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	13	Grants and	rd elmila	an miga	inte o:	ald (De	of IV: >	t equal	/A) I	VIII, CX	20	(A); II	10 12)	╁			41,631	1			7,058
	14	Benefits p	ald to c	or for m	rembe:	na (Peir	t IX. cu	okumn'	(A) II	na Δì	-3j ·	, -		\vdash			48,821	╙		<u>.</u> 8	8.262
9	15	Salaries, of	ther con	mpensa	rtion, e	mp oy	ee ben	efits (P	art.DX	. ootun	nn (A).	ines :	5-1D)			٠	89,529	+		276	- 540
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Ă	ь	Total fund	Iraising :	expens	ses (Pa	art IX, c	calumr	n (D), li	ne 25	5) 🏲 _				噩.	- L		7 . T	至	.	- V V	
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3	22	Net assets					et line :	21 from	n lime	20	•	• •	• •	-			281	_			9,243
P	art II	Signatu									<u>.:-</u> .	<u></u>		ا			37 <u>,141</u>			607	7 <u>,657</u>
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Form 95	10 (2018)
Part	
	Check If Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	To improve the quality of education for children, youth, and young educe facing emotional, social and behavioral challenges, and to
	'encourage the healthy functioning of their familles
2	Did the organization undertake any significant program services during the year which were not listed on the:
	prior Form 990 or 990-EZ?
· <u>~</u> -	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	LIES END
4	H "Yes," describe, these changes on Schedule O.
•	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
42	(Codo: \\Frances & 787 (739 Including impairs of & \\Frances \\ \Frances \\ \F
40	(Code:) (Expenses \$ 747,029 including grants of \$) (Revenue \$ 878,444) To improve the quality of education for children, youth, and young adults facing emotional, social, and behaviorial challenges and to
	encourage the healthy functioning of their families.
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46	(Code:) (Expenses \$ Including grants of \$) (Revenue \$)

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	1 100 to 10 10 10 10 10 10 10 10 10 10 10 10 10
4c	(Code:) (Expenses \$ Including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
-14	(Expenses \$ including grants of \$) (Revenue \$
4a	Total program service expenses
	000

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Fann 990 (2016)

r eu t	CHARLEST REQUIRED SCHEWINGS			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see Instructions)?	2		1
3	Did the organization engage in direct or Indirect political compaign activities on behalf of or in opposition to condidates for public office? If "Yes," complete Schedule C, Part I.	3		1
4	Section 501(c)(3) organizations: Old the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax.year? if "Yes," complete Schedule C, Part II	4		,
-5_	-is-the-organization-a-section-501(c)(4),-601(c)(5),- or 501(c)(6)-organization-that-receives membership dues; assessments, or similar amounts as defined in Revenue Procedure 98-197. If "Yes," complete Schedule C, Pert III			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors:	-	-	 •
٠,	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yas," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space. The environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		/
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule O. Part III	8.		· /
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	۳	┢─	
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, of debt regottation services? If "Yes," complete Schedule D, Part IV	9.		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		7
11	If the organization's answer to any of the following questions is "Yes." then complete Schedule D, Parts VI. VIII, VIII, IX, or X as applicable.	3		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes;" complete Schedule D, Part VI	113	,	35,555
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII		.	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 187 if "Yes," complete Schedule D, Part VIII	11b		<i>y</i>
đ	Did the organization report an amount for other assets in Part X. fine 15 that is 5% or more of its total assets	116		√
8	Did the organization report an amount for other liabilities in Part X, line 257 if "Yes," complete Schedule D, Part X	11d	-	1
1.	Old the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1,0		-
	the organization's liability for uncertain tax positions under FRN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		1
1 2 e	Did the organization obtain separate, independent audited financial statements for the tax year? (f "Yes," complete Schedule D. Parts XI and XII	126		/
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? if "Yes," and if the organization enswered "No" to line 12s, then completing Schedule D, Paris XI and XII is optional	126		>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u></u>
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or eggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	146		í
15	Did the organization report on Part IX, column IA), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule'F, Parts II and IV	15		-
ie	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate-grants or other essistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<u>·</u> ✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part-IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see matructions)	17	\dashv	<u> </u>
8	Did the organization report more than \$15,000 total of fundrelsing event-gross income and contributions on Part VIII. lines 1c and 8a? If "Yes," complete Schedule G. Part II.		_	<u> </u>
<u>B</u> .	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII. line 9a? If "Yes," complete Schedule G, Part III	18	7	
ЭО в.	Did the organization operate one or more hospital facilities? If "Yes." complete Schedule H.	19 20a	-+	/
þ	If "Yes" to tine 20a, did the organization attach a copy of its audited financial statements to this return?	20b		* .
?1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part OC column (A), line 1? If "Yes," complete Schedule I, Parts I and II			
	compens government on Part of column (vg, line 1 ' ii Tes, Complete Schedule I, Parts I and II	21	905	<u>/</u>
		rom	990	K714)

Fum	990 (यम ६)			0
Pa	Checklist of Required Schedules (continued)			Page 4
			Yes	No
22	Did the organization report more than \$5,000 of gramts or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes" to Part VII. Section A, hine 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes;" complete Schedule J.	23		1
2Az	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," enswer lines 24b.			
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary derived exception?	24a 24b	+	7
•	Oid the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	240	_	,
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		17
250	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Old the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complète Schedule L. Part I	25a	 	/
	le the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I.	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current, or former officers, directors, trustees, key amployees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L. Part II	26		/
27	Old the organization provide a grant or other assistance to an orlicer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		·
28⁺ a	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV	28ė 28b	-	√ '_
	An entity of which a current or former officer, director, trustee, or key employee-(or a tamily member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28¢		1
¹ 29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures; or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		1
31	Did the organization liquidate, terminate, or dissolve and cause operations? If "Yes," complete Schedule N. Part I	30		/
32	Old the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes."	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 // "Yes," complete Schedule R. Part I	33		<u></u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II. III. or IV, and Part V, line 1	34.		<u>·</u> ✓
35a	Did the organization have a controlled entity within the masning of section 512(b)(13)?	35a		<u>√</u>
38	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		J.
37	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36		✓
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income (as purposes? If "Yes," complete Schedule R. Part VI	37		<u> </u>
38 55-0	Uid the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 files are required to complete Schedule O.	36	/	
Part		•		
	Check if Schedule O contains a response or note to any line in this Part V	<u>. , </u>		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- If not applicable	<u> </u>	Yee	No
Þ	Enter the number of Forms W-20 included in line to Enter -0, if not applicable			7
•	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		
			990	2010

	50 (ZO18)			Page
Part	Y Statements Regarding Other IRS Filings and Tax Compliance (continued).			
	Some the mission of contains and district to Fermi later with the course	(marka	Yes	No
2a	Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax			
	Statements, filled for the calandar year ending with or within the year covered by this return. [2a] If at least one is reported on line 2a, did the organization file all required legeral employment tax returns?		File	
	Note. If the sum of times 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	in a	7
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		7
40	At any time during the calender year, did the organization have an interest in; or a signature or other authomy over,	"	\vdash	├~
	e financial account in a foreign country (such as a bank account, securities account, or other financial eccount)?	-l-45-	<u> </u>	
þ	If "Yes," enter the name of the foreign country:		350	
	See Instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			逐
5a	Was the organization a party to a prohibited tax shetter transaction at any time during the tax year?	5a		[V.
b	Did any taxable party motify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If Yes' to line 5a or 5b, did the organization file Form 8868-T?	5c		1
6.8	Does the organization have ennual gross receipts that are normally greater than \$100,000, and did the	l .,	ŀ	Ι.
ь	organization sollect any contributions that were not tax deductible as charitable contributions?. If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a	<u> </u>	<u> </u>
U	gifts were not tax deductible?		ľ	
7	Organizations that may receive deductible contributions under section 170(c).	_6b 3-37€	<u> </u>	1935
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		22	
•	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	-	7
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			<u> </u>
	required to file Form 82827	7c		1
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
8	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70		>
Ţ.	Old the organization, during the year, pay premiums, directly or indirectly on a personal benefit contract?	71		Y
g h	If the organization received a contribution of qualified intellectual property, did the organization life Form 8889 as required?	7g		.٧
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, old the organization file a Form 1098-C?	7h	278.22	√
۰	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	8	ar see	32 1
'ai	Old the sponsoring organization make any taxable distributions under section 49667	9a	4.000	120€.5€ √
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:		2:50	365.55
a	Inflication fees and capital contributions included on Part VIII, 8no 12			
ь	Gross receipts, included on Form 980, Part VIII, line 12, for public use of club facilities 106		3.5	
11	Section 601(c)(12) organizations. Enter:			
Ð,	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			77
12a:	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fleu of Form 1041?	122	- C	
Þ	If "Yes," enter the amount of tex-exempt interest received or accrued during the year , [12b]	22	iart.	* *****
13	Section 601(c)(29) qualified nonprofit health insurance besuers:			7.7
8	Is the organization ildensed to issue qualified health plans in more than one state?	13a		7
	Note. See the Instructions for additional information the organization must report on Schedule O.	100	-32	988
b	Enter the amount of reserves the organization is required to maintain by the states in which			300
	the organization is licensed to issue qualified health plans		28	
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	I	
15	Is the organization subject to the section 4960 tex on payment(s) of more than \$1,000,000 in remuneration or		Ì	_
	excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		√
18	Is the organization an educational institution subject to the section 4958 axcise tax on net investment income?	22		<u> </u>
	Il "Yes," complete Form 4720, Schedule Q,	16	1	√
		* 	990	NO.5

