Second 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-1150 2018

Open to Public Inspection

, 20 19

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information. , 2018, and ending A For the 2018 calendar year, or tax year beginning September 30 October 1

В	Check if ap	oplicable	C Name of organization	D Empi	D Employer identification number			
	Address c	hange	American Society of Civil Engineers Kansas City Section	23	- 73	81281		
	Name cha	inge	Number and street (or P O box, if mail is not delivered to street address) Room/suite	E Telep	hone n	umber		
Ц	Initial retur		1801 Alexander Bell Drive	70)3 - 2	295-6109		
H	Final return/terminated City or town, state or province, country, and ZIP or foreign postal code					mption		
H	Amended Application		City or town, state or province, country, and ZIP or foreign postal code Reston, VA 20191		nber I	•		
_		ling Method.	X Cash	H Check	D	f the organization is not		
	Vebsite	•	gineers.org			ach Schedule B		
J 1	ax-exen		ck only one) — 🔀 501(c)(3) 🔲 501(c) () ◀ (insert no) 🔲 4947(a)(1) or 🔲 527	(Form 9	90, 99	0-EZ, or 990-PF)		
_		organization	☐ Corporation ☐ Trust ☐ Association ☒ Other Unincorp	oorated A	ssoci	ation		
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if to					
			500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	97,651		
E	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see t	he instru	ctions	s for Part I)		
			the organization used Schedule O to respond to any question in this Pa					
	1		ns, gifts, grants, and similar amounts received		1	36,327		
	2		ervice revenue including government fees and contracts		2	46,265		
	3	•	p dues and assessments		3	10,813		
	4	Investment	•		4	18		
	5a		unt from sale of assets other than inventory 5a	Re	ceiv	ed in Corres		
	b		or other basis and sales expenses			- OSC 06		
	c		ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c			
	6		d fundraising events.		TATUI	1 0 2020		
	a	Gross inc	ome from gaming (attach Schedule G if greater than			, , , , , , , , , , , , , , , , , , , ,		
ne		\$15,000)	6a			dan dikab		
Revenue	Ь	Gross inco	me from fundraising events (not including \$ 25,250 of contribut	tions	မပ္မ	ten, Utah		
ě		from fundr		H				
_		sum of suc	h gross income and contributions exceeds \$15,000) . 6b	4,228				
	С	Less direc	t expenses from gaming and fundraising events 6c	16,714				
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and	subtract				
		line 6c) .			6d	(12,486)		
	7a	Gross sale	s of inventory, less returns and allowances					
	b	Less cost	of goods sold					
	С	Gross prof	it or (loss) from sales of inventory (Subtract line 7b from line 7a)		7с			
	8	Other reve	nue (describe in Schedule O)		8			
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	. >	9	80,937		
	10		Similar amounts paid (list in Schedule O)		10	20,100		
	11		aid to or for members		11			
S	12	Salaries, o	ther compensation, and employee benefits		12			
nses	13		al fees and other payments to independent contractors		13			
Expe	. 14	Occupancy	y, rent, utilities, and maintenance		14			
Ă	15	•	ublications, postage, and shipping		15	154		
	16	Other expe	enses (describe in Schedule O)		16	64,107		
	17		enses. Add lines 10 through 16	<u>.</u> . ▶	17	84,361		
	40		(deficit) for the year (Subtract line 17 from line 9)	. .	18	(3,424)		
šė	19		or fund balances at beginning of year (from line 27, column (A)) (must ag	ree with				
ASS		end-of-yea	r figure reported on prior year's return)		19	124,426		
Net Assets	20	Other char	nges in net assets or fund balances (explain in Schedule O)		20			
Ž	21		or fund balances at end of year Combine lines 18 through 20	<u>.</u> ▶	21	121,002		
_								

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form **990-EZ** (2018)



