990-EZ

Short Form Return of Organization Exempt From Income Tax

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

2018

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury

▶ 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. Internal Revenue Service 01/01 , 2018, and ending 12/31 20 A For the 2018 calendar year, or tax year beginning D Employer identification number C Name of organization B Check if applicable Address change 93-1298606 SEMINARY TEA COMMITTEE Number and street (or P O box, if mail is not delivered to street address) Room/suite Name change E Telephone number Initial return 503-297-2994 PO BOX 25057 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Application pending PORTLAND, OR 97289 H Check ► ✓ If the organization is not Accrual Other (specify) ✓ Cash G Accounting Method **SEMINARYTEA.ORG** required to attach Schedule B Website: ▶ J Tax-exempt status (check only one) - 7 501(c)(3) (Form 990, 990-EZ, or 990-PF)) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 501(c) (✓ Corporation K Form of organization ☐ Trust ☐ Association Other L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ 73,772 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 1 73,772 2 2 Program service revenue including government fees and contracts 0 3 3 Membership dues and assessments. 0 4 4 Investment income 0 5a Gross amount from sale of assets other than inventory 0 5h 0 Less: cost or other basis and sales expenses 5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 0 Gaming and fundraising events: Gross income from gaming (attach Schedule G if greater than 6a Gross income from fundraising events (not including \$ 73,772 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) Less: direct expenses from gaming and fundraising events . . . 0 Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d Gross sales of inventory, less returns and allowances 7a 7a Less cost of goods sold 7c C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 0 R Other revenue (describe in Schedule O). 8 0 9 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 73,772 10 <u>63,0</u>00 10 Grants and similar amounts paid (list in Schedule O) 11 11 Benefits paid to or for members 0 Salaries, other compensation, and employee benefits . Professional fees and other payments to independent contractors. 12 12 0 13 13 0 Occupancy, rent, utilities, and maintenance . 14 14 0 Printing, publications, postage, and shipping. 15 15 1,241 Other expenses (describe in Schedule O) . . 16 16 11,592 17 17 **Total expenses.** Add lines 10 through 16 75,833 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 -2,061 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 0 20 20 Other changes in net assets or fund balances (explain in Schedule O) . . . 0 Net assets or fund balances at end of year. Combine lines 18 through 20 -2,061

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2018)

Pại						_
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part II		(D) Ford of contract
	Cook assumes and assessment		-	., 3 3 7 7	-	(B) End of year
22 23	Cash, savings, and investments	•	· ·	4,252	23	3,035
24	Other assets (describe in Schedule O)				24	- / 0
25	Total assets		_		25	V + 8
26	Total liabilities (describe in Schedule O)				26	0 7 0
27	Net assets or fund balances (line 27 of column	(B) must agree with	line 21)	4,252	_	3,035
Par						
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part III 🔲		Expenses
What	t is the organization's primary exempt purpose?	PORTLAND ARCHDI	OCESE SEMINARIAN	EDUCATION		uired for section c)(3) and 501(c)(4)
as m perso	oribe the organization's program service accomplineasured by expenses. In a clear and concise mons benefited, and other relevant information for each	nanner, describe the ach program title.	e services provided	, the number of		nizations, optional for
28	WROTE CHECK TO SEMINARY EDUCATION FUND T THE ARCHDIOCESE OF PORTLAND	O SUPPORT TUITION				
	(Grants \$ 63,000) If this amount	includes foreign gra	nts, check here .	> 🗆	28a	63,000
29			-			
]
						1
	(Grants \$) If this amount	includes foreign gra	nts, check here .	▶ 🗆	29a	
30						
	(C				20-	
21	(Grants \$) If this amount Other program services (describe in Schedule O)	includes foreign gra	nts, check here .		30a	
31	the state of the s	includes foreign gra			31a	
32	Total program service expenses (add lines 28a		ints, check here .	· · · · ·	32	63,000
Par			one even if not comi	pensated—see the ii		
	Check if the organization used Schedule					🗀
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employ	0	Estimated amount of ther compensation
RAM	ONA HARRINGTON					
CO-P	RESIDENT	10	0		0	0
BEC	KY LANG					
CO-P	RESIDENT	8	0	ļ	0	0
	N BAUMGARDNER					
	PRESIDENT	2	0		9	0
	Y KAY BEAUDOIN					
IKEA	ASURER	5	0		 	0
					1	.
		1				
		1				
		ļ	<u></u>		-	
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				1		
		 	-		- -	
		-				