Part		, and	.for
	response to fine 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See in	struc
<u> </u>	Check if Scheduls O contains a response or note to any line in this Part VI	• •	:-
Sect	ion A. Governing Body and Management		_
44	Enter the number of voting members of the governing body at the end of the tax year 1a 1;	- T	Yes
10	Enter the number of voting members of the governing body at the end of the tax year. 18 1: If there are material differences in voting rights among members of the governing body, or	2	
	If the governing body delegated broad authority to an executive committee or similar		
	committee, explain in Schedule O.		篖
			壓
 p	Enter the number of voting members included in line 1a, above, who are independent 1b 1	4	握
2	Did any officer, director, trustee, or key employee have a family retailonship or a business relationship with any other officer, director, trustee, or key employee?	2.	
.3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	
4'	Did the organization make any significant changes to fis governing documents since the prior Form 990 was filed?	4	
5	Did the diganization become aware during the year of a significant diversion of the organization's assets?	5.	
ß	Did-the organization have members or stockholders?	8	
·7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	73	
Ď	Are any governance decisions of the organization reserved to (or subject to approval by) mambers, stockholders, or persons other than the governing body?	7b	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		1
-	the year by the following:	屬	
. 4	The governing body?	8a	1
b	Each committee with authority to act on behelf of the governing body?	8ь	7
8	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		Ť
	the organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9	ŀ
Sect	ion B: Policies (This Section B requests information about policies not required by the intérnal Rever	τυ ά Ç	ode
			Yes
10a	Did the organization have local chapters; branches, or affiliates?	10a	
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	105	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	118	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990	验	
12a	Did the organization have a written conflict of Interest polloy? If "No," go to line 13	128	
:Ъ	Were officers, directors, or trustees, and key employees required to discuss annually interpels that could give rise to conflicts?	12b	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	
13	Did the organization have a written whistleblower policy?	13	
14	Did the organization have a written document retention and destruction policy?	14	H
15 ⁻	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the defiberation and decision?		
•3	The organization's CEO, Executive Director, or ldp management official	153	
ь	Other officers or key employees of the organization	15b	\vdash
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions).	KEX.	3.2
188	Did the organization invest in, complete assets to, or participate in a joint venture or similar arrangement with a taxable annity during the year?	18a	
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	160	
-	on C. Disclosure	1.00	<u> </u>
	on o. Disgrosure		
Secti	List the states with which a copy of this Form 990 is required to be filed Nemucky Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-	-,:- r (Sec	tion
Secti 17	List the states with which a copy of this Form 990 is required to be filed ► Kernucky Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1 (3)s only) available for public inspection, indicate how you made these available. Check all that apply.	 r (Sec	tion
Secti 17	List the states with which a copy of this Form 990 is required to be filed ▶ Kertucky Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1 (3)s only) available for public inspection, indicate how you made these available. Check all that apply. □ Own wabsite □ Another's website ☑ Upon request □ Other (explain it Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inter-	·	
Secti 17 18	List the states with which a copy of this Form 990 is required to be filled ► Kertucky Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable); 990, and 990-1 (3)s only) available for public inspection, indicate how you made these available. Check all that apply. □ Own wabsite □ Another's website ☑ Upon request □ Other (explain it Schedute O)	erest (Oolic

Form 990 (201)	9)										Page
Part VII	Compensation of Officers, Dir	ectors, T	ruste	283	. K	ev	Emp	love	es. Highest	Compensated	l Emplimes and
	Independent Contractors										empojoos, om
	Check if Schedule O contains a n	esponse d	r note	10	an	y lin	e in l	this	Part VII		
Section A.	Officers, Directors, Trustees, Key	Employe	es, a	td f	۲igi	1681	Con	edi	nsated Emida	yees	
1a Complet	e this table for all persons require	d to be as	ted. I	₹ e p	ort	Can	преля	satk	on for the pale	ndar year endin	g with or within th
organization	n's tax year.										
• List all	of the organization's current office	ere, directo	us, tr	ətau	es	(wh	ether	ind	lividuals or org	anizationa), rega	rdiess of amount o
	on, Enter -0- in columns (D), (E), and										
ile tell •:	of the organization's current key en	nployees, r	f алу.	Sei	e in	stru	ctlon:	s for	r definition of "	key employee."	
• List th	o organization's live current highes	SLCompart	sated	.em	plo	yee:	s_(att	18f-l	than an officer	, director-truste	e-or-kov-emploves
who receive	ed reportable compensation (Box 5	of Form	W-2	and	Vor	Box	k 7 o	f Fo	om 1099-MIS	C) of more than	\$100,000 from th
	and any related organizations.										
FIND ODD A	of the organization's former offic	ers, key e	mploy	/ees	3, a	nd I	highe	et c	compensated of	mployees who	roceived more that
וט טטט,טטו פ	reportable compensation from the	organizatio	n and	am	y ne	late	d org	ana	ัลโเดกธ.		
IB 1814 P	of the organization's former direct	tors or br	ætee 	3 (f)	12t 1	rece	ived.	ู้ไก้	the capacity a	s a former direc	tor or trustee at th
Liet nomen	n, more than \$10,000 of reportable c	umpensas	on iro	m t	N9 (orga	inizat	ION :	and any related	d organizations	
Compensate	s in the following order: individual orders individually and former such pers	vav vustee	s or	Œ	ect	ors;	IASI	liuti	onal trustees;	officers; key	employeos; highes
C) CHECK II	nls box if neither the organization no	rany relaxe	<u>y</u> org	Bm.			omp	<u>ane:</u>	ated any currer	n officer, directo	f. or trustee.
	***	1				ic) siden					1
	(A) Neme and Tito	(8)	(do r	not c	heck	moi	e than	ons	(d)	(€)	(P)
	AND UPP	yours bea					is bol		Reportable	Reportable compensation from	Estimated amount at
		WORK (IIS) 61)		~ ~	-	~~~				batater	other
		referent	3	🖁	One	\$	Arigher employs	Formo	Une Organization	Organizations (W-2/1099-MISO)	compensation from the
				1	{ 3	١į	185	4	W-2/1098-MISC)		organtzadon
		below diotted	15	batibalbanel lyustee		Koy employee	🍹				and retailed
			, tri 1800	5	l	1°	§	l	{		organizations
_			1	=	İ	1	as patractions			}	
				†	T	T		⇈	<u>† </u>		
(1) Carol V	I. Cácil	55]	Į.	ł		İ	l			
Executive Di	rector		<u> </u>	L.	1				54,586	l c	
(2) Maggie	Krueger	15 .	'-	ľ				П			
Board Chair			✓	L	1	L		L	J0	o	
(3) Karen		5	1								
Board Vice C			1	<u> </u>	1	L		L	0		
(4) Pereny :		2	l.	ŀ	١.	} ,		ł			
Board Treasu			1	ļ	~	匚		L	0		
(5) Lens M		Z	,	Ι.	,	}					
Momber-at-L2 (6) Majteso			-	\vdash	ľ	┝-	-	├			
Board Secret	44 - 1444 ppss 2444 - 1 ppss - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		/		1			ł			
(7) Wanda		1	<u> </u>	Ш	۳	-		-	0		
Director	Ol Bright		/					l	_i		
(8) Yorld Si	wilz		•	Н	-	Н				O O	
Director	14116	1	1					1			
(9) Eva Lan	nhert	1	•	\dashv	-	\vdash	-	Н			
Director			1							J	
(10) Lateny	Ford	,	\dashv	\dashv	-	⊢⊢		\vdash	0	9	0
Director			1						اً ا	_	
(11) Tyter Ha	Inter	1	Ť		Н			\vdash	G	9	0
Director			1	l					d	ٳ	_
(12) Calyoni	Radford			一	\dashv	\vdash		\vdash	-	9	0
neroctor		+		-						i	