Pa	t II Balance Sheets (see the instructions t	•				
	Check if the organization used Schedule	O to respond to a	ny question in this		<u></u>	<u> </u>
			<u> </u>	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			124,426	-	121,002
23	Land and buildings		· · · - -		23	
24	Other assets (describe in Schedule O)			404 406	24	424 000
25	Total liabilities (decomber as Cabadula C)				-	121,002
26	Total liabilities (describe in Schedule O)			124 426	26	424.000
27 Par	Net assets or fund balances (line 27 of column Statement of Program Service Accom			124,426	27	121,002
ı aı	Check if the organization used Schedule	•		•		Expenses
Wha	t is the organization's primary exempt purpose? A					uired for section
	• • • • • • • • • • • • • • • • • • • •	 -				c)(3) and 501(c)(4) nizations, optional for
as m	cribe the organization's program service accomplisheasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the			othe	
28	Educational Seminars to enhance abilities of civ	il engineers: Region	nal and			
	National Conferences, Monthly Tech Presentati	ions, Eng Committ				
	PE Rev Course, Steel Bridge Competition, Futur	-				
	(Grants \$ 0) If this amount	includes foreign gra	ants, check here		28a	50,964
29	Community Service activities and fundraisers	for local charitable	organizations:			
	KC STEM golf tournament			••••••		
	Habitat for Humanity, Adopt-A-Highway, Christ		-			
			ants, check here .	<u> ▶ □</u> _	29a	24,587
30	Educational Outreach to inform the general pu	blic about civil eng	ineering issues:	•••••		
	ASB informational Kiosk		••			
	GPR (Gov Pub Rel) activities					
			ints, check here .	▶ ⊔	30a	8,656
31	Other program services (describe in Schedule O)		· · · · · ·			}
20	(Grants \$) If this amount	includes foreign gra	ints, check here	· · · P	31a	04.007
32 Par	Total program service expenses (add lines 28a t				32	84,207
rai	List of Officers, Directors, Trustees, and Key Check if the organization used Schedule				istruc	clions for Part IV)
	Check if the organization used Schedule		(c) Reportable	(d) Health benefits,		··
	(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	contributions to employ	0	Estimated amount of ther compensation
Erne	sto Severiano Longoria	4 hrs/wk				
	ident		0		<u> </u>	0
	hen Stinger	2 hrs/wk	1	ĺ	_ [_
	ident-Elect		0	<u> </u>	<u> </u>	0
	gan Malloy	4 hrs/wk				
	President		0		2	0
	d Johnson	2 hr/wk)		
	surer		0	<u> </u>	<u>'</u>	0
	d Charest	2 hr/wk				
Dire	iah Schroeder		0		<u>'</u>	0
Dire		2 hr/wk	0		0	0
	gan Race				'	
Dire		2 hr/wk	0			0
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				' —	
		1				
		 			+	
		1				
					\dashv	<u> </u>
		1				
					\top	
	•••••••••••••••••••••••••••••••••••••••	1	1	[1	
			-			
		1			1	

Fart				
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part	V .	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		165	140
-	detailed description of each activity in Schedule O	33		×
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			<u> </u>
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O. See instructions	34		×
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		×
þ	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	35c		-
	during the year? If "Yes," complete applicable parts of Schedule N	36		×
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
b	Did the organization file Form 1120-POL for this year?	37b	-	×
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		×
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations Enter.			
a	Initiation fees and capital contributions included on line 9	-		
ь 40а	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under	1		:
	section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		×
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line			
•	40c reimbursed by the organization			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		×
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ► Chad Johnson, PE Telephone no. ► 913			05
b	Located at ► 7301 W 133rd St. Suite 200 Overland Park, KS ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over		217 Yes	No
~		42b	163	×
	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? .	42c	L	×
40	If "Yes," enter the name of the foreign country ► Section 4047(a)(1) personner to boarde le truste films Form 200 F7 in liquid f Form 1041. Check have			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	•	. ,	▶ □
	and enter the amount of tax-exempt interest received or accided during the tax year		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44a		×
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44b		×
C	Did the organization receive any payments for indoor tanning services during the year?	44c]	×
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schodule O.	-		
AF-	explanation in Schedule O	44d		
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		×
D	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ. See instructions	45b		×

