Ston Form

2949221.950.1401

Return of Organization Exempt From Income Tax

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

2019

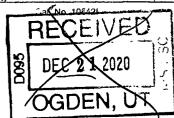
▶ Do not enter social security numbers on this form, as it may be made public. ▶ Go to www.irs.gcv/Form990EZ for instructions and the latest information.

Open to Public

Charter companies Charter or expensation	<u> </u>	SZ Br.C.	15-9 distance	r year, c. tax year beginning January 1	, 2019, and end	ing Dec	ember 31	, 20 .19 0
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For Partermont Reduction Ad Nounce set the separate instructions.

JAN 2 8 2021 RECEIVED ENTITY DEPT



0423220225 APR 20'21



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	instructions for Part V.) Check if the organization used Schadule O to respond to any question in this		Yes	No.
35	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		165	INO
	detailed description of each activity in Schedule C	33		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the		·	
•	change on Schedule O. See instructions	34		√
55 ≘	Cid 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		./
5	If ' Yes' to line 35s, has the organization filed a Form 990-T for the year? If ' No," provide an explanation in Schedule O	35b	\dashv	
	Was the organization a section 501(c)(4), 501(c)(5) or 501(c)(6) organization subject to section 6033(e) notice, reporting, and croxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35с		<u> </u>
රට	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? if "Yes, complete applicable parts of Schedule N	36		√
	▼	47.274	- A	
	Did the organization file Form 1120-POL for this year?	37b	- Prince	
ega	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	√el €	
۵	If files, complete Schedule L, Part II, and enter the total amount involved 38b N/A	3 55 73		PE A
38	Section 501(b)(7) organizations. Enter	,	· \$4,	泛
3	initiation rees and papital contributions included on line S	1. [\$\$.	统
	Pross receipts included on line 9, for public use of club facilities		784	
40a	Section 501(u)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 491 (№ 0), section 491 (№ 0); section 4955 № 0	ام اعزاز هند		_ {** <
Ł	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958		1	2
	excess benefit transaction during the year, or digit engage in an excess benefit transaction in a prior year that has not been reported on any or its prior Forms 990 or 990-EZ? If ^{la} Yes," complete Schedule ,L, Part I	40b		1
c	Section 501(c)(3), 501(c)(4) and 501(c)(29) organizations. Enter amount of tax imposed	1000 1000 1000 1000 1000 1000 1000 100	(
	on organization managers or disqualified persons during the year under sections 4912,			
.s	4985 and 4958	140		
đ	40c re chaused by the organization	e descrip		
Æ	At organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter a alsaction? If "Yes," complete Form 8886-T	+Oe		
- ¹ ~	Elist the states with vibron a copy of this return is filed ≱. Georgia	بتت		
-: 2a	The organization's books are in care of № Janet Shore, Secretary/Treasurer Telephone no. ▶	77031	49839	
	Located at ➤ 503 Papiliton Trace, Woodstock, GA ZIP + 4 ➤		88	
೮	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	$\overline{}$	Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foleign country !>	42b		₩.
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and	7		
	Financial Appoints (FEAR).			
c	(4) any time during the cale ider year, did the organization maintain an office outside the United States? (4) Zes,* lancer the carrie of the foleign country ▶	42c	<u> </u>	1
43	Section #347(a)(1) Honekempt chantable trusts filing Form 990-EZ in held of Form 1041—Check here		. 1	> 🗌
	and enter the annount of tax-exempt interest received or accrued during the tax year		Yes	No.
4.42	Old the organization maintain any donor accessed funds during the year? If "Yes," Form 990 must be	A	100	
	completed instead of Form 980-EZ	442		V
ઇ	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		1
	Die the organization receive any payments for indoor tanning services during the year?	44c		1
	in the same of the organization filed a Form T20 to report these payments? If tho, provide an explanation in Sone time China in the contraction of	44d		✓
	Old thein ganization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
Ð	Did his eigenization receive any paymon from or engage in any transaction with a controlled antity within the releating of section 512(b)(13)? If I Yes 1 Form 990 and Schedule R may need to be completed instead of	1	7	
	Form LEG-EZ See instructions	45b	- Mai	1