Form 990 (2018)

	90 (2018) VII Section A. Officers, Directors, Trus	teesKev E	mplo	VGG	9. R	nd i	tícha	est Ć	Companyated F	imülasası (cor	Page 8
-	(A) Namej shd lide	(B) Average Incurs per	(do r bax, affic	vot ct UPVez or auv	Pos Posk Posk Sa pe	C) Eton meon		J-ģty oùto	(D) Reportable componention	(E) Reportable compansation for	(F) Estimated in emount of
		hours for related below detect	or direct	Institutional truste	Officer	Kay employee	Highost compense employee	Louber,	trom the organization (W-2/1099-ARSC)	reknéd organizationa (W-2/1099-MISC	other companization and related organization and related organizations
(16)			_	8	L		<u>.</u>	-			
(18)			-		-	-		ŀ	<u> </u>		
(17)			-	-	_			\vdash			
(18)	1,10000000			-	<u> </u>						
			-	\vdash	\vdash		_	-			
(20)			_	\vdash		-		_			-
(21)				\vdash	~			\vdash			-
(22)										· · · · · · · · · · · · · · · · · · ·	
123					-						
(24)	·										
(25)				Н							
1b c	Sub-total . Total from continuation sheets to Part Yotal (add lines 1b and 1c) .	VII. Section	AΛ					★ ★ 	54,596		
2	Total number of individuate (including but reportable compensation from the organization)	not limited	to th	050	list	ed a	bove		54,596 no received mo o	re than \$100,0	000 of
3	Did the organization list any fermer off employee on line 1a? If "Yes," complete 5	fisher, direct	ior, o	r tin	ūste indi	e, I	key e	mp		est compensa	ted 3
4	For any individual listed on line 1a. is the organization and related organizations individual	sum of reg	ortat	ale c	imo:	рел	satio	n ar	nd other comp	enseilan from edule. J for si	
5.	Did any person listed on line 1a receive of for services rendered to the organization?	racense co	mpor	isati ele S	ion : Sch	ron edu.	n any <i>le J le</i>	Unr SV Si	elated organiza uch person	ation or indlyid	
Section	m B. Independent Contractors										
4	Complete this table for your five highest of compensation from the organization. Rep year.	ompensate ort.comper	nd Ind Insatio	lepe n fo	nde r th	nt.c	ontra Jenda	icto ar ye	rs that received ear ending with	or within the	i00,000 of: organizátion's tax
	(A) Abbs acoreaud brus errein	e s				_			(8) Description of se	Maes	(C) - Compensation
					~						
		, , , , , ,			_						
2	Total number of independent contractor	s (including	g but	no	t lin	nite	ed to	the	ose listed above	re) who	
	received more than \$100,000 of compensa	MOTHOR I	ie org	ani	auc	an ≱	· 				Form 990 (2018)

	.	Statement of Rev					_		
				rės		O Any lime in this Total revenue	Related or exempt function revenue	lingelated business tayonas	(D) Revenue excluded from tax under acctions 612-514
and Other Sentlar Amounts	18	Federated campaigns	s ,]	16			36		
ğ	p	Membership dues .		<u>1b</u>					
₹	C	Fundralsing events,		10	5,033				
흵	đ	Related organizations	9 . [<u>1d</u>					
중	€	_Government grants (coi All other contributions, g	ninornousi'''	_10_	878,444			LESS THE STATE OF	
칠	•	sug Equipm, supproupe unt nuc		11	05~				
2	g	Moncash contributions focius			03,277				
E.	h	Total Add lines 1a-1				946,764			
			•		Business Codo				
r/ogram service navenue	Za			=.			The state of the s		
2	ь			~~.					1
3	à	***************************************	······································						
8	d								
ā	e	all the second	 						
3	Ţ	All other program ser		₹.	L		la ver		
+	<u> </u>	Total. Add lines 2a-2 Investment' Income	7'	3 	nnda letavisti	<u> </u>	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
- 1	3	and other similar amo	mutej mutej	NAKON	arkos, imarest			ŀ	
1	4	Income from investmen		· mih-	and arassasts b	304	30		
	S	Royalbes	I OT LEAK-BARRIT	thr Or	and proceeds P		 -	 	
-1	•	. , .	(a) Reed	╌	(i) Personal				
ı	6a	Gross rents	,						
-	b.	Less. rental expenses							
1		Rental Income or (loss)							
1	·ď	Net rental income or (loss)			- Carrie Carrier and		A COLUMN TO STATE OF THE A STATE OF	A STATE OF THE STA
	Źв	Gross enjoyed from sales of	(D Securitie	\$	(i) Other	na di dan da		3	
1		assets object than inventory					********		
-	Ъ	Less cost or other basis							
1		and sales exponses	 						
1	Č	Gain or (loss)	L.:					SURFE TO THE	
- {	ď	Net gain or (loss) .		٠,	 •		Village Bald obligations		
<u>.</u>	Ω~	Green lecome to	o dedicio						7
	ud	Gross Income from fur events (not including \$	urtura giud	ı					HAVE TO SERVICE
		of contributions reporte	ed on line 16	·					
		See Part N, line 18		٠ 🌡					
	b	Less: direct expenses		Б	-				
,	.0.	Net income or (loss) to		ים מחוו	events >			经济的	The state of the s
		Gross income from ga							
		See Part IV, Ilne 19		а					
-		Less direct expenses		b[
		Net income or (loss) fi			rities 🕨				L
1	10a	Gross sales of in-		- 1					
	_	returns and allowance	_	ā					
		Less; cost of goods so							
-	G	Net income or (toss)-fr Miscellaneous Re		inve		ANGRES SE			
-	115	terensianeous Re	PVB/No		Butiness Code				
- '	11a 6		***************************************	· -					
	c	ب و سامين يې پيم و سخت سر ليفوه د بت	<u>,:</u>	· }					
	d.	'All other revenue .		<u>-</u>		 -		 -	
- 1	•	Total. Add lines 11a-1		L			iki kari		Paging California
- 1							الأحدث المرسورة والمساحدة		

OC!	on 501(0)(3) and 501(c)(4) organizations must con	mpiete ali columnis. A	Il other organization	is must complete a	olumn (A).
	Check If Schedule O contains a respon	nse or note to any bi	ne in this Part IX		• • • •
)0 m (b); 9:	ot include amounts reported on lines 65, 75, b, and 105 of Part VIII.	Total expenses	(B) Program service expanses	(C) . Management and general oxporses	Fundraging Superiors
1	Grants and other sessistence to domestic organizations				
2	and domestic governments. See Part IV, hee 21				
2	Grants and other assistance to domestic individuals. See Part. IV, line 22	.89,262	94 753		
3	Grants and other assistance to loreign				Zal Cara Wales
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Senefits paid to or for mambers	<u> </u>			4
5	Compensation of current officers, directors,			Carrie Constitution of the	
	trustees, and key amployees	54.598	53,286	• 344	l
8	Compensation not included above, to disqualified	34,338	34,486	1.310	 -
	persons dascribed under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	207 000			
B	Pension plan accruals and contributions (include	207,968	202,917	4,991	
	section 401(k) and 403(b) employer contributions)	}			
9	Other employee benefits	29,007	29,007		
10	Payrol taxes	18,975	78,494	-461	
11	Fees for services (non-employees)				
а	Management				
Ь	Legal , , , ,				
C	Accounting				
đ	Lobbying				
é	Professional fundraising services. See Part IV. line 17				
1	Investment management fees		``		
8	Other. Of line 11g amount expects 10% of time 25, column (A) amount, list line 11g expenses on Schedule Q.)	27,195	26, 179	2,016	
12	Advertising and promotion	34,584	33.524	1,080	
13	Office expenses	59,976	54,027	5,949	
14	Information technology				
15	Royalties				
16	Occupancy	17,704	17,704	1	
17 18	Travel	76,957	65,026	13,931	
· d	Payments of travel or entertainment expenses for any federal, state, or local public officials				
15	Conferences, conventions, and meetings	 			
20	Interest				
אָל	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,728	 -	1,729	
ಜ	Insurance	7:59	·	3,749	
24	Other expenses Itemize expenses not covered				And the second
	above (List miscellaneous expenses in fine 24e, if				
	line 24s amount-exceeds 10% of line 25, column				
	(A) amount, list line 24g expenses on Schedule OJ				
8	Payroli Fees	1,381	1,386	<u>(5)</u>	
b	Miscellaneous	2,523	584	1,939	-
C	Reconciliation Discrepencies	26		29	
d	Training	100, 195	97,572	2,622	
e.	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	785,060	747;029	38,051	
26	Joint costs. Correlete this line only if the organization reported in octumn (B) form costs from a combined educational campaign and fundraising solicitation. Chack here				