A

Part				
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part	V . 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	163	√
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 c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	35b		
36	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	35c 36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions [37a]	30		Y
ь 38а	Did the organization file Form 1120-POL for this year?	37b 		✓
	If "Yes," complete Schedule L, Part II and enter the total amount involved			·
39 a	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on line 9			
b 40a	Gross receipts, included on line 9, for public use of club facilities			
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		<u> </u>
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 ► OR			
42a	The organization's books are in care of ► MARY KAY BEAUDOIN Telephone no. ► 5 Located at ► 9239 NW MCKENNA DR PORTLAND, OT ZIP + 4 ►	503-29 97 <i>2</i>		4
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)?	42b		✓
	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		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
b	completed instead of Form 990-EZ	44a	 	✓
D	completed instead of Form 990-EZ	44b		7
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)?	440 45a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ See instructions	45b	1	ı √

Page	4
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`_,	.						. –		Yes	No	
46		organization engage, directly or in dates for public office? If "Yes," c				r ın opposı		46			
Part		ection 501(c)(3) Organizations		, raiti	· · · ·	<u> </u>	• _	46			
T CITY		section 501(c)(3) organizations		stions 47–49b and	d 52, and co	mplete th	e table	es fo	or line	es	
	50 and 51.										
	Ch	eck if the organization used Sch	edule O to respond	I to any question in	this Part VI				<u></u>	🗆	
	_								Yes	No	
47		organization engage in lobbying "Yes," complete Schedule C, Part		section 501(h) elect		during the		47		1	
48	 49a Did the organization make any transfers to an exempt non-charitable related organization? b If "Yes," was the related organization a section 527 organization? 									1	
49a											
b										✓	
50		te this table for the organization's									
	employe	ees) who each received more than	\$100,000 of comper	nsation from the org			e, ente	<u>r "N</u>	one."		
	(a) Nai	me and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	henefit plans	to employee and deferred			d amou pensat		
NONE											
							,				
						•					
					i						
		mber of other employees paid over		. •0	<u> </u>						
51	Comple \$100.00	te this table for the organization's 0 of compensation from the orgal	s five highest compe	ensated independer one enter "None"	nt contractors	s who each	n recei	ved	more	: than	
				1							
	(a) Na	me and business address of each independe	ent contractor	(b) Type of se	ervice	(c) Compe	nsatio	on		
NONE								-			
					_						
				_							
							_				
				-	i						
		· ·									
				1							
d	Total nu	mber of other independent contra	ctors each receiving	over \$100,000 .	. •		0				
52	Did the	organization complete Schedured Schedule A	_		anizations n	nust attacl	h a .▶√	Yes		No	
Under n		penury, I declare that I have examined this re	eturn, including accompan	ving schedules and states	ments, and to the	best of mv k					
		omplete Declaration of preparer (other than					,				
		1/V6 bearl			•	7/16/	20	19			
Sign	7	Signature of officer	:- -		Dat	e /		•			
Here		MARY KAY BEAUDOIN, TREASURI Type or print name and title	ER								
D~:~	Pi	rint/Type preparer's name	Preparer's signature	<u> </u>	Date	Check) ,f P	TIN			
Paid Prep						self-emplo					
Use	1 -	1 =									
		rm's address ▶			Pho	one no					
Mayth	na IRS di	scuss this return with the preparer	shown above? See	instructions				Vac		No	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2018

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization 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.

