Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2018

Department of the Treasury

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

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

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

A F	or the	2018 calenda	ar year, or tax year beginning December 17 , 2018, and ending [ecembe	r 31 , 20 18
В	heck if ap	pplicable	C Name of organization D En	nployer id	lentification number
	Address c	change	Opportunity GrantED, Inc	8	3-2915226
	Name cha	-	Number and street (or P O box, if mail is not delivered to street address) Room/suite E To	elephone n	umber
=	lnıtıal retui Final retur	rn/terminated	P O. Box 161	77	3-263-8893
=	Amended		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	roup Exe	•
V	Applicatio	on pending	Reminioriti, 12 00043	lumber I	
G A	Account	ting Method	✓ Cash Accrual Other (specify) ► H Chec	k ▶ 🗸	if the organization is not
	Vebsite				ach Schedule B
J T	ax-exen	npt status (che	, , <u>Santan</u>	n 990, 99	0-EZ, or 990-PF)
		organization	· · · · · · · · · · · · · · · · · · ·		
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total asset	ets	
•	· · · · · ·		\$500,000 or more, file Form 990 instead of Form 990-EZ	\$	650
ľ	art !		ie, Expenses, and Changes in Net Assets or Fund Balances (see the instance the organization used Schedule O to respond to any question in this Part I	ructions	s for Part I)
	1		ons, gifts, grants, and similar amounts received	. 1	650
	2		ervice revenue including government fees and contracts	2	0
	3	_	nip dues and assessments	. 3	0
	4	Investmen	t income	. 4	0
	5a	Gross amo	ount from sale of assets other than inventory	0 .	
	Ь	Less cost	or other basis and sales expenses	0 -	
	С .	Gain or (lo	ss) from sale of assets other than inventory (Subtract) ine 5b from tho pay	5с	0
	6	Gaming ar	nd fundraising events		
ø	a	Gross inc \$15,000)	come from gaming (attach Schedule C if greater than 3		(
20A@venue			ome from fundraising events (not including \$ 000 por contributions	0	
8	b		ome from fundraising events (not including \$ 0 of contributions raising events reported on line 1) (attach Schedule G if the V	.	
8			ch gross income and contributions exceeds \$15,000).		
	c		ct expenses from gaming and fundraising events 6c	0	
8	d		ne or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract	it	
9	-	line 6c)	· · · · · · · · · · · · · · · · · · ·	6d	0
AU(7a	Gross sale	es of inventory, less returns and allowances	0	<u>~</u>
	b		of goods sold	0	
	С	Gross prof	fit or (loss) from sales of inventory (Subtract line 7b from line 7a)	. 7c	0
Ž	8		enue (describe in Schedule O)	. 8	0
<u>Z</u>	9	Total reve	enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	650
CANNED	10	Grants and	d similar amounts paid (list in Schedule O)	10	0
Ŋ	11	Benefits p	aid to or for members .	. 11	0
es	12	Salaries, o	ther compensation, and employee benefits	. 12	0
Expens	13	K // 1	nal fees and other payments to independent contractors	13	0
×pč	14		ry, rent, utilities, and maintenance	. 14	0
ш	1		ublications, postage, and shipping	. 15	0
	16		enses (describe in Schedule O)	16	650
	17		enses. Add lines 10 through 16	17	650
ţ	18		(deficit) for the year (Subtract line 17 from line 9)	. 18	0
SSe	19	Net assets	s or fund balances at beginning of year (from line 27, column (A)) (must agree wit ar figure reported on prior year's return)		
Net Assets	20			19	0
Re	3		nges in net assets or fund balances (explain in Schedule O)	20	0
_	21	net assets	s or fund balances at erid of year. Combine lines 18 through 20.	21	0

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form 990-EZ (2018)