Pa	<u>rt X</u>	Balance Sheet				
		Check if Schedule O contains a response or	note to any line in this	Part X		[
				(A) Beginning of year		(B) End of year
1	1.	Cash-non-interest-bearing		408,093	1.	671,2
1	2.	Savings and temporary cash investments		159,085	2	187,7
1	3.	Piedges and grants recolvable, net	. 		3.	
1	4	Accounts receivable net			4	
ı	5	Loans and other receivables from current and to	rmer officers, director	8. 1997		
╬		<u>trustees. key employees, and highest cor</u> Complete Part II of Schedule L	npensated_employee	9	5	
ı	€.	Loans and other receivables from other disqualified perso			627	Control of the Contro
ı	Q.	4958(TX1)), persons described in section 4958(c)(3)(B), and	ue fez genusa nudes séch	Ull being process of the process of		
ı		sponsoring organizations of section 501(c)(9) volunti	uv euspuvasa, pesegasi recuminatash ambioseta si		搪瓷	
1		organizations (see instructions). Complete Part II of Sched	ide i		18.	
	7	Notes and loans receivable, net			7	
·	8	Inventories for sale or use			8	
ł	9	Prepaid expenses and deferred charges	· · · · · · · · ·		9	
1	_	Land, buildings, and equipment: cost or	' ' ₁	Company of the second	3	
1		- market of the contract of th	10a 54.	489		
ł	ь	·			10c	
Ţ	71	Tananama and a district and a distri	40/	0,246	111	7.8
	12	Investments-other securities. See Pari IV, line 11			12	 -
ŀ	13	Investments-program-related. See Part IV, line 1			73	
1	14	Intangible assets			14	
1	15	An			15	
1	16	Total assets. Add lines 1 through 15 (must equal		587,424		-050 0
1	17	Accounts payable and accrued expenses		293	_	- 866,8
1	18	Grants payable		203	1B	59,2
	19	Deferred revenue		1	19	-
	20	Yax-exempt bond llabilities			20	
	21	Escrow or custodial account liability. Complete Pr	et IV of Schedule D		21	
1:	22	Loans and other payables to current and for	mer officers, director	s. STREET	315	
		trustees, key employees, highest compens	ated employees, an	o Cartina	7 2.	
		disqualified persons. Complete Part II of Schedule		M ETHNESEN STORY	22	
1:	23	Secured mortgages and notes payable to unrelate	ed third parties		23	
] :	24	Unsecured notes and loans payable to unrelated t	hird parties		24	
:	25	Other Babilities (including federal Income tax., pa	ayables to related thir	d		
ľ		parties, and other liabilities not included on lines to Schedule O	7-24).:Complete Part	X }		ť
L					25	
ť	28	Total Habilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958),		283		59,24
l		complete lines 27 through 29, and lines 33 and:			1	
į,	27				2.9160	
1		Unrestricted net assets Temporarily restricted net assets		553,376		605,69
1 .	28 29			13,763	_	1,76
11	23	Organizations that do not follow SFAB 117 (ASC 958		_ adamentario	29	71/10/10/10/10
ı		complete lines 30 through 34.	Lcheck hore ► 📋 Br	10	$\mathcal{M}_{\mathcal{L}}$	
١,	30				V) T	
	-	Capital stock or trust principal, or current funds.			30	
1;	31 22	Paid-in or capital surplus, or land, building, or equ		ļ	31	
	32 33	Retained earnings; endowment, accumulated inco	me, or other funds .		32	
		Total net assets or fund balances.		567,141	_	65
1	34	Total liabilities and net assets/fund balances	<u> </u>	\$67,424	34	866.90 Form 990 (201

Form 850 (2015)			Page 12
Part XI Reconciliation of Net Assets			
Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	·	🗆
1 Total revenue (must equal Part VIII, column (A), line 12)	1		947,058
2 Total expenses (must equal Part IX, column (A), line 25)	2		785,680
3 Revenue less expenses. Subtract line 2 from line 1	3		167,978
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4		567,141
5 Net unrealized gains (losses) on Investments	5		
6 Donated services and use of facilities	8		
7 Investment expenses	7		
B Prior period adjustments	_B		78, 538
9 Other changes in net assets or fund balances (explain in Schedule O)	9		
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
33, oolumn (B))	10		807,657
Patrixity Financial Statements and Reporting			
Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		🗸
1 Accounting method used to prepare the Form 990: Cash Accided Other		() ()	res No
Accounting method used to prepare the Form 990: Cash Account Cother.			9 - 3
If the organization changed its method of accounting from a prior year or checked "Other," ex- Schedule O.	plain in		
2a Were the organization's financial statements compiled or reviewed by an Independent accountant?		2014	
K You " should a bety bislam to Indicate when the Computer or reviewed by an imperpendicular accountant?		2a	· · · · · · · · · · · · · · · · · · ·
If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both	nied or		
Separate basis Consolidated basis Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant?			
	• • •	26	V
If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	on a		
Separate basis Consolidated basis Both consolidated and separate basis			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or			
of the audit, review, or compilation of its financial statements and selection of an independent account	ersight		- 1
If the organization changed either its oversight process or selection process during the tax year, ex	ncanty	2€ 	32-17-17-17-17-17-17-17-17-17-17-17-17-17-
Schedule O.	bibriu iu		
		3.64	建建
3a As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-1337.	torth in	33	/
b If "Yes," did the organization undergo the required audit or audits? If the organization did not under	min the	\ 	<u></u>
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such as	adits.	3ь	1
			90 conta

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete I the organization is a residen SD1(c)(E) organization or a section 4947(s)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 980-EZ.

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

OMB No. 1845-0047

2018

Open to Public Inspection

	or are miterareador						Employer Identification	u unitable.
	ucky Partnerstep	for Families and C	hildren, Inc.				60-13	77268
Par	Reason	o for Public Ch	arity Status (Al	organizations mus	t comple	te this p	part.) See instruction	ons,
The:	organization is n	ot a private found	lation because it	is: (For lines 1-through	h 12, che	ck only o	ue pox').	\sim
1	Li Alchurch, c	onvention of chur	ches, or associat	ion of churches descr	ribed in s	ection 17	^r 0(b)(1)(A)(i).	\mathcal{M}
2_	-⊢i v school da	scribed-in-sectio	n-170(b)(1)(A)(ii):	-(Altach-Schedule E-(I	Form-990	01-99 0-€	23.)	————— V `
3	A medical re	ssearch organizat ame, city, and sta	lon operated in c	ganization described onjunction with a hos	pital desi	mbed in	postion 170(b)(1)(A)	
\$	An organiza	ition operated for V(b)(1)(A)(iv). (Cor	the benefit of a	collège or university				tal unit described in
8	An organiza	tate, or local gove tion that normally a section 170(b){	receives a subs	mentel unit describer stantial part of its sup te Part II.)	d in secti oport from	on 170(b n a gover	X(1)(A)(v). rumental unit or from	n ,the general, public
8	- ☐ A communi	y thust described	in section 170(b)(1)(A)(vi): (Complete	Part IIJ			
,9	An agricultu or university: university:	iral research orga vor a non-land-gr	aut college of ag	d in section 170(b)(1) rigulture (see instructi	(A)(IX) or one). Enti	er the nam	πο, city, and state o	f the college or
10	receipts from	n activities (elate: n·oross investme:	d to its exempt ft of income and un	re than 3375% of its s anctions—subject to c irelated business take 175. See section 609(ke nistre: rooni eldi	ceplions, ne llacs s	and (2) no more that	n 331,494 at the
111	An organiza	tion organized an	d operated exclu	sively to lest for publi	c safety:	Séé sect	ion 509(a)(4).	
.12	☐ An organiza of one or m	tion örganized an ore publicly supp	d operated exclusionated ordenization	sively for the benefit of one described in sect	of, to perf ion 509f	ert mg	unctions of; or to ca	e section 509(a)(3).
_	Creack are a	OANINNES (23 U)	oogn 120 mat de	scribes the type of su	pporting (aganizali	on and-complete line	≈ 120, 121, and 12g.
a	the supp	ported organizatio	n(s) the power to	d, supervised, or cont regularly appoint or e eta Part IV, Sections	elect a ma	to vinou	rted organization(s). The directors or trust	typically by giving
Ь	contròl.c	# mänagement of	i the éupporting d	sed or controlled in co organization vested in IV, Sections A and C	the same	with its s persons	supported organization that control or man	ion(s), by having age the supported
C	☐ Type III	functionally inte	greted. A súppoi	ring.organization ope ons) You must comp	rated in c	omectio:	n with, and function.	ally integrated with.
d	Type Ifi that is no	non-functionally of functionally into	integrated. A su grated. The orga	upporting organizaţion urization generally mu complete Part IV, Sec	operate st satisfy	ngoo ni t Idhasib a	ection with its supportion requirement an	orted organization(s) od an attentiveness
е	☐ Check th	is box if the orga	nization received	a written delerminati	on from f	e IRS th	at it is a Type I. Type	il, Type III
f	Enter the nim	ber of supported	yanamaanpaga Abba iir noileimic	tionally integrated sur	pporting-	organizat	ion.	
9				corted organization(s)		. : .		· · []
	A Name of support		W SOOK DIE ZODI	(A) Type of organization			· · · · · · · · · · · · · · · · · · ·	
	M untive pi'enhim	o o o garazana	IN BILL	(described on lipes 1-30) above (see instructions))	representation	igerécation a governing nent?	paintedors) (4) Support (See	preparations) other enabout (164 (164)
					Ven	No		
ĺΝ							-	
(B)								_
(C)								
(D)								
(E)		•					·	
Total						24/5		
For Pa	perwork Reduct	ion Act Notice, see	the Instructions f	or Foim 890 or 990-EZ.		No 11285	F Schodule A (Fo	rm 839 oz 990-EZ) 2018