Open to Public Inspection

	NARY TEA COMMITTEE				4 1	93-12		_
	Reason for Public Cha						ons.	_
	organization is not a private found		,		•	•		
1								
2	A school described in section					· ·	na	
3	A hospital or a cooperative ho)	
4	A medical research organizate	•	onjunction with a nost	oitai desc	ribea in s	section 1/0(b)(1)(A)((III). Enter the	
e	hospital's name, city, and sta							
5	An organization operated for section 170(b)(1)(A)(iv). (Con		college or university	owned o	r operate	ed by a government	ar unit described i	T 1
6 7	☐ A federal, state, or local gove☐ An organization that normally described in section 170(b)(1	receives a subs	stantial part of its sup				n the general publi	С
8	☐ A community trust described			Part II.)				
9	An agricultural research organ or university or a non-land-grauniversity	nization describe ant college of ag	d in section 170(b)(1) riculture (see instruction	(A)(ix) op ons). Ente	er the nan	ne, city, and state of	the college or	
10	An organization that normally receipts from activities related support from gross investment acquired by the organization	d to its exempt fu nt income and un	inctions—subject to c irelated business taxal	ertaın exc ble ıncom	ceptions, ie (less se	and (2) no more that ection 511 tax) from	n 331/3% of its	
11	☐ An organization organized an		•		•	•		
12	_	•	•	-			ry out the purpose	s
	of one or more publicly supp	orted organization	ons described in sect i	ion 509(a)(1) or se	ection 509(a)(2). Se	e section 509(a)(3).
	Check the box in lines 12a thr	ough 12d that de	scribes the type of sur	porting o	organizatio	on and complete line	es 12e, 12f, and 12g	Э.
а	☐ Type I. A supporting orga	nization operated	d, supervised, or contr	olled by	ts suppo	rted organization(s),	typically by giving	
	the supported organizatio					he directors or trust	ees of the	
	supporting organization.	ou must compl	ete Part IV, Sections	A and B	•			
b	_ ,,							
	control or management of organization(s). You must				persons	that control or man	age the supported	
C	Type III functionally integrates supported organization						ally integrated with	,
c	I ☐ Type III non-functionally	integrated. A su	upporting organization	operated	d in conn	ection with its suppo	orted organization(s	s)
	that is not functionally inte							
	requirement (see instruction	ons). You must c	complete Part IV, Sec	ctions A	and D, ar	nd Part V.		
e	Check this box if the orga functionally integrated, or						e II, Type III	
f	Enter the number of supported	organizations .						
g	Provide the following information	on about the supp	ported organization(s).					
	(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
				Yes	No	,	,	
A)								
B)	<u>-</u>		-					_
(C)		 						_
D)				 				_
E)								_
<u>-, </u>								
Γota	.t			i				

Part	II Support Schedule for Organiza	ations Descr	ibed in Secti	ons 170(b)(1)(A)(iv) and 1	170(b)(1)(A)(v	i)		
٠,	(Complete only if you checked the						alify under		
	Part III. If the organization fails to qualify under the tests listed below, please complete 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.")				/	/			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3				/				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4			/					
	on B. Total Support		# > 0045	(1) 2010	()) 0047	() 0040	(0 T-+-1		
	dar year (or fiscal year beginning in) Amounts from line 4	(a) 2014	(b) 2015	(ć) 2016	(d) 2017	(e) 2018	(f) Total		
7 8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		/						
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for the				or fifth tax v	12	on 501(c)(3)		
	organization, check this box and stop he						. –		
Secti	on C. Computation of Public Suppor			·	<u> </u>	<u> </u>			
14	Public support percentage for 2018 (line			1, column (f))		14	%		
15	Public support percentage from 2017 Sci	hedule A, Part	I <mark>/</mark> , line 14 .			15	%		
16a	331/3% support test—2018. If the organ box and stop here. The organization qua	ilifies as a pubļ	icly supported	organization			🕨 🗀		
b	331/3% support test—2017. If the organithis box and stop here. The organization								
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the 'organization'.	eets the "facts	-and-circumst	ances" test, cl	heck this box	and stop here	. Explain in		
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization in Part VI how the organization is supported organization	ation meets th	e "facts-and-o	circumstances	" test, check	this box and	stop here.		
18	Private foundation. If the organization di	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see ▶ □		