,	90-EZ (2018)			-	····			Page
46	Did 1	the organization engage, directly or i	ndirectly, in political o	campaign activities o	n behal	f of or in apposi	ition 🔽	Tes	No
	to ca	andidates for public office? If "Yes,"	complete Schedule C	, Part I			46	:	×
Part	VI)	Section 501(c)(3) Organization							
		All section 501(c)(3) organization	is must answer que	estions 47–49b and	d 52, ar	nd complete th	e tables	for lin	10 S
		50 and 51.	hadula O ta masiana		Abia Da	-4 \ //			_
		Check if the organization used Sc	nedule O to respond	to any question in	this Pa	πνι		Yes	. L No
47	Did t	the organization engage in lobbying	activities or have a	section 501(h) elect	ion in e	fect during the	tax '	105	RO
	year	? If "Yes," complete Schedule C, Par						×	1
48		e organization a school as described i					. 48		×
49a		the organization make any transfers t					. 492	_	×
50	Com	es," was the related organization a seplete this table for the organization's	ection 52/ organization five bighest company	ON?	 har than	officers direct	. <u>49</u> t		<u> </u>
00	emp	loyees) who each received more than	s 100.000 of compe	nsation from the org	anizatio:	n. If there is non	e. enter "l	es, an None."	ia ke
	· · · · · · · · ·		(b) Average	(c) Reportable	(d)	Health benefits,	·		
	(a)	Name and title of each employee	hours per week devoted to position	compensation (Forms W-2/1099-MISC	hanste.	utions to employee plans, and deferred	(e) Estimated the contract (e)		
			devoted to position	(FOITIS W-2/1099-WISC	" c	compensation			
NONE									
			<u> </u>	1	<u>i</u>				.
					į				
									e.e. =
				3.0					
				N .					
-				<u> </u>			 		
				<u> </u>	-				
f	Total	number of other employees paid ov	er \$100,000			-			
f 51	Com	plete this table for the organization'	s five highest compo	ensated independen	t contra	ctors who each	received	more	thar
	Com		s five highest compo	ensated independen	t contra	ctors who each	received	more	thar
	Com \$100	plete this table for the organization'	s five highest componization. If there is no	ensated independen	······································	- -	received		thar
	Com \$100 (a)	plete this table for the organization, 000 of compensation from the orga	s five highest componization. If there is no	ensated independen one, enter "None."	······································	- -			thar
51	Com \$100 (a)	plete this table for the organization, 000 of compensation from the orga	s five highest componization. If there is no	ensated independen one, enter "None."	······································	- -			thar
51	Com \$100 (a)	plete this table for the organization, 000 of compensation from the orga	s five highest componization. If there is no	ensated independen one, enter "None."	······································	- -			thar
51	Com \$100 (a)	plete this table for the organization, 000 of compensation from the orga	s five highest componization. If there is no	ensated independen one, enter "None."	······································	- -			thar
51	Com \$100 (a)	plete this table for the organization, 000 of compensation from the orga	s five highest componization. If there is no	ensated independen one, enter "None."	······································	- -			thar
51	Com \$100 (a)	plete this table for the organization, 000 of compensation from the orga	s five highest componization. If there is no	ensated independen one, enter "None."	······································	- -			thar
51	Com \$100 (a)	plete this table for the organization, 000 of compensation from the orga	s five highest componization. If there is no	ensated independen one, enter "None."	······································	- -			thar
51	Com \$100 (a)	plete this table for the organization, 000 of compensation from the orga	s five highest componization. If there is no	ensated independen one, enter "None."	······································	- -			thar
NONE	(a)	plete this table for the organization',000 of compensation from the orga	s five highest compounization. If there is not lent contractor	ensated indépenden one, enter "None." (b) Type of se	······································	- -			thar
NONE	Com \$100 (a)	plete this table for the organization, 000 of compensation from the organization from th	s five highest compounization. If there is not lent contractor	ensated indépenden one, enter "None." (b) Type of se	rvice	(c)	Compensat		thar
NONE d 52	Total Did 1 comp	plete this table for the organization, 000 of compensation from the organization from the organization and business address of each independent organization complete Schedule A	s five highest compounization. If there is no lent contractor	ensated indépendente, enter "None." (b) Type of se	vice	ns must attach	Compensation at the compen	ion	·
NONE d 52	Total Did to compratites	plete this table for the organization, 000 of compensation from the organization from the organization from the organization from the organization and business address of each independent contrast the organization complete. Schedule A	s five highest componization. If there is not lent contractor ctors each receiving le A? Note: All se	ensated indépendent one, enter "None." (b) Type of se over \$100,000 ction 501(c)(3) organization schedules and statem	rvice Anization Bents, and	ns must attach	Compensation at the compen	ion	·
NONE d 52 Under petrue, con	Total Did to compratites	plete this table for the organization, 000 of compensation from the organization from the organization and business address of each independent contrasting organization complete. Schedule A of perjury, I declare that I have examined this red complete. Declaration of preparer (other than	s five highest componization. If there is not lent contractor ctors each receiving le A? Note: All se	ensated indépendent one, enter "None." (b) Type of se over \$100,000 ction 501(c)(3) organization schedules and statem	rvice Anization Bents, and	ns must attach to the best of my kn nowledge.	a. Yes	ion	·
NONE d 52 Under petrue, con	Total Did to compratites	plete this table for the organization, 000 of compensation from the organization from the organization and business address of each independent contrasting organization complete. Schedule A of perjury, I declare that I have examined this red complete. Declaration of preparer (other than Signature of ifficer	s five highest componization. If there is not lent contractor lent contractor ctors each receiving lie A? Note: All seetum, including accompany officer) is based on all info	ensated indépendent one, enter "None." (b) Type of se over \$100,000 ction 501(c)(3) organization schedules and statem	rvice Anization Bents, and	ns must attach	a. Yes	ion	·
NONE d 52 Under petrue, con	Total Did to compratites	plete this table for the organization, 000 of compensation from the organization from the organization and business address of each independent contrasting organization complete. Schedule A of perjury, I declare that I have examined this red complete. Declaration of preparer (other than	s five highest componization. If there is not lent contractor lent contractor ctors each receiving lie A? Note: All seetum, including accompany officer) is based on all info	ensated indépendent one, enter "None." (b) Type of se over \$100,000 ction 501(c)(3) organization schedules and statem	rvice Anization Bents, and	ns must attach to the best of my kn nowledge.	a. Yes	ion	·
d 52 Under petrue, con	Total Did to compratites	plete this table for the organization, 000 of compensation from the organization from the organization and business address of each independent contrast the organization complete Scheduleted Schedul	s five highest componization. If there is not lent contractor lent contractor ctors each receiving lie A? Note: All seetum, including accompany officer) is based on all info	over \$100,000 ction 501(c)(3) organization of which preparer	rvice Anization Bents, and	is must attach to the best of my knowledge.	a Yes	ion	·
NONE d 52 Under petrue, con	Total Did to compression, and these rect, and the compression of the c	plete this table for the organization, 000 of compensation from the organization from the organization and business address of each independent contrast the organization complete. Schedule A of perjury, I declare that I have examined this red complete. Declaration of preparer (other than Signature of officer Chad Johnson, Section Treasurity or print name and title	s five highest componization. If there is not next contractor lent contractor actors each receiving le A? Note: All se etum, including accompany officer) is based on all information.	over \$100,000 ction 501(c)(3) organization of which preparer	rvice anization sents, and has any k	ns must attach to the best of my kn nowledge.	a Yes owledge and	ion	·