Schedu	le:A (Farm 990 or 990-ED 2018						Page 2
Part							
	(Complete only if you offected the						alify under
	Part III. If the organization falls to	o qualify unde	r the tests lis	ted below, pl	esse complè	te Part III.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(6) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and			-			-
	membership fees received. (Do not						
	include any "unusual-grante.")	1,317,547	942,996	800,923	1,241;534	945,754	5,349,754
2	Tax revenues levied for the	1,317,047	374,330	300,000	1/64 1/394	340,754	3,343,734
•	organization's benefit and either pald	1					
	to or expended on its behalf						
_	•	<u> </u>					
3	The value of services of facilities	1 }					
	furnished by a governmental unit to the	1 .					
	organization vithout charge						
4.	Total. Add lines 1 through 3.	1,317,547	842,996	900,923	1,241,534	946,764	5,349,754
5.	The portion of total contributions by					3-2-1907	
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount			2.2.2.2			
	shown on line 11, column (ຖື . , , , ,						
6	Public support. Subtract line 5 from line 4					3-1-A-1	5,349,754
Sect	on B. Total Support			Lane - 17. Paris 1 Carl	(a/F. +2) - 41 P. J. (1)		0,0,0,00
Calen	dar year (or fiscal year beginning in) >	'(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f)·Total
.7	Amounts from tine 4	1,317,547	942,996	800,923	1,241,534	946,754	6,349,754
8	Gross Income from interest, dividends,	1,0 11,0 11		000,020	327 17554	340,734	0,043,734
_	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	117	109	94	59		
9	Net Income from unrelated business	''1	703		. 38	304	
•	activities, whether or not the business	[
	Is regularly carried on	}	•				
10	Other Income. Do not Include gain or	<u> </u>					
•••	loss from the sale of capital assets						
	(Explain In-Part VI.)						
	· •		0		رو د جرید جور باید درجور	0	0
11							5,350,477
12	Gross receipts from related activities, etc.					12	
13	First five years, If the Form 990 is for U					ear as a sectio	n 501(c)(3)
<u> </u>	organization, check this box and stop he		· · · · ·	• • • •	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · • [
	on C. Computation of Public Suppor						
14	Public support percentage for 2018 (line			1, column (i))		14	99.99 %
15	Public support percentage from 2017 Sci	hedule A. Part I	l, ហេខ 14		:.: ::: <u> </u>	16	59 99 %
16a	33 n% support test-2019. If the organ						
	box and stop here. The organization qua						
ь	331/a% support test-2017. If the organi	ization did not (check a box o	n line 13 or 1,6:	a and line 15	s 331/a% or m	ore, check
	this box and stop here. The organization						
17a.	10%-facts-ond-circumstances test - 2	018. If the orga	mization did n	ot check a biox	on line 13, 16	ia; or 16b, and	line 14 is
	10% or more, and if the organization me	eets the "fácts:	and-circumsta	inces" test; ch	eck this box a	nd stop here.	Explain in
	Part VI how the organization meets the	fectsi-änd-circu	ımstances" te	st. The organia	ation qualifies	as a publicly	supported
	organization	<i>.</i> .					▶ □
ь	10%-facts-and-circumstances test-2						
_	15 is 10% or more, and if the organiza	tion meets the	Pacta-and-c	ira metances"	test check t	his hay and e	ton been
	Explain in Part VI how the organization of	neets the fact	a-and-cimme	dances" tëst 1	he cinemo ed	ย บแล ุงษร == eelKlarin ni	e nublishe
	supported organization					m dramines 83	e banicià
18.	Privete foundation, if the organization di	d and chart - t	nov on line 12	16n 16h 17-	or 17h about	1. ()	· · • 🗀
	instructions	o not midow a c	ov on and ig.	190, 100, 178,	a iru, piedi	rade noix aud :	. ► -
	Instructions		<u></u>	· · · · ·		adula A (Form R96	لنوا 💆 🐪
					Eak		