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

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.")		28700	47500	70000	75833	222033
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		o	0	o	0	0
3	Gross receipts from activities that are not an			ļ			
	unrelated trade or business under section 513		0	0	0	0	0
4	Tax revenues levied for the	i		j			
	organization's benefit and either paid to	İ		i	•		
_	or expended on its behalf		0	0	0	0	0
5	The value of services or facilities		i				
	furnished by a governmental unit to the organization without charge						•
6	Total. Add lines 1 through 5		28700	47500	70000	75833	222033
7a	Amounts included on lines 1, 2, and 3		28700	4/300	70000	/5633	222033
	received from disqualified persons .		0	o	o	0	0
b	Amounts included on lines 2 and 3		<u> </u>		1		<u>×</u>
_	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year		0	0	0	0	0
С	Add lines 7a and 7b		O	0	0	0	0
8	Public support. (Subtract line 7c from		·				
	line 6)						222033
	on B. Total Support	4 > 0044	1 (1) 0045	() 2040	10.0047	() 0040	10 T. A. I
Galen 9	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
э 10а	Gross income from interest, dividends,		28700	47500	70000	75833	222033
IUa	payments received on securities loans, rents,						
	royalties, and income from similar sources .		ا	o	o	0	0
b	Unrelated business taxable income (less		<u> </u>				<u></u>
	section 511 taxes) from businesses			1	l l		
	acquired after June 30, 1975		o	o	o	0	0
С	Add lines 10a and 10b .						
11	Net income from unrelated business		[ļ	1	
	activities not included in line 10b, whether				1		
	or not the business is regularly carried on		0	0	0	0	0
12	Other income. Do not include gain or			İ			
	loss from the sale of capital assets (Explain in Part VI.)		-	_	_	_	_
13	Total support. (Add lines 9, 10c, 11,		0	0	0		0
10	and 12.)		28700	47500	70000	75833	222033
14	First five years. If the Form 990 is for the	t ne organizatioi					
		-					. `▶ ☑
	organization, check this box and stop he						
Secti	on C. Computation of Public Support						
Secti 15	<u></u>	rt Percentag	e			15	%
15 16	on C. Computation of Public Support Public support percentage for 2018 (line Public support percentage from 2017 Sci	rt Percentag 8, column (f), c hedule A, Part	e divided by line 1 III, line 15			15 16	% %
15 16 Secti	on C. Computation of Public Suppor Public support percentage for 2018 (line Public support percentage from 2017 Sc on D. Computation of Investment In	rt Percentag 8, column (f), c hedule A, Part come Perce	e divided by line 1 III, line 15 ntage	3, column (f))		16	%
15 16 Secti 17	on C. Computation of Public Support Public support percentage for 2018 (line Public support percentage from 2017 Scion D. Computation of Investment In Investment income percentage for 2018 (rt Percentag 8, column (f), c hedule A, Part come Perce (line 10c, colur	e divided by line 1 III, line 15 intage nn (f), divided b	3, column (f))		16	%
15 16 Secti 17 18	on C. Computation of Public Support Public support percentage for 2018 (line Public support percentage from 2017 Scient D. Computation of Investment In Investment income percentage for 2018 (Investment income percentage from 201)	rt Percentag 8, column (f), c hedule A, Part come Perce (line 10c, colur 7 Schedule A,	e divided by line 1 III, line 15 intage nn (f), divided b Part III, line 17	3, column (f))	mn (f))	16 17 18	% % %
15 16 Secti 17	on C. Computation of Public Support Public support percentage for 2018 (line Public support percentage from 2017 Scion D. Computation of Investment In Investment income percentage from 2018 (Investment income percentage from 201331/3% support tests—2018. If the organization of Public Support 1015 percentage from 2015 perce	rt Percentag 8, column (f), c hedule A, Part come Perce (line 10c, colur 7 Schedule A, lization did not	divided by line 1 III, line 15 Intage Inn (f), divided b Part III, line 17 check the box	3, column (f)) y line 13, colur on line 14, an	mn (f))	16 17 18 ore than 331/3%	% % % a, and line
15 16 Secti 17 18 19a	on C. Computation of Public Support Public support percentage for 2018 (line Public support percentage from 2017 Scient D. Computation of Investment In Investment income percentage for 2018 (Investment income percentage from 201331/3% support tests—2018. If the organ 17 is not more than 331/3%, check this box	rt Percentag 8, column (f), c hedule A, Part come Perce (line 10c, colur 7 Schedule A, nization did not and stop here	divided by line 1 III, line 15 Intage Inn (f), divided b Part III, line 17 Incheck the box In The organization	3, column (f)) y line 13, colur on line 14, and qualifies as a	mn (f))	16 17 18 ore than 331/3% orted organization	% % %, and line
15 16 Secti 17 18	on C. Computation of Public Support Public support percentage for 2018 (line Public support percentage from 2017 Scion D. Computation of Investment In Investment income percentage from 2018 (Investment income percentage from 201331/3% support tests—2018. If the organization of Public Support 1015 percentage from 2015 perce	rt Percentag 8, column (f), c hedule A, Part come Perce (line 10c, colur 7 Schedule A, nization did not and stop here zation did not co	divided by line 1 III, line 15 Intage Inn (f), divided b Part III, line 17 Incheck the box In The organization	3, column (f)) y line 13, colur on line 14, and qualifies as a line 14 or line 1	mn (f))	17 18 ore than 331/3% orted organizations more than 331/3%	% % %, and line on . ▶ □ 31/3%, and