Firm's address ►
May the IRS discuss this return with the preparer shown above? See instructions

P ☐ Yes ☐ No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt chantable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 2018 Open to Public

Inspection

Internal Revenue Service Name of the organization

Employer identification number

American Society of Civil Engineers - Kansas City Section 23 - 7381281 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part iI) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (i) Name of supported organization (III) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Schedule A (Form 990 or 990-EZ) 2018

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization falled to qualify under Part III. If the organization falled to qualify under the tests listed bellow, please complete Part III.) Section A. Public Support 1 Gifts, grants, contributions, and membership leas received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either pard to or expended on its behalf. 3 The value of services or facilities furnished by a governmental unit to the organization without charge. 4 Total. Add lines 1 through 3. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 295 of the amount shown on line 11, column (f). 6 Public support. Sobtract lines if from line 4. Section B. Total Support Celendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 1 and 1	_s Part							
Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total membership fees received. (Do not include any "unusual grants.") Tax revenues leved for the organizations's benefit and either pand to or expended on its behalf Total. Add lines 1 through 3 The value of services or facilities furnished by a governmental unit to the organization without charge. Total. Add lines 1 through 3 The public support Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total organization from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) > 7 Amounts from line 4 Section B. Total support Calendar year (or fiscal year beginning in) > (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total organization from ine 4 Section B. Total support Calendar year (or fiscal year beginning in) > (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total organization from line 4 Section B. Total support Calendar year (or fiscal year beginning in) > (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total organization from line 4 Section B. Total support Calendar year (or fiscal year beginning in) > (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total organization from line 4 Section B. Compart of the business activities, whether or not the business is regularly carried on I other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Section C. Computation of Public Support Percentage Section C. Computation of Public Support device organization, check this box and spop here Section G. Computation of Public Support device organization organization with the organization unletts the "facts-and-circumstances" test, check this box and stop here five organization qualities as a publicly supported organization qualities as a publicly supported organization qualities as a pub								ality under
Calendar year (or fiscal year beginning in) Galto, grants, controlutions, and controlutions and controlution of the comparization's benefit and either paid to or expended on its behalf . The value of services or facilities furnished by a governmental unit to the organization without charge . The portion of total contributions by each person (other than a governmental unit or or publicly supported organization without charge . The portion of total contributions by each person (other than a governmental unit or or publicly supported organization) included on line 1 that exceeds 296 of the amount shown on line 11, column (f) . Public support. Subtract line 5 from line 4 Gross income from unretest, dividends, payments received on securities loans, rents, royaltes, and income from similar sources Net income from unrelated business as chuttles, whether or not the business as chuttles, whether or not in business as chuttles, whether or not in business as chuttles, whether or not include gain or loss from the sale of capital assets (Explain in Part VI). Total support Add lines 7 through 10/ organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2018 (file of column (f) divided by ine 11, column (f) . 14 Webic support percentage for 2018 (file of column (f) divided by ine 11, column (f) . 15 Public support percentage for 2018 (file organization did not check the box on line 13 and line 14 is 331/3% support test—2015. If the organization did not check the box on line 13, 16a, or 16b, and line 14 is 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, or 17a, and line 15 is 10% or nore, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this bo	Secti		quality unde	er the tests is	sted below, p	lease comple	ran III.)	
1 Giffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf or any "unusual grants.") 3 The value of services or facilities furnished by a governmental unit to the organization without charge. 4 Total. Add lines I through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 5 Public support. Subtract line 5 from line 4 Section B. Total Support. Calendar year for fiscal year beginning in) ► 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 11 Total support. Add lines 7 through 10/ 12 Gross receipts from related activities fetc (see instructions) 12 Gross receipts from related activities fetc. Section G. Computation of Public Support Percentage 14 Public support percentage for £018 (line 6, column (f) divided by line 11, column (f)) 14 9/ 15 Public support percentage for £018 (line 6, column (f) divided by line 11, column (f) 14 9/ 16 a 331/3% support test—2015. If the organization did not check he box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualities as a publicly supported organization in Part VI how the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization of meets the "fact-and-circumsta			(a) 2014	(b) 2015	(c) 2016	(d) 2017 /	(e) 2018	(f) Total
membership fees received. (Do not include any "unusual grants."). 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. 3 The value of services or facilities furnished by a governmental unit to the organization without charge. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization medicated on line 1 that exceeds 2% of the amount shown on line 11, column (i). 5 Public support. Subtract line 5 from line 4 Section B. Total Support. Callendar year (or fiscal year beginning in) (a) 2014. (b) 2015. (c) 2016. (d) 2017. (e) 2018. (f) Total Amounts from line 4 6 Gross income from interest, dividends, payments received on securities loans, rents, royallies, and income from similar sources. 9 Net income from unrelated business activities, whether or not the business activities, and the promise of the promise of the promise of the promise of the pr			(4) 2014	(6) 2010	(0) 2010	(0) 2017	(6) 2010	(1) 10141
2 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf. 3 The value of services or facilities furnished by a governmental unit to the organization without charge. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6 Public support. Subtract line 5 from line 4 Section B. Total Support. Celendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Add inso the form in the support. Subtract line 5 from line 4 8 Gross income from interest, dividends, payments received on securities boars, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business activities, whether or not the business is regularly carried on. 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 11 Total support. Add lines 7 through 10/9 12 Gross receipts from related activities fetic (see instructions) 13 First five years. If the Form 990 gift or the organization of first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage from 2018 (line 6, column (f) divided by line 11, column (f)) 14 9/9 15 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 9/9 16 331/3% support text-2018, if the organization did not check the box on line 13, 16a, and line 14 is box and stop here. The organization qualifies as a publicly supported organization 16b, and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization qualifies as a p	•	, , , ,						
organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, other lines of the second organization included on line 1 that exceeds 2% of the amount shown on line 11, other lines of the second organization included on line 1 that exceeds 2% of the amount shown on line 11, other lines of the second organization or line 11, other lines or lines 1, other lines 1, other lines or lines 1, other lines 1		include any "unusual grants.")				/		
to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge . 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 25 of the amount shown on line 11, column (f) . 6 Public support. Subtract tine 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 11 Total support. Add lines 7 through 10/12 Gross receipts from related activities/etc (see instructions) 12 Gross receipts from related activities/etc (see instructions) 13 First five years. If the Form 990 if or the organization's first, second, third, fourth, or fifth tax year as a section 501(G)3 organization, check this box and stop here. The organization qualifies as a publicly supported organization of not check the box on line 13, and line 14 is 331/9% or more, check this box and stop here. The organization qualifies as a publicly supported organization of not check the box on line 13 or 16a, and line 14 is 331/9% or more, check this box and stop here. The organization qualifies as a publicly supported organization or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.	2	Tax revenues levied for the						
Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit to the organization without charge . Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). Public support Subtract line 5 from line 4 Gesction B. Total Support Calendar year (or fiscal year beginning in) Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on . Total support. Add lines 7 through 10 Gross receipts from related activities/etc (see instructions) Total support. Add lines 7 through 10 Gross receipts from related activities/etc (see instructions) Total support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) Total support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) All 90 Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) Basilian (f) 15 Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) Basilian (f) 15 Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) Basilian (f) 15 Section C. Computation of Public Support Percentage 15 Basilian (f) 1		= .						