	<u> </u>	<u> </u>					
Pa	rt II	Balance Sheets (see the instructions			~		, _ ,
		Check if the organization used Schedule	O to respond to ar		Oart II	•	B) End of year
	· C			_			
22		h, savings, and investments d and buildings		_		22	0
23 24		d and buildings er assets (describe in Schedule O)		· · · -		24	. 0
25		al assets	•	` -		25	<u>\X</u> °
26		al liabilities (describe in Schedule O)		· · · · ·		26	14.0
27		assets or fund balances (line 27 of column	n (B) must agree with	1 line 21)		27	0
	t III	Statement of Program Service Accom					=
		Check if the organization used Schedule	O to respond to ar	ny question in this I	Part III	-	Expenses
Wha	t is the	organization's primary exempt purpose?	provide school supp	lies to needy schools	<u>,</u>		iired for section)(3) and 501(c)(4)
		e organization's program service accompl				•	izations, optional for
		ed by expenses. In a clear and concise nefited, and other relevant information for e		services provided	, the number of	other	5)
		ganization's operations have not yet begun					
	·····	λ If the σ = σ = σ = σ = σ = σ = σ = σ = σ = σ	· · · · · · · · · · · · · · · · · · ·	mto obsoluboro		20-	_
29	(Grant		includes foreign gra		· · · •	28a	0
29							
	(Grant	s\$) If this amoun	includes foreign gra	nts, check here .	▶ 🗆	29a	o
30							
	(Grant		includes foreign gra	ints, check here	. ▶ 📙	30a	0
31		program services (describe in Schedule O)					
22	(Grant	program service expenses (add lines 28a	tincludes foreign gra	nts, check here	· P U	31a	0
	t IV	List of Officers, Directors, Trustees, and Ke		one even if not com	nenested—see the u		tions for Part IVA
		Check if the organization used Schedule					
		<u> </u>	(b) Average	(c) Reportable	(d) Health benefits,	٦	
		(a) Name and title	hours per week devoted to position	compensation (Forms W-2/1099-MISC)	contributions to employ benefit plans, and		stimated amount of her compensation
			devoted to position	(if not paid, enter -0-)	deferred compensation	۱ ا	
	en Bov		-				
		esident and Treasurer	1	0	 	0	0
	Peters	Secretary	- 1	0		0	0
	/ Kaczn		<u> </u>			+	<u> </u>
Dire			1	0		0	0
		1100					
						+	
			·-				
							
			-				
			1	1	1	- 1	
						-	
						-	
					140		



Part '				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		L L
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
-	detailed description of each activity in Schedule O	33		1
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			
05-	change on Schedule O. See instructions	34		✓
35a	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
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	·	1
С	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		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 27a 0			
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		·/!
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	000		
39	Section 501(c)(7) organizations Enter	1		
а	Initiation fees and capital contributions included on line 9			
b 40-	Gross receipts, included on line 9, for public use of club facilities	-	ļ !	١.
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958	İ		
	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	40-		
41	List the states with which a copy of this return is filed >	40e	<u> </u>	
42a		773-26	3-889	3
	Located at ► 1511 Elmwood Ave Wilmette, IL ZIP + 4 ►	60091	-1652	!
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶	42b		/
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).		ļ	l
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		1
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 . ► 43			
440	Did the exception mention only denot advised finds during the years If "Ver." Form 000 and he		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	1	-
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	770		•
	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		-	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44d	-	 ,
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	45a	111111111111111111111111111111111111111	√
-	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	[_ "		1.0.0
	Form 990-EZ. See instructions	45b		1

Form **990-EZ** (2018)

							Yes	No
46	Did the organization engage, directly or in			n behalf of o	r in opposi	tion		M.
	to candidates for public office? If "Yes," of		, Part I			46		/
Part	VI Section 501(c)(3) Organization	s Only						
	All section 501(c)(3) organization	is must answer que	stions 47-49b and	52, and co	mplete th	e tables	for lin	es
	50 and 51							
	Check if the organization used Sc	hedule O to respond	I to any question in	this Part VI				
			<u> </u>				Yes	No
47	Did the organization engage in lobbying	activities or have a	section 501(h) electi	on in effect	during the	tax		
	year? If "Yes," complete Schedule C, Par					47	1	1
48	Is the organization a school as described i	n section 170(b)(1)(A)(i	il? If "Yes." complete	Schedule E		48		1
49a	Did the organization make any transfers t					49a		<u> </u>
b	If "Yes," was the related organization a se		_		•	49t		·
50	Complete this table for the organization's				cers direct			nd key
30	employees) who each received more than							
	- Chiploydes) who each received more than	<u> </u>			benefits,		110110	
	(a) Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	contributions	to employee	(e) Estimat	led amo	unt of
	(a) Name and the or each employee	devoted to position	(Forms W-2/1099-MISC		, and deferred ensation	other co	mpensa	tion
				Compe	sauOII			
none								
				 		<u> </u>		
- -								
		ļ						
f	Total number of other employees paid ov	ver \$100,000	. ▶ 0					
51	Complete this table for the organization		ensated independen	t contractor	s who eac	h received	d more	e thar
	\$100,000 of compensation from the orga							
		d-att	(h) Tuna at no		,_	1 Camaanaa		
	(a) Name and business address of each indepen	dent contractor	(b) Type of se	rvice	") Compensa	ШОП	
none								
			-					
			-					
	· · · · · · · · · · · · · · · · · · ·							
			-]			
			 		<u> </u>			
			-					
			-					
	Takal a wash as of all as wash		- C100 000		<u> </u>	•		
_	Total number of other independent contr	ŭ		<u> </u>		0		
52	Did the organization complete Sched	ule A? Note: All se	ection 501(c)(3) org	anizations i	must attac	. —	_	
	completed Schedule A .	•	.		• •	► ✓ Ye		No
	penalties of perjury. I declare that I have examined this					nowledge ar	nd belief	, it is
true, co	prect, and complete Declaration of preparer (other that	in oπicer) is based on all inte	ormation of which prepare					
	1 Mister Strome				<u>4-24-20</u>	19		
Sign	Signature of officer			Da	ite			
Here	Kristen Bowie, President							
_	Type or print name and title							
Paid	Print/Type preparer's name	Preparer's signature	C	Date	Check [] _{if} PTIN		
			İ		self-emple			
-	Only Firm's name >			Fir	m's EIN ▶	<u>'</u>		
use	Only Firm's name Firm's address F				one no			
Mav t	he IRS discuss this return with the prepare	r shown above? See	instructions			► ☐ Ye	s 🗀	No
	and property							