	Support Schedule for Organiz	ations Desc	ribed in Sect	on 509(a)(2)			
	(Complete only if you checked t	he box on lin	e 10 of Part I	or if the orga	nization falle	đ to qualify u	nder Part I
	If the organization fails to qualify	/ under the te	ests listed bël	low, please ci	omplete Part	[].)	
	lon A: Public Support						. /
	ider year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(4) 2017	(e).2018	(f) Total
1"	Gifts, grants, contributions, and membership fees	1					
2	received, (Do not include any "unusual grants.")	<u> </u>				/	<u> </u>
2	Gross receipts from admissions, merchantise sold or services performed, or facilities	1					
	fumished in any activity that is related to the	i					ł
-	_organization's lax-exempt purpose						
5 .,	Gross receipts from ectivities that are not en Unrelated trade or business under section 513		1				
4				-		/	ļ
4	Tax revenues levied for the organization's benefit and either paid to		ľ	1	1 /	ľ	
	or expended on its behalf	}	ļ	İ	/		
5	The value of services or facilities	}		ļ	 _		
3	furnished by a governmental unit to the	ł		1			
	Organization without charge]			/	ļ	
6.	•		 	 			
-	Amounts included on lines 1, 2, and 3,		 	 	/		
	received from disqualified persons	1	1	/		[
	Amounts included on lines, 2 and 3		 	 			
	received from other than disqualified	Ì	ì	/	}		
	persons that exceed the greater of \$5,000	1	}	/			i
	or 1% of the amount on line 13 for the year	ì	,	/			ļ.
c	Add lines 7a.and 7b		 	//		-	
8	Public support. (Subtract line 7c from				Marie Company		ļ.——
•	flige 6.)						
ecli	on B. Total Support	CO COLUMN STATES					<u> </u>
		(1000)		11222	(4) 2013	(-L2010	-
aren	wai yam (of tizesi yast daquuning (n) ▶	l (a) 2014	I (b)∕2015	1 Ic12016 J			I ID Tomi
9 9	dar year (or fiscal year beginning In) Amounts from line 6	(a) 2014	(b)/2015	(c) 2016	(d) 2017	(e) 2018	. (f) Total
ý	Amounts from line 6	(a) 2014	(b)/2015	(¢) 2016	[0] 2017	(e) 2018	. (f) Total
ý	Amounts from line 6 Gross income from laterost, dividends, payments received on securities fooms, rents,	(a) 2014	(b)/2015	_, (c) 2016	(0) 2017	(e) 2018	. (f) Total
9 Oa	Amounts from line 6 Gross income from laterost, dividends, payments received on securities fosts, rents, royalities, and income from similar sources.	(a) 2014	(6)/2015	(c) 2016	[0] 2017	(e) 2018	. (f) Total
9 Oa	Amounts from line 6 Gross income from laterest, dividends, payments received on securities foons, rents, royalities, and income from similar sources. Unrelated business taxable income fless	(a) 2014	(0)/2015	(E) 2016	(0) 2017	(e) 2018	. (f) Total
9 Oa	Amounts from line 6 Gross income from laterest, dividends, payments received on securities foons, rents, royalities, and income from similar sources. Unrelated business taxable income (tess section 511 taxes) from businessess.	(a) 2014	(0)/2015	(E) 2016	(a) 2017	(e) 2018	(f) Total
9i dôa b	Amounts from line 6 Gross income from laterost, dividends, payments received on securities fears, rents, royalities, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; appulred after June 30, 1975	(a) 2014	(6)/2015	(c) 2016	(a) 2017	(c) 201B	(f) Total
9i dôa b	Amounts from line 6 Gross income from laterest, dividends, payments received on securities foons, rents, royalities, and income from similar sources. Unrelated business taxable income (tess section 511 taxes) from businessess.	(a) 2014	(6)/2015	(c) 2016	(a) 2017	(c) 201B	(f) Total
ji ∫Ôa b	Amounts from line 6 Gross income from laterest, dividends, payments received on securities foans, rents, royalities, and income from similar sources. Unrelated business taxable income (less section S11 taxes) from businesses; exquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	(a) 2014	(b)/2015	(c) 2016	(a) 2017	(c) 201B	(f) Toral
9i dôa b	Amounts from line 6 Gross income from laterest, dividends, paymeths received on securities foons, rents, royalties, and income from similar sources. Unrelated business taxable income (tess section 511 taxes) from businessess acquired after June 30, 1975. Add lines 104 and 10b. Net income from unrelated business activities not included in line 10b, whether	(a) 2014	(b)/2015	(c) 2016	(a) 2017	(c) 201B	(f) Toral
j jóra b c	Amounts from line 6 Gross income from laterosi, dividends, payments received on securities foans, rents, royalities, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2014	(6)/2015	(c) 2016	(a) 2017	(c) 201B	(f) Toral
j jóra b c	Amounts from line 6 Gross income from laterest, dividends, payments received on securities foans, rents, royalties, and income from similar sources. Unrelated business taxable income (tess section 511 taxes) from businesses: exquired after June 30, 1975 Add lines 104 and 10b Net income from unrelated business activities not included in line 105, whether or not the business is regularly carried on Other income. Do not include gain or	(a) 2014	(6)/2015	(c) 2016	(a) 2017	(c) 201B	(f) Toral
ji ∫ûa b	Amounts from line 6 Gross income from laterest, dividends, payments received on securities fears, rents, royalities, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets.	(a) 2014	(b)/2015	(c) 2016	(a) 2017	(c) 201B	(f) Toral
b b c	Amounts from line 6 Gross income from laterest, dividends, payments received on securities foans, rents, royalities, and income from similar sources. Unrelated business taxable income (less section S11 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	(a) 2014	(6)/2015	(c) 2016	(a) 2017	(c) 201B	(f) Toral
j jóra b c	Amounts from line 6 Gross income from laterest, dividends, payments received on securities fears, rents, royalities, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11,	(a) 2014	(6)/2015	(c) 2016	(a) 2017	(e) 2018	(f) Toral
b c c 11	Amounts from line 6 Gross income from laterest, dividends, paymeths received on securities fears, rents, royaltles, and income from similar sources. Unrelated business taxable income (less section S11 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support, (Add lines 9, 10c, 11, and 12.)						
b b c 1	Amounts from line 6 Gross income from laterest, dividends, paymeths received on securities foans, rents, royalties, and income from similar sources. Unrelated business taxable income (tess section S11 taxes) from businesses: exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.)	e organization					
b c c c c c c c c c c c c c c c c c c c	Amounts from line 6 Gross income from laterost, dividends, payments received on securities foans, rents, royalities, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.) First-five years. If the Form 990 is for the organization, check this box and stop her	ne organization	's first, secon		or lifth tax yo	iar as a sectio	ri 501(c)(3)
b c 1	Amounts from line 6 Gross income from laterost, dividends, payments received on securities foans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support	ne organization	's first, second	d, third, faurth	or lifth tax yo	iar as a sectio	ri 501(c)(3)
b c 1	Amounts from line 6 Gross income from laterost, dividends, payments received on securities foans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part.VI.). Total support. (Add lines 9, 10c, 11, and 12.) First-five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support Public support percentage for 2018 (lines).	e organization	's first, second	d, third, faurth	or lifth tax yo	ar as a section	ni 501(c)(3) ▶·
b c 1 2 3 4 acti	Amounts from line 6 Gross income from laterost, dividends, payments received on securities foans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part.VI.). Total support. (Add lines 9, 10c, 11, and 12.) First-five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support Public support percentage for 2018 (line & Public support percentage from 2017 Sot	t Percentago, column (f), d	's first, second	d, third, faurth	or lifth tax yo	iar as a sectio	ri 501(c)(3) ▶·
b c 1	Amounts from line 6 Gross income from laterost, dividends, payments received on securities foans, rents, royaltles, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part.VI.). Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support Public support percentage for 2018 [line & Public support percentage from 2017 Sot on D. Computation of Investment Income.	t Percentago, column (1), deduie A, Part	's first, second	d, third, faurth	or lifth tax yo	ar as a section	n 501(c)(3)
b c 1 2 2 3 4 4 ection 7	Amounts from line 6 Gross income from laterost, dividends, payments received on securities foans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part.VI.). Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support Public support percentage for 2018 [line & Public support percentage from 2017 Sot on D. Computation of Investment income percentage for 2018 [line & Public support percentage from 2017 Sot on D. Computation of Investment income percentage for 2018 [line & Investment	t Percentago, column (1), deduie A, Particomo Perceina 10c, column	's first, second	d, third, faurth	or lifth tax yo	ar as a section	n 501(c)(3)
b c 1 2 2 3 4 4 action 7 6	Amounts from line 6 Gross income from laterosi, dividends, paymeths received on securities foans, rents, royaltles, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support Public support percentage for 2018 (line & Public support percentage from 2017 Sot on D. Computation of Investment in threstment income percentage for 2018 (investment income percentage for 2018 (investment income percentage for 2018)	t Percentagi column (f), d nedule A, Part come Percei ins 10c, colum Schedule A.	's first, second e vided by line 1 ill, line 15 itage in (1), divided b	d, third, faurth, 3, column (f)) y line 13; colum	or lifth tax yo	15 16 17 18	n 501(c)(3)
b c 1 2 3 4 4 2 2 1 7 6	Amounts from line 6 Gross income from laterost, dividends, paymeths received on securities foans, rents, royaltles, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support Public support percentage from 2017 Sot on D. Computation of Investment income percentage from 2017 31/2/4 support tests – 2018. If the organization income percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018.	t Percentagion Percei	's first, second e lyided by line 1 ill, line 15 itage of art, Ill, line 17 check the box	d, third, faurth, 3, column (f)) y line 13, colum	or lifth tax yo	15 16 17 18 193 on the 193 of	n 501(c)(3)
b c 1	Amounts from line 6 Gross income from laterost, dividends, payments received on securities foans, renta, royalties, and income from similar sources. Unrelated trustiness taxable income (less section 511 taxes) from trustinesses; acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part.VI.). Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support on C. Computation of Investment income percentage from 2017 Soin D. Computation of Investment income percentage from 2017 investment income percentage from 2018 (lines 13) As support tests—2018. If the organical income percentage from 2017 33'As support tests—2018. If the organical income percentage from 2017 is not more than 33'As, check this box:	t Percentagi Treside A, Part Come Percentagi Ine 10c, columna 10c, col	's first, second e livided by line 1 itting 15 intege or at the box The organization	d. third, faurth, 3. column (f)) y line 13, column on line 14, an	or lifth tax you mn (f)) d tine 15 is mi	15 16 17 18 proton than 33' or	6, and line
b c 1 2 3 4 4 2 2 1 7 6	Amounts from line 6 Gross income from laterost, dividends, paymeths received on securities foans, rents, royaltles, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses; exquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop has on C. Computation of Public Support Public support percentage from 2017 Sot on D. Computation of Investment income percentage from 2017 31/2/4 support tests – 2018. If the organization income percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018. If the organization of uncome percentage from 2017 33/2/4 support tests – 2018.	t Percentage To column (f), d To come Percent The 10c, column To chedule A. F Text and stop here, altern did not and stop here,	is first, second e livided by line 1 itting 15 interest in 17 check the box The organization seck a box on	d. third, faurth, 3. column (f)) y line 13, column (n) on line 14, an in qualifies as e line 14 or line 1	or lifth tax you mn (f)) d line 15 is mi publicly suppo	15 16 17 18 19 on than 93'47	6, and line

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Part IV	Supporting Organization	ľ	3

(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 12b 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.)