turnished by a governmental unit to the organization without charge . 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6 Public support. Subtract line 5 from line 4 8 Section B. Total Support 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities toans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on on the sale of capital assets (Explain in Part VI). 11 Total Support. Add lines 7 through 10 12 Gross receipts from related activities etc. (see instructions) 13 First five years. If the Form 990 if for the organization's first, second, third, fourth, or fifth tax year as a section 501(o)(3) organization, check this box and stop here. The organization of not check the box on line 13, and line 14 is 331-8% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 10 31-14 Support Percentage from 2017 Schedule A, Part II, line 14 9 Public support percentage from 2017 Schedule A, Part II, line 14 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 33 '98 support test—2018. If the organization did not check the box on line 13 or 16a, and line 14 is 331-8% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 10 31-14 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organizat		to or expended on its behalf						
organization without charge	3				/	1		
Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, 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 7 through 10 Gross receipts from related activities fets (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization of idn not check the box on line 13, and line 14 is 331-3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 331-3% support test—2017. If the organization did not check a box on line 13, and line 14 is 331-3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 331-3% support test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" t				1				
5 The portion of total contributions by each person (other than a governmental unt or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6 Public support Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Amounts from line 4 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10/12 Gross receipts from related activities fet (see instructions) 12 Gross receipts from related activities fet (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization did not check the box on line 13, and line 14 is 33'a'% support test—2018. If the organization did not check the box on line 13 and line 14 is 33'a's support test—2019. If the organization did not check a box on line 13 is 31'a's or more, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstanc	4							
each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 5 Public support. Subtract line 5 from line 4 5 Public support. Subtract line 5 from line 4 6 Gross income from line 14 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities etc (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. 5 Section C. Computation of Public/Support Percentage 14 Public support percentage from 2017 Schedule A, Part II, line 14 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 a33/3/% support test—2015. If the organization did not check the box on line 13 or 16a, and line 15 is 33/3/% or more, check this box and stop here/ The organization qualifies as a publicly supported organization. 17 a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization qualifies as a pu		-				<u></u>		
governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6	5	•						
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities etc (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Yeu Say Support test—2018. If the organization did not check the box on line 13, and line 14 is 331-3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organ		, ,						
line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 11 Total support. Add lines 7 through 10 Gross receipts from related activities/ etc (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 % Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 16 33/3/% support test—2017. If the organization did not check the box on line 13, and line 14 is 33/3/% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization qualifie								
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities fets (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization did not check the box on line 13, and line 14 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10 33¹/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 14 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10 33¹/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10 30°/3 support test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 10 %-facts-and-circumstances test—2017. If the organization did not check a box on			l	/				
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities fetc (see instructions) 13 First flive years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage from 2017 Schedule A, Part III, line 14 15 Public support percentage from 2017 Schedule A, Part III, line 14 16 33/3/9% support test—2018. If the organization did not check the box on line 13 and line 14 is 33/3/9% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13 in 16a, and line 15 is 33/a/9 or more, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organizati		shown on line 11, column (f)						
Calendar year (or fiscal year beginning in) Amounts from line 4 B Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities etc (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public' Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 16 33¹/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33³/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13 or 16a, and line 14 is 10% or more, and if the organization must the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI								
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities/etic (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 33/3/% support test—2016. If the organization did not check the box on line 13, and line 14 is 33/3/6 or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 by facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization qualifies as a publicly s				11/2015		40.0047	() 0010	<u> </u>
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 Gross receipts from related activities fetc (see instructions) 12 Gross receipts from related activities fetc (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 331/3/% support test—2018. If the organization did not check the box on line 13, and line 14 is 331/3/% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization if the organization meets the "facts-and-circumstances" test.			(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) lotal
payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities etc (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16a 33'13''s support test—2019. If the organization did not check the box on line 13, and line 14 is 33'13''s or more, check this box and stop here. The organization qualifies as a publicly supported organization 15 b 33'13''s support test—2017. If the organization did not check a box on line 15 is 33'13''s or more, check this box and stop here The organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 15 10% or more, and if the organization meets the "facts-				/				
rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities etc. (see instructions)	8		/	ľ				
Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) Public support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/3% or more, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization qualifies as a publicly supported organization \(\) how facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.		· -						
activities, whether or not the business is regularly carried on . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 Gross receipts from related activities/ etc. (see instructions) 12 Gross receipts from related activities/ etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16a 331/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.		*						
Is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities etc (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage from 2017 Schedule A, Part II, line 14 15 Public support percentage from 2017 Schedule A, Part II, line 14 16a 33¹/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 b 33¹/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Expl	9	Net income from unrelated business						·
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities etc (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 331/3// support test—2018. If the organization did not check the box on line 13, and line 14 is 331/3// or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 331/3// support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3// or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. If the organization meets the "facts							'	
loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 19 12 Gross receipts from related activities, etc (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16a 331/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization qua		= *						
(Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 13 Gross receipts from related activities for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	10			l				
Total support. Add lines 7 through 10 Gross receipts from related activities etc (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16a 33¹/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		· · · · · · · · · · · · · · · · · · ·	•					
Gross receipts from related activities, etc (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2017 Schedule A, Part II, line 14 Support test—2018. If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization But 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. But 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. But 12	11							
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 33¹/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 b 33¹/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 18 c 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 19 b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			(see instruction	ons) .	. ,		12	_ -
Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	13				d, third, fourth	, or fifth tax ye		n 501(c)(3)
Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))		organization, check this box and stop he	re					. ▶ 🗀
Public support percentage from 2017 Schedule A, Part II, line 14	Secti							
33¹/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
box and stop here. The organization qualifies as a publicly supported organization								
b 33¹/₃% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/₃% or more, check this box and stop here. The organization qualifies as a publicly supported organization	ıba							
this box and stop here. The organization qualifies as a publicly supported organization	h	· · · · · · · · · · · · · · · · · · ·						
17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	17a	• /	•	, ,	_		6a. or 16b. and	_
Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
b 10%-facts-and/circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		organization						. ▶ 🗆
Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	b							
supported organization								
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see			neets the "fac	ts-and-circum:	stances" test.	ine organizati	on qualities as	
	1.0	* · · · · · · · · · · · · · · · · · · ·	d not chack a	hov on line 12	 16a 16h 17a	or 17b chast	this have and	
	10	<i>y</i>			, 10a, 100, 17a		. ulio bux allu	. ▶ □