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

83-2915226 Opportunity GrantED, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization (v) Amount of monetary (i) Name of supported organization (o) EIN (III) Type of organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? instructions) instructions) above (see instructions) Yes (A) (B) (C) (D) (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						
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") .	o	0	0	0	650	650
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	o	0	o	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge .	o	0	0	_0	0	<u>0</u>
4	Total. Add lines 1 through 3	0	0	0	0	650	650
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)			-			650
6	Public support. Subtract line 5 from line 4						<u> </u>
	on B. Total Support			<u></u>		1	
	idar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from	0	0	0	0	650	650
9	Net income from unrelated business activities, whether or not the business is regularly carried on	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 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for the organization, check this box and stop he	ne organization		d, third, fourth	 , or fifth tax y	12 ear as a section	650 0 n 501(c)(3)
Sect	on C. Computation of Public Suppor		e		-		
14 15	Public support percentage for 2018 (line 6 Public support percentage from 2017 Sch	5, column (f) di	vided by line 1			14	% %
16a b	33½% support test—2018. If the organic box and stop here. The organization qua 33½% support test—2017. If the organic this box and stop here. The organization	lifies as a publ zation did not	icly supported check a box c	organization in line 13 or 16	 a, and line 15	.s 33 ¹ /3% or m	▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the " organization	eets the "facts	-and-circumst	ances" test, ch	neck this box a	and stop here .	. Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization resupported organization is	ation meets th	e "facts-and-o	circumstances'	' test, check	this box and	stop here.
18	Private foundation. If the organization di instructions	d not check a	box on line 13	, 16a, 16b, 17a 	ı, or 17b, chec	k this box and	see ▶ □

	e A (Form 990 or 990-EZ) 2018	D	il	F00/-\/0\			Page
Part	Support Schedule for Organiza (Complete only if you checked th				nization failed	to qualify us	der Part II
	If the organization fails to qualify						oci i aii ii.
Section	on A. Public Support	3,,00, 1,10 10	515 H5154 251	, p			
	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 3018	(f) Total
1	Gifts, grants, contributions, and membership fees				····	1	(1)
	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 .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge				7		
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			/			
с 8	Add lines 7a and 7b Public support. (Subtract line 7c from line 6)	-					·
Secti	on B. Total Support		'/	<u> </u>	<u> </u>	L	<u> </u>
	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						
С	Add lines 10a and 10b	/					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	ne organizatioi	n's first, secon	d, third, fourth	, or fifth tax y	ear as a section	on 501(c)(3)

	acquired after June 30, 1975	/						
С	Add lines 10a and 10b	/						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for the	ne organization	n's first, secon	d, third, fourth	, or fifth tax ye	ar as a	section 501(c)(3)
	organization, check this box and stop he						ı	▶ □
Secti	on C. Computation of Public Suppor	rt Percentag	е					
15	Public support percentage for 2018 (line	8, column (f), c	livided by line	13, column (f))	•	15		%
16	Public support percentage from 2017 Scl	hedule A, Part	III, line 15	·		16	-	%
Secti	on D. Computation/of Investment In	come Perce	ntage					
17	Investment income percentage for 2018 (line 10c, colun	nn (f), divided l	y line 13, colu	mn (f)) .	17		%
18	Investment income percentage from 2017	7 Schedule A,	Part III, line 17			18		%
19a	331/3% support tests-2018. If the organ							ne ne
	17 is not more than 331/3%, check this box	and stop here.	. The organizati	on qualifies as a	a publicly suppo	rted or	ganization	▶ □
b	331/3% support/tests-2017. If the organize	zation did not d	heck a box on	line 14 or line 1	9a, and line 16	is more	e than 331/3%, ar	ıd
	line 18 is not more than 331/3%, check this	box and stop h	iere. The organ	ızatıon qualıfıes	as a publicly su	ipporte	d organization	▶ □
_20	Private foundation. If the organization di	id not check a	box on line 14	, 19a, or 19b, o	heck this box a	and see	e instructions	▶ 🗀
					Sche	edule A	(Form 990 or 990-E2	2) 2018

Supporting Organizations Part IV

(Còmplete 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.)