Saction A Al	Lineamina	Organizations
COULDIT M. MI		CATGAINIXARIONS

			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 of purpose, describe the designation if historic and continuing relationship, explain.	1		
2_	Did the organization heve 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).	- 7.2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," enswer (b) and (c) below.		躞	
b	Did the organization contirm 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.			
G	Do the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If "Yes," exclusion in Part VI what controls the organization put in place to ensure such use.	3é		
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	188	339
þ	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	Old 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," suplain 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)(8) purposes.			
5á	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).	4 Emilian a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organization document?		36	
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of crants or the provision of services or familities) to			
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 tamily 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).			
В	Did the organization make a toan to a disqual-fled person (as defined in section 4958) not described in fine 77 if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
	Was the organization controlled directly or indirectly at any time during the tax year by one or more 'disqualified persons as defined in section 4848 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	A 100 A		
	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
C	Did a disqualified person (as defined in line 8a), have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes, a provide detail in Part VI.	θc	E	
	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.	10e		
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.)		24	

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b c Section 2	Has the organization accepted a gift or contribution from any of the following persons?	113 11b 11c 2	Yes	
b c Section 2	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? A family member of a person described in (ā) above? 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. On B. Type I Supporting Organizations Did the directors, trustees, or membership of one or mere supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all bimes during the tex year? If "No," describe in Part VI how the supported organization(s) affectively 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 tex year. 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(s) that operated, supervised, or controlled the supporting organization(s) that operated, supervised, or controlled the supporting organization. Vi how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations. 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	11a 11b 11c	Yes	3
b c Section 2	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? A family member of a person described in (ā) above? 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. On B. Type I Supporting Organizations Did the directors, trustees, or membership of one or mere supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all bimes during the tex year? If "No," describe in Part VI how the supported organization(s) affectively 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 tex year. 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(s) that operated, supervised, or controlled the supporting organization(s) that operated, supervised, or controlled the supporting organization. Vi how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations. 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	11a 11b 11c	Yes	No
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	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			372
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	At members were at the application and endergoids, was applied in the 25ths first counciled of wellsubust			躢
Section	the supported organization(s).			25.3
	on D. All Type III Supporting Organizations	<u> </u>		
		,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year. (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 890 that was most recently filed as of the date of notification, and fluit coolers of the		25	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	-,(-,-1)	/19.5.E
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	27203	Fe C	i reside
	organization(s) or (ii) serving on the governing body of a supported dramization? If "No." explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	· water	ATT: -
3	By reason of the relationship described in (2), did the organization's supported organizations have a	1225	433	3
	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 groundation's		143	
	supported organizations played in this regard.	3	2462	- F-13-
Sectio	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the integral Part Test during the year (see I	nstau	tion	
à	The organization satisfied the Activities Test, Complete line 2 below.			·y•
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in:	dnycti	ons:
2 .	Activities Test. Answer (a) and (b) below.		Yes	
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1258	V (278)	45:35
	the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify		<u> </u>	器型
	those supported organizations and explain how these activities directly furthered their exempt purposes.	感	医肾	region of the second
4	how the organization was responsive to those supported organizations, and how the organization determined		53	置
1	that these activities constituted substantially all of its activities.	2 S	34V6	
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	377	8,325	Fee
- :	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	全级	30	***
Ì	reasons for the organization's position that its supported organization(s) would have engaged in these	遊園	正當	
	activales but for the organization's involvement.	鑩	22	1210
	Parent of Supported Organizations. Answer (a) and (b) below.	2b	أججير	-
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	图量		
	trustees of each of the supported organizations? Provide details in Part VI.	244	2.0	
		3a	754	
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organization in this regard.	35		

		Page 0
gar	ilzations	
g tr	ist on Nov. 20, 1970 (explai	n în Part VI). See.
1028	tions must complete Section	ns A through E.
,	(A) Prior Year	(B) Current Year (optional)
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	(A) Prior Year	(B) Current Year (optional)
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Schedule A (Form 990 or 930-EZ) 2016

Bahed	V4e ∧ (Form 990 or 990-EZ) 201¢			Page 7
Par	Type III Non-Functionally Integrated 509(a)	3) Supporting Organ	zations (continued)	¥8001
Sec	tion D—Distributions	-	- Latieris (continuos)	Current Year
1	Amounts paid to supported organizations to accomplish	AVAMENT BUILDONG		· · · · · · · · · · · · · · · · · · ·
2		earnt plumares of cuon	adad	
	organizations, in excess of income from activity	cubi berbriage or embi	nteo	j
3	Administrative expenses paid to accomplish exempt pur	poses of supported orga	nitations:	
4	Amounts paid to acquire exempt-use assets	Posses of occupantion bigs	31120110113	
5	Qualified set-aside amounts (prior IRS approval required)		
- 6	Other distributions (describe in Part VI). See instructions			
 ÿ	Yotal annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to white	ch the organization is re-		
	(provide details in Part VI). See instructions.	en nio al Radicampil 19 (4)	and and	ļ
9	Distributable amount for 2018 from Section C, line 6:			
10	Line 8 amount divided by line 9 amount			
Sect	lion E-Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdietributions Pre-2018	(iii) Dietributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 8			
2	Underdistributions, if any, for years prior to 2018		W. 3 (3) (1) H H H	
	(reasonable cause required - explain in Part VI). See.			
	instructions.			
3	Excess distributions carryover, if any, to 2018			
B	From 2013			
<u>b</u>	From 2014 ,		A STATE OF THE STATE OF	
<u>C</u>	From 2015			
	From 2016			
	From,2017			
	Total of lines 3a through e			
9_	Applied to underdistribulions of prior years			
<u> </u>	Applied to 2018 distributable amount			
<u> </u>	Carryover from 2013 not applied (see Instructions)			7227022627
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7:	×		
- 8				
	Applied to 2018 distributable amount			
<u> </u>	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018; if		•	
	any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VL See instructions.			
			220070072727000	
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	Expert detributions commerce 1990 Addises 4		THE RESERVE AND ADDRESS OF THE PARTY OF THE	····
•	Excess distributions carryover to 2018, Add lines 3j and 4c			
8	Breakdown of line 7:			
	Excess from 2014			The state of the s
<u> </u>	Excess from 2015		The state of the s	
	Excess from 2016			
- d	Excess from 2017			
- <u>e</u>	Excess from 2018			
	Consideration of the second	全体于中央	True Property Control	

Part VI	cm 000 of 980-E2 2018 Page I Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17s or 17b; Part
	Ill, 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 8. Also complete this part for any additional information. (See instructions.)
Part II, Line	10. Service income from workshops, conferences, and training seminars.

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SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete II the organization enswored "Yes" on Form 980, Part IV, line 6, 7, 8, 9, 10, 11s, 11s, 11s, 11d, (1s, 11f, 12a, or 12b. ► Attach to Form 890.

OM8 No 1545-0017 2018

Open to Public

Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of open space Preservation of open space Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the fax year. a Total number of conservation easements 2a Please of the Tax b Total acreage restricted by conservation easements 2b 0 Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation resements included in (c) ecquired after 7/25/06, and not on a historic structure listed in the National Register 3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during tax year > 4. Number of states where property subject to conservation easement is located > 5. Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the > 5. Staff and voluntaer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the > 6. Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the > 6. Open each conservation easement reported on line 2(d) above safisty the requirements of section 170(h)(4)(B)(i)		henik of the Themsury Revenue Service		Attach to Form 990. 1980 for instructions and the latest infor	mation.	Open to Public Inspection
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b Assets included in Form 990, Part X		Hevenue includ	led on Form 990, Part VIII, line 1	$(\boldsymbol{x},\boldsymbol{x},\boldsymbol{y},\boldsymbol{x},\boldsymbol{y},\boldsymbol{x},\boldsymbol{y},\boldsymbol{y},\boldsymbol{y},\boldsymbol{y},\boldsymbol{y},\boldsymbol{y},\boldsymbol{y},y$	🕨 🤻	<u></u>
For Peperson's Reduction Act Notice, see the Instructions for Form 990. Cal No. 52283D Schedule D. Form 990.	b	Assets included	In Form 990, Part X	<u> </u>	<u> </u>	