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

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

Secti	on A. Public Support			, p	<u></u>	7	
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees	(-,		(3)		\\	
	received. (Do not include any "unusual grants.")	32,352	35,870	33,677	45,052	34,654	181,605
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	75,750	40,026	43,485	66,140	46,265	271,666
3	Gross receipts from activities that are not an unrelated trade or business under section 513	737					737
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5.	108,839	75,896	77,162	111,192	80,919	454,008
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .				_		0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support. (Subtract line 7c from line 6.)				-		454.000
Secti	on B. Total Support				1	. <u> </u>	454,008
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	108,839	75,896	77,162	111,192	80,919	454,008
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	33	15	14	14	18	94
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
С	Add lines 10a and 10b	33	15	14	14	18	94
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0
13	Total support. (Add lines 9, 10c, 11, and 12)			77.470		22.22	
14	First five years. If the Form 990 is for th	-		77,176 d, third, fourth,	111,206 or fifth tax ye	80,937 ar as a section	454,102 1 501(c)(3)
	organization, check this box and stop her			<u> </u>	<u> </u>	· · ·	<u>►</u> □
	on C. Computation of Public Suppor	<u>_</u>		 		T . = T	
15	Public support percentage for 2018 (line 8		-	3, column (f))		15	99.98 %
16	Public support percentage from 2017 Sch			<u> </u>	<u> </u>	16	99.95 %
	on D. Computation of Investment Inc			1 40 1	(0)	145	
17	Investment income percentage for 2018 (In			•		17	0 %
18	Investment income percentage from 2017					18	0 %
19a	331/3% support tests—2018. If the organia						
_	17 is not more than 33½%, check this box a	•	-			_	_
b	331/3% support tests—2017. If the organization 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did	•	-				

Part IV Supporting Organizations

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

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P	art v	<u>.)</u>	
Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by			
	class or purpose, describe the designation If historic and continuing relationship, explain.	1		<u> </u>
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		 —	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		<u></u>
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes			
_		4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	30		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	100		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a		
_				ı

determine whether the organization had excess business holdings.)