Part IV

Supporting Organizations

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

Section	A. All	Supp	ortina	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.			
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		
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	<u></u>	
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		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
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 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		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in 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		
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)			لـــا
	below, the governing body of a supported organization?	11a		
	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> </u>
Secu	on B. Type I Supporting Organizations		Yes	No
4	Did the directors, trustees, or membership of one or more supported organizations have the power to	Γ	162	140
1	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		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
		Γ	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).	- <u>-</u> -		
Sacti	on D. All Type III Supporting Organizations			l
36611	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		103	1
•	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			
	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		ļ
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.			
Casti		3		
	on E. Type III Functionally Integrated Supporting Organizations		otion	-)
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below.	iiətfü	CHOI1	3).
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below</i>			
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.			No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			ļ
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	<u> </u>	
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.		<u> </u>	
_	-	2b	<u> </u>	ļ
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>			اـــــــــــــــــــــــــــــــــــــ
L	· · · · · · · · · · · · · · · · · · ·	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	jani	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					
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)						
a Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other factors (explain in detail in Part VI)						
2 Acquisition indebtedness applicable to non-exempt-use assets	2		"			
3 Subtract line 2 from line 1d.	3					
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035.	6					
7 Recoveries of prior-year distributions	7	-				
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C – Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1.	2	• -				
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
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	ly int	egrated Type III supporti	ing organization (see			
instructions).						

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
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	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.			Í
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
	From 2015			
d	From 2016			
	From 2017			
	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)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7.			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7			
а	Excess from 2014			
b	Excess from 2015			
	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

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)

1

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.

20**18**

Open to Public Inspection

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

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

Name of the organization	Employer Identification number		
SEMINARY TEA COMMITTEE	93-1298606		
PART 1, LINE 10 WROTE CHECK FOR \$63000 TO THE SEMINARY EDUCATION FUND			
PART 1 LINE 16 EXPENSES TO PUT ON FUND RAISING EVENT			

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Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization SEMINARY TEA COMMITTEE	Employer identification number 93-1298606

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