Schedulo D (Form 090) 2018

Cal No. 52283D

Par	20 D (Form 990) 2018									Page
		Collections of	Art, Histi	orical T	reasure	9, or 0	thër Similar <i>i</i>	Assets	(conti	nued
3	Using the organization's acquisition, collection dema (check all that apply)	: Eccession, and o	ther record	is, chec	k any of t	the follo	wing that are a	signific	ant us	e of i
B	Public exhibition		9 [] Loan	or exchar	ige prog	rams			
þ	Scholarly research			Other			,			
C	Preservation for future generation	13								
4	Provide a description of the organiza								rpose	in Pa
5	During the year, did the organization assets to be sold to raise funds rathe	r than to be maint	donations sined as pa	of ert, l art of the	historical Lorganiza	treasure Non's c	ts, or other ain otlection?	diar	-Y e s-	⊟ N
Pari	Escrow and Custodial Art	алдетents.								
	Complete if the organization 990, Part X. line 21.								on Fo	rno
la	included on Form 990, Part X?					utions o	r other assets		Yes	[7] N
þ	If "Yes," explain the arrangement in F	art XIII and compl	eta the foll	owing to	ible:		_	_		
								Amoun		
C	U U ,					10	:			
d.	Additions during the year				. .	10	4			
8	Distributions during the year					10	•			
1	Ending balance					11	r l			
2a	Did the organization include an amou	int on Form 890, P	art X, line	21. for e	SCTON OF C	ustodia	l account llabil	iv? \Box	Yes	Î N
ь	If "Yes," explain the arrangement in P	art XIII. Check her	re If the exp	planation	has been	orovid	ed on Part XIII	.,		Б"
Par	t V Endowment Funds.							<u>-</u>	<u> </u>	
	Complete if the organization	answered "Yes	on Form	1 990. F	art IV. lin	n a 10.				
		(a) Current year	(b) Prior		(a) Two yes		(d) Three years-b	ck [6]	Dur van	a back
1a	Beginning of year balance				<u> </u>		, , , , , , , , , , , , , , , , , , , ,		· · · / · · ·	
b	Contributions		 				<u> </u>			
C	Net investment earnings, gains, and losses							+		
d	Grants or scholarships	—	 	-			·		-	
é	Other expenditures for facilities and programs				***			 		
f	Administrative expenses									
9	End of year balance			i						
2	Provide the estimated percentage of	the current year or	nd halance	floa 1g	column (all hald		Щ.		
a	Board designated or quasi-endowne	nt >	44	hua . St	Caronini (a)) 1161U	a 5.			
Þ	Permanent endowment ▶	%								
C	Temporarily restricted endowment	٠,٠ ولا								
-	The percentages on lines 24, 2b, and		ሰበዓሩ							
	Are there endowment funds not in the	a possession of the	uo ,u. Va oroaniza	tion the	l are held	and ad	ministered for	tha		
30	organization by.	,	30.00			wid ap	THE PARTICION OF	D IC	(V-	1
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30	(i) unrelated prosnizations :		• •			• • •			_	╂
30	(i) unrelated organizations :	,							a z	ī
	(ii) related organizations			 d on Sel	nadido en	,	• • • •	. 3a		
	(ii) related organizations		 I as require	d on Sci	nedule 87	· · ·		. 31		
b 4	(ii) related organizations . If "Yes" on line Sa(ii), are the related o Describe in Parl XIII the intended uses	, rganizations listed s'of the organizatio	 I as require	d on Sci ment fu	nedule 87 nds.	· · · ·	· · · ·			
b 4	(ii) related organizations . If "Yes" on line 3a(ii), are the related o Describe in Part XIII the Intended uses VI Land, Buildings, and Equip	rganizations listed s of the organization	l as require on's endow	ment fu	nds.		S F 00/	. [3]		
b 4	(ii) related organizations If "Yes" on line 3a(ii), are the related o Describe in Parl XIII the Intended uses VI Land, Buildings, and Equip Complete If the organization	rganizations listed s of the organization oment.	as require on's endow	ment fu 990, P	nds. art IV, lin	e 11a.), Part)	(, line	
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	Investments - Other Securities				Pag
	Complete if the organization ans		n 990. Part IV li	na 116 See For	n 900 Part Y line 12
	(a) Description of security or category (moduling name of security)	/	(b) Book value	(c) A4	Final of valuation: d-ol-year market value
1) Financial	dedustives			-	
	cenvarives				
S) Other	and adding one came a second as	* 1 * * * * * * *		 	
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art VIII	Investments-Program Related			Carl Street, Mary	
	Complete if the organization ansi		. 000 had 10	da 44m, Cim Pirm	-000 0-43
 :	(a) Description of investment	**************************************	: (b) Book value		
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Part IX	Other Assets.				
Part IX	Other Assets. Complete if the organization answ	vered "Yas" on Form	990, Part IV, lir		i 990, Part X, line 15
Part IX	Other Assets. Complete if the organization answ	vered "Yes" on Form	990, Part IV, lin		
Part IX	Other Assets. Complete if the organization answ	vered "Yas" on Form	990, Part (V. lir		i 990, Part X, line 15
Part IX	Other Assets. Complete if the organization answ	vered "Yas" on Form	1990, Part IV. lin		i 990, Part X, line 15
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Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answ	vered "Yas" on Form	990, Part IV, lin		i 990, Part X, line 15
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Schedulo D (Form 990) 2018

Schedule D (Form 990) 2018		Pag
Reconciliation of Revenue per Audited Financial States Complete if the organization answered "Yes" on Form 990		per Return.
1 Total revenue, gains, and other support per audited financial statement	\$. (1)
2 Amounts Included on line 1 but not on Form 890, Part VIII, line 12;		
a Net unrealized gains (losses) on Investments	. 23	
b Donated services and use of facilities		
c Recoveries of prior year grants	2c	
d Other (Describé în Part XIU.)		
e Add lines 2s through 2d		
3 Subtract line 2e from line 1 .		- 28
4 Amounts included on Form 990, Part Vill, line 12, but not on line 1.	`- <u>; - </u>	
a investment expenses not included on Form 990, Part VIII, line 7b	14-1	
b Other (Describe in Part XIII.)	4a 4b	100 100 100 100 100 100 100 100 100 100
c Add limes 4a and 4b	40	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, Im		· 4c
		. 5
Part XII. Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 980	imenis With Expense I. Parf IV line 12a	s per Return.
1 Total expenses and losses per audited financial statements	, r art 10, 1010 12a.	. 1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	24	
b Prior year adjustments		
c Other tosses		
A AA . 15		[433]
a Add lines 2a through 2d		
3 Subtract line 2e from line 1		. 2e
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	. 3
The section of the se	1 _ 1	14 A
a investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII)	46	
to Add lines 45 and 46 . 5 Total expenses, Add lines 3 and 4c. (This must equal Form 990 Part I.)		. 4c
Total department and the first of the country of the first	ine 18.)	. 1.5
Part XIII Supplemental Information.		
Provide the descriptions required for Pari II, lines 3, 5, and 9; Part III, lines 1a a	nd 4; Part IV, Ilnes 1b an	d 25; Part V. Ime 4; Part X, Im
2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par		
The audited financials have not been completed at the time of filing this Form 980.		
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Schedule () (Form 990) 2018

(Farm 980)	- . ℧	Government makes I the orga	urants and Uther Assistance to Organizations, overtiments, and Individuals in the United State where if the organization engines of form 990, Part IV, line 21 o	tance to Uri fuals in the C Tyes on Form 980,	Governments, and Individuals in the United States Convernments, and Individuals in the United States Convers If the organization answered Free or Form \$50, Per IV, line 21 or 22		2018
Department of the Treasury Internal Perorus Service		► Go to	► Attach to Form 980. ► Go to www.rs.gov/Form980 for the talest brior methon.	► Attach to Form 890. gov/Form®\$0 for the labelt bil	ormedion		Open to Public Inspection
5 6	Children, Inc.					ā	Employar Manufication number
Part I General Information on Grants and Assistance	on Grants and	Assistance					61.13//200
1 Coes the organization maintain records to substantiate the amount of the grants or assistance, fire grantses' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of from funds in the linear street.	un records to sub- award the grants zetton's procedus	start ate the amo or essistance? es for monitor no	uni of the grants or	r assistance, the g	gantoes' eligibility fo	ir the grants or assis	stence, and
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part II, Ina 21, for any recipient that received more than \$5,000; Part II can be dubiteded if additional space it needed.	selstance to Do y recipient that r	mestic Organización	ettions and Dornian \$5,000; Part	testic Governm I can be dublica	s and Other Assistance to Domestic Organizations and Domestic Governments, Complete if the organization, fine 21, for any recipient that received more than \$5,000, Part II can be dublicated if additional snace is needed	the organization a	Inswered "Yes" on F
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. Enter beta number of other organizations listed (ii the line 1 table).	501(c)(3) and gove parizations (listed (manent organizati	isted in the [i	ne 1 table.			A
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