10b

Schedule	A (Earm	000 01	OOA.	2010

<u>Part</u>	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		_
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			$oxed{oxed}$
	organizations and must contain on the contains of the contains and the con	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	:		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2_		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			}
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	•		
	supported organizations played in this regard.			——
<u>C4:</u>		3_		
	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 in	nstru	ctions	S).
a	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see in		
2	Activities Test Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			1
	that these activities constituted substantially all of its activities			
	·	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	<u> </u>	<u> </u>	
_		2b	 -	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Vee" describe in Part VI the role played by the organization in this regard	3b		

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

,Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	Current Year			
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7_	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
_10	Line 8 amount divided by line 9 amount			
Sect	ion E—Distribution Allocations (see Instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018	1		
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2018 distributable amount			
<u>i</u> _	Carryover from 2013 not applied (see instructions)			
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from Section D, line 7 \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c			
8	Breakdown of line 7			
a	Excess from 2014			
b	Excess from 2015			
с	Excess from 2016			
d	Excess from 2017 .			
e	Excess from 2018			

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2018

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization Employer identification number American Society of Civil Engineers Kansas City Section 23-7381281 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Part I-B Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . Yes Πo 4a Was a correction made? . Yes No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV. (d) Amount paid from (a) Name (b) Address (c) EIN (e) Amount of political filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-(1) (2)(3) (4) (5) (6)

p	2	_	_	2

_			1.00				
Par	t II-A	Complete if the organizat section 501(h)).	ion is exempt i	under section 5	01(c)(3) and filed	d Form 5768 (ele	ction under
A (Check ►	If the filing organization beliaddress, EIN, expenses, an				liated group membe	er's name,
B (Check ▶	If the filing organization che	cked box A and	"limited control" pi	rovisions apply		
		Limits on Lo	bbying Expendit	ures		(a) Filing	(b) Affiliated
		_ (The term "expenditures"	means amounts	paid or incurred.)	organization's totals	group totals
18	Total lo	bbying expenditures to influen	ce public opinion	(grass roots lobby	ving)		
t	Total lo	bbying expenditures to influen	ce a legislative bo	ody (direct lobbyin	g)		
C	: Total lo	bbying expenditures (add lines	1a and 1b) .				
C	l Other e	exempt purpose expenditures					
•	Total e	xempt purpose expenditures (a	dd lines 1c and 1	d) .			
f	Lobbyi columr	ng nontaxable amount. Ente	r the amount f	rom the following	g table in both		
	If the ar	nount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	t is:		
	Not ove	r \$500,000	20% of the ar	nount on line 1e			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000		1
	Over \$1	500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000		Ĭ
	Over \$1	7,000,000	\$1,000,000.				
ç	Grassr	oots nontaxable amount (enter	25% of line 1f)				
ŀ	Subtra	ct line 1g from line 1a. If zero oi	less, enter -0-				
i	Subtra	ct line 1f from line 1c. If zero or	less, enter -0-			L	
j		e is an amount other than zeing section 4911 tax for this yea		1h or line 1i, dic	the organization	file Form 4720]Yes
	(Som	e organizations that made a s	ection 501(h) el	Period Under Sec ection do not hav ructions for lines	e to complete all	of the five column	s below.
		Lobbyi	ng Expenditures	During 4-Year A	veraging Period	r	
	Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
28	Lobbyi	ng nontaxable amount					
t		ng ceiling amount of line 2a, column (e))					
	Total lo	bbying expenditures					
	I Grassr	oots nontaxable amount					
•		oots ceiling amount of line 2d, column (e))					
f	Grassr	oots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	iled	Forn	า 5768		
For a	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	ption of the lobbying activity.	Yes	No	A	mount	:
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?	_				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		1	1		
c	Media advertisements?		√			
d	Mailings to members, legislators, or the public?		- -			
е	Publications, or published or broadcast statements?		1			
f	Grants to other organizations for lobbying purposes?		1			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	✓			1	3,982
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .		✓			
i	Other activities?		✓			
j	Total Add lines 1c through 1i				1	3,982
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
_	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	(5)	-	<u> </u>		
Part l	II-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	(5), C	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		_
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the p				igsquare	
Part (501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes."		Part		line 3	3, is
1	Dues, assessments and similar amounts from members	.	_1_			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
a	Current year		_2a	<u> </u>		_
b	Carryover from last year		_2b			
C	Total	.	_2c	├──		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			_
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure post-year?	- 1				
_	and political expenditure next year?	.	4	<u> </u>		
5 Dort	Taxable amount of lobbying and political expenditures (see instructions)	• .	5			
2 (see	e the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou instructions), and Part II-B, line 1 Also, complete this part for any additional information.	ıp lıst); Par	t II-A, li	nes 1	and
PARII	-B, LINE 1, LOBBYING ACTIVITIES:					
TO AD	ANCE ITS POLICY MISSION, KANSAS CITY SECTION IDENTIFIES LEGISLATION TO IMPROVE		••••			
THE N	ATION'S INFRASTRUCTURE, AND ADVANCE THE PROFESSION OF ENGINEERING.					 -
- 				- -		- -
						-

