subtract line 7c from		$\overline{}$				
	line 6.)						
Secti	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	/		\			
_	Add lines 10a and 10b				,		
11	Net income from unrelated business				` 		
••	activities not included in line 10b, whether			i			
	or not the business is regularly carried on				\		
40	Other income. Do not include gain or				\		
12	loss from the sale of capital assets		ì		\		
	(Explain in Part VI.)				\		
40	,						
13	Total support. (Add lines 9, 10c, 11,				\ \		
	and 12.)				501		504(-)(0)
14	First five years. If the Form 990 is for the					1	
,	organization, check this box and stop he			· · · · ·	· · · · · ·	\	· · > 📙
	on C. Computation of Public Suppor						
15	Public support percentage for 2018 (line 8		-			15	<u>%</u>
16	Public support percentage from 2017 Sci				<u> </u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2018 (, , ,	-		17	<u>%</u>
18	Investment income percentage from 2017					18	%
19a	331/3%/support tests-2018. If the organ						\
	17 is not more than 331/3%, check this box	•	-	·		=	` —
b	331/3% support tests - 2017. If the organiz						
	line 18 is not more than 331/3%, check this l	box and stop he	ere. The organi	zation qualifies	as a publicly su	upported organ	izatiòn 🕨 🔲
20	Private foundation. If the organization di	d not check a b	ox on line 14.	19a. or 19b. c	heck this box	and see instru	ctions ▶ □

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.)

Sections A, D, and E. If you checked 12d of Part I, comp	lete Sections A and D, and complete Part V.)
Section A. All Supporting Organizations	•
	Yes

No Are all of the organization's supported organizations listed by name in the organization's governing 1 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. 1 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). 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. За 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. 3b 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. 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. 4b 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. 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in 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). 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? 5b 5c c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor 7 (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). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. 9a b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. 9b 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. 9с 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below. 10a b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.) 10b

Part	V Supporting Organizations (continued)			
Έ,			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		<u> </u>
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
<u>Secti</u>	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
		1		ļ.,,
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.			
Cooti		2		
secu	on C. Type II Supporting Organizations		V	NI -
4	NATIONAL SEASON		Yes	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sacti	on D. All Type III Supporting Organizations	,		
Jecu	on B. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		-	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		1
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		ۍ و .	90
	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		
Secti	on E. Type III Functionally Integrated Supporting Organizations		1	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstru	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see in	structi	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	,		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		Ì	İ
	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.			
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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
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		-1.
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	l		
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		ja 8. ∘ se	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2	~	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6	,	
7 Check here if the current year is the organization's first as a non-functionall instructions).	y in	tegrated Type III supporting	organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	1 age 1			
	ion D-Distributions	<i>y</i> - app	(======================================	Current Year			
							
	Amounts paid to supported organizations to accomplish						
2	,	empt purposes of suppo	orted				
	organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purp	occe of cupported orga	nizations				
3	Amounts paid to acquire exempt-use assets	oses of supported orga	inizations				
	Qualified set-aside amounts (prior IRS approval required)						
$\frac{3}{6}$	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which	h the organization is res	enoneive — ——				
0	(provide details in Part VI). See instructions.	in the organization is res	ponsive				
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
-	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) 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						
b	From 2014						
С							
d	From 2016						
е	From 2017						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2018 distributable amount						
i	Carryover from 2013 not applied (see instructions)			•			
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from						
	Section D, line 7 ⁻ \$		6 4 € € 56 ′	e e e			
a	Applied to underdistributions of prior years						
b	Applied to 2018 distributable amount	್ರಾರ್ತಿ ಪ್ರಕ್ರಾಂದ	ه سوء دي د				
	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:						
a	Excess from 2014						
b	Excess from 2015						
c	Excess from 2016						
d	Excess from 2017						
e	Excess from 2018						

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17'a or 17'o; 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.)
····	
	
	
	·
	
~	