Secti	on A. All Supporting Organizations			
			Yes	No
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	1		,
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in 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	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b	laldi lagesti s	183 1114 1 1 1 1 1
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	, <u>-</u>	
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)	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whother 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	Uni	1 minument i
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)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 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		
L.	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.	9c		-
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	10a		, attacher
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	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		
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		
Secti	on B. Type I Supporting Organizations	1		
	7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,		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	<u> </u>	
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,		ļ	
	supervised, or controlled the supporting organization	2		
Secti	on C. Type II Supporting Organizations		·	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	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	L	
Secti	on D. All Type III Supporting Organizations		12/	N1 -
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
,	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	ini ho ishe ilin	mes is a confi	n to no r
	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	DELLI Solesi	311 111	1011 1 4 A
	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			
Sect	on E. Type III Functionally Integrated Supporting Organizations	3		l
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	netru	ction	<u> </u>
a	The organization satisfied the Activities Test Complete line 2 below	,,,,,,,	Clibiii	3)
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 (see in	struct	ions)
2	Activities Test Answer (a) and (b) below.		Yes	No
a	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,	4.7.	/199	Y
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities		~ ·	-
h	·	2a	-	
h	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.	20		<u> </u>
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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	ساد شاه تا بيناد	. "	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		l‴ ''

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 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		(5) 5
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	, P. 1441	
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	y in	tegrated Type III support	ing organization (see
instructions)	-		- • , ,

Part '	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D—Distributions	٠.	,	Current Year
1	Amounts paid to supported organizations to accomplish e	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	orted -	•
•	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	•		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI) See instructions	h the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6	-		
10	Line 8 amount divided by line 9 amount	·		
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(ווו) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6	经的基础的 其代學	2000年の高端観視的形	
٫2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
,	instructions.	ENTENT AND AND		MEALY VELICITY
3	Excess distributions carryover, if any, to 2018	ANTENNAMENTAL AND A STATE OF THE SAME AND A STATE OF THE SAME AND A STATE OF THE SAME AND A STATE OF THE SAME A	法是不够的。那么是	建初年於1988年於 至
а	From 2013 '	经验域的治疗的现在分 别	が記録が過れば	
b	From 2014	国际政治区位为国际的	是是用的數學是可以	京議が、野子を出記書
С	From 2015	经有一个证明的的编辑	共和國國際 建水杨 网络拉拉	は名が、既の書きの題
d	From 2016 . ,	的學術學的學術學	的"邮票"的"记录"	的现在分词"说话都看
е	From 2017	经过17分别的基础的	en kalekarken	地域的影響的影響的
f	Total of lines 3a through e		Mark Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the C	是特殊的人工的特殊的
g	Applied to underdistributions of prior years	设产业股份等的		的機能够多數的學科
h	Applied to 2018 distributable amount	THE TOTAL PROPERTY OF THE PARTY		,
i	Carryover from 2013 not applied (see instructions)		(1)公司的现在分词	是最少心外等性性的影響
<u>j.</u>	Remainder Subtract lines 3g, 3h, and 3i from 3f			WALL STATE OF THE
4	Distributions for 2018 from			
	Section D, line 7 \$ '.	Part Profession State	是在自己的人们的自己的人们	操作。 [1]
а	Applied to underdistributions of prior years	经过程的		
b	Applied to 2018 distributable amount	系统的是位为1886年的自	Market Charles	
С	Remainder Subtract lines 4a and 4b from 4.	and the water and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the	TO HARD ROOM TO THE	Francish at 1889 A.
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	Parket Market Service		國行的工作的主義學
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 .	能學校時結構數學	179岁的美国人工的大学经	常成果实现 (14.0%是最高
. а	Excess from 2014	了数学在157亿大数型的2.0	"定"的过去数据数据数据	能性的多大类型 。
, b	Excess from 2015 .	设型的管理器	经会交额等高性实际的	激的以外流程的
С	Excess from 2016	高名·宋郡 48125-165	建筑建筑区域区域	TO NAME OF THE PARTY.
d	Excess from 2017	海红江江中省1883年3月	"是是我们的人们的	"新"的"一"的"一"的"一"的"一"的"一"的"一"的"一"的"一"的"一"的"一
С	Excess from 2018	THE THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON O	The car a probable to the time to the transfer of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of the company of t	HERSELS LANGUAGE
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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 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.

OMB No 1545-0047 2018

Open to Public Inspection

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

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

Name of the organization	Employer identification number
Opportunity GrantED, Inc	83-2915226
Part 1, Line 16	
The organization paid a \$600 fee to the United States Treasure for its Application for Recognition of Exemption (IRS Form 1023).	
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