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information

Name of the organization					Employer identifi	cation number
American Society of Civil Engineers Kan	sas City Section					-7381281
Part I Fundraising Activities Form 990-EZ filers are				vered "Yes" on F	orm 990, Part IV,	line 17.
1 Indicate whether the organization	on raised funds	through any	of the follo	owing activities. Ch	eck all that apply.	
a Mail solicitations		e [Solicitat	ion of non-governn	nent grants	
b Internet and email solicitation	ons	f	∃ Solicitat	on of government	grants	
c Dhone solicitations		g [Special ·	fundraising events		
d In-person solicitations						
2a Did the organization have a wri	tten or oral agre	ement with	any individ	dual (including offic	ers, directors, trust	tees.
or key employees listed in Forn						
b If "Yes," list the 10 highest paid			draisers) pi	ursuant to agreeme	ents under which th	ne fundraiser is to be
compensated at least \$5,000 b	y the organization	on				
		() Dul ()	alua a a a la acca		(v) Amount paid to	
(i) Name and address of individual or entity (fundraiser)	(II) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1	1					
2		_			· <u> </u>	
3		<u> </u>				
4						
			-			
				_		
6						
7						
8						
9						
10						
	<u></u>					
Total						
3 List all states in which the organization or licensing	anızation is regis	stered or lic	ensed to s	olicit contributions	or has been notifi	ed it is exempt from
_						
				·		
			·····			
						
			·			

Part II	Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more
	than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with
	gross receipts greater than \$5,000.

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
			Golf Tournament (event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts	29,478			29,478
Œ	2	Less Contributions . Gross income (line 1 minus	25,250			25,250
_		line 2)	4,228			4,228
	4	Cash prizes	262			262
	5	Noncash prizes				
enses	6	Rent/facility costs	6,774			6,774
Direct Expenses	7	Food and beverages	496			496
Direc	8	Entertainment				
	9	Other direct expenses .	9,182		<u> </u>	9,182
	10	Direct expense summary Ad	d lines 4 through 9 in co	olumn (d)		16,714
_	11	Net income summary Subtra	act line 10 from line 3, c	olumn (d) .	<u> </u> ▶	(12,486)
Pa	rt III	Gaming. Complete if the \$15,000 on Form 990-E2		ered "Yes" on Form 9	990, Part IV, line 19,	or reported more than
Revenue	_		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1_	Gross revenue		· · · · · · · · · · · · · · · · · · ·		
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor 、	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary Ad	d lines 2 through 5 in co	olumn (d)		
	8	Net gaming income summary	y Subtract line 7 from li	ne 1, column (d)	•	
	a Is	nter the state(s) in which the organization licensed to co	onduct gaming activities	s in each of these states		
10		Vere any of the organization's g "Yes," explain.	amıng licenses revoked	, suspended, or termina	ated during the tax year	?

chedu	ıle G (Form 990 or 990-EZ) 2018		Page 3
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	□No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	□ No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility		%
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.		
	Name ▶		
	Address ▶		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	☐ Yes	□No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the		_
	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party		
	Name ▶	••••••	·
	Address ▶		.
16	Gaming manager information.		
	Name ▶		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶	~	
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions.		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
	spent in the organization's own exempt activities during the tax year ▶ \$		
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (a Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition See instructions.		
•			
·			
·			
-			
-			
		·	
			•••
			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2018

Employer identification number

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

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

Open to Public Inspection

OMB No 1545-0047

American Society of Civil Engineers Kansas	s City Section	23 - 7381281
Part I, Line 16 - Other expenses		
Meeting and conference expenses	22,633	
Student and younger member outreach	23,995	
Travel and other expenses	17,479	
Total for Line 16	\$ 64,107	
	<u> </u>	
••••••		
•••••		

Schedule () (Form 990 or 990-EZ) (2018)	Page Z
Name of the organization American Society of Civil Engineers Kansas City Section	Employer identification number 23 - 7381281
American society of civil Engineers Ransas City Section	23 - 7301201
	•
•••••••••••••••••••••••••••••••••••••••	
	•••••••••••••••••••••••••••••••••••••••
	•
	······································
·····	••••••
	······
•••••••••••••••••••••••••••••••••••••••	

Schedule O (Form 990 or 990-EZ) (2018)	Page 3
Jame of the organization	Employer identification number
American Society of Civil Engineers Kansas City Section	23 - 7381281
	·

······································	***************************************
<u> </u>	
•	
	······································
	•••••

chedule O (Form 990 or 990-EZ) (2018) lame of the organization		Employer identific	Pag cation number
American Society of Civil Engineers Kansas City Section		23 - 7381	
Part I, line 10 - Grants and Similar Amounts Paid	Total Cash	Property Other Than Cash	
Grantee's Name and Address	Amount	(See Below)	Individual
KC STEM Alliance	17,00	0	
4825 Troost Ave #108			
Kansas City, MO 64110			
·			
			
			·
••••			
		•••••••••••	
		••••	
·····			·
	•••••	•••••	
		•••••	·
······			·····
		····	·