	للمراجعة والمراجعة والمراجعة والمراجعة المراجعة والمراجعة والمراجع	A 18 16 A 19 19 19 19 19 19 19 19 19 19 19 19 19			Yes No
≎6	End the organization engage directly or into candidates for public office? If "Yes." of	ndirectly in political ca complete Schedule C,	ampaign activities on Pan I	behalf of or in opposi	tion was the state of the state
1	Section 531(c)(3) Organization				1.0;
	All section 501(c)(3) organization 50 and 51.		stions 47–49b and s	52, and complete th	e tables for lines
	Check if the organization used Sc	heduie O to respond	το any question in th	nis Part V!	🗆
					Yes No
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par		section 501(h) election	n in effect during the	tax . 47
43	is the organization a school as described in	n section 170(b)(1)(A)()? If "Ves' complete S	Scnedule E	. 48 🗸
49a	Did the organization make any transfers t	c an exempt non-cha	ritabie related organiz	ation?	. 493 🗸
	if fires," was the related organization a sa				. 49b
50	Complete this table for the organization's				
	employees) who each received more than	i giocingo el comber	1	(a) Health benefits,	le, enter None.
	(ਛ) ਮੋਬਾਜ਼e and †ule of each employse	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contributions to employee benefit plans, and deferred compensation	
		; 1		f f	
None	All voluntears, No compensation				
		!	•		
		· •			
		; ; ;			
		1			
		<u> </u>		<u> </u>	
f 51	Total number of other employees paid of Complete this table for the organization	s five highest compa	ensated independent	contractors who eac	h received more than
	\$100,000 of compensation from the orga		,		1 C
	(a) Maine and business address of each indeper	Len contractor	(i) Type of serv	ice (c	c) Compensation
None			1		
			-		
			· · · · · · · · · · · · · · · · · · ·		
					,
			-		
			1	•	•
d	form number of other independent contr				C
52	Did the diganization complete Sched completed Schedule A	e IIA :ərok "A ək	эстюл 501(c)(3) orga		ch a . ⊳ ☑Yes ☐ No
	penethes of perium, destage that I have examined this treet, examples Dellaration of prepare (other than	return, including act chiba an officer) is based or sli (af		ents and to the best of my lose any knowledge.	knowledge and belief, it is
Sign	Signatu Signat	MYI	May	Date	RYJAVAL
Here	Donna Sloan Beveriy Founder/C	EO (
Paid	13 · m · · · · · · · · · · · · · · · · ·	Preparer's signature	Da	ate Check	of PTIN
	erer L	1		self-empl	
	Chity Firm share a			Firm s EIN 2	
May t	i Firm's address > he IPS cuscuss this leturn unth the prepare	er shown above? See	instructions .	Phone no.	Yes □ No
					Form 990-EZ (2019)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

2019
Open to Public

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL MISSION CONNECTION INC

Employer identification number 2 6-0232037

141	WAY HOME INDOCTOR COMMECTION	1140				7,0-020	2007
Pa	rt I Reason for Public Char	rity Status (All	organizations must	comple	te this p	art.) See instruction	ns.
The	organization is not a private founda	tion because it i	s: (For lines 1 through	12, chec	k only or	ne box.)	
1							i
2	A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	Z).)	
3	☐ A hospital or a cooperative hos						
4	A medical research organization hospital's name, city, and state	-	onjunction with a hosp	oital desc	ribed in s	ection 170(b)(1)(A)(iii). Enter the
5	An organization operated for t section 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	ed by a government	al unit described in
6 7	☐ A federal, state, or local govern ☐ An organization that normally described in section 170(b)(1)	receives a subs	tantial part of its supp				the general public
8	☐ A community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	An agricultural research organi or university or a non-land-grau university:	nt college of agr	iculture (see instructio	ns). Ente	r the nan	ne, city, and state of	the college or
10	receipts from activities related support from gross investment acquired by the organization a	to its exempt fur income and uni fter June 30, 197	nctions—subject to corelated business taxal 75. See section 509(a	ertain exc ole incom)(2). (Cor	eptions, le (less se nplete Pa	and (2) no more that ection 511 tax) from art III.)	ก 33¹⁄₃% of its
11	_						
12	An organization organized and of one or more publicly support Check the box in lines 12a thro	rted organizatio	ns described in secti	on 509(a)(1) or se	ection 509(a)(2). Se	e section 509(a)(3).
a	Type I. A supporting organ the supported organization supporting organization. Ye	(s) the power to	regularly appoint or e	lect a ma	jority of t		
t	Type II. A supporting organ control or management of the organization(s). You must one	the supporting o	rganization vested in	the same			
c	Type III functionally integrits supported organization(ally integrated with,
c	Type III non-functionally integrated that is not functionally integrequirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ition requirement an	
€	Check this box if the organ functionally integrated, or T						e II, Type III
f	Enter the number of supported of						[
	Provide the following information	about the supp	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)	NONE						
(B)							·
C)							
D)							
E)							
F - A -		3					

Part							
; -	(Complete only if you checked the						alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	te Part [lf.)	
	on A. Public Support		Υ		r		
_	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) /2019	(f) Total
1	Gifts, grants, contributions, and			_	1	/ /	
	membership fees received. (Do not	20.004				/ //222 .2	
_	include any "unusual grants.")	28,391	36,493	35,509	44,258	45,303 48	189,854.48
2	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf				/ /	.	
3	The value of services or facilities						<u> </u>
	furnished by a governmental unit to the			,	<i>Y</i> /		
	organization without charge						
4	Total. Add lines 1 through 3	28,391	36,493	35,509	44,258	45,303 48	189,854.48
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)						
_	· ·		A STATE OF THE STA				400.054.40
6 Secti	Public support. Subtract line 5 from line 4 on B. Total Support	计中部 在中国	THE STATE OF THE S	全国共和国企业		東岸路里工業工	189,854.48
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	28,391	36,493	35,509		45,303 48	189,854 48
8	Gross income from interest, dividends,				-		
•	payments received on securities loans,	/	/	1		. 1	
	rents, royalties, and income from	/ .	/				
	sımilar sources	/ /	7	$ \rangle$			
9	Net income from unrelated business		, 7			·	
	activities, whether or not the business						
	is regularly carried on	/_/		<u> </u>			
10	Other income. Do not include gain or /		1	1	3]	
	loss from the sale of capital assets						•
	(Explain in Part VI.) /.	nner on to the basis - or name	many was property to the large of the	COTLORIS I 13, DOMESTICA II	e-reserved to the plane women		
11	Total support. Add lines 7 through 10						189,854.48
12	Gross receipts from related activities etc	•	•	 - Albirol Boilean		12	0
13	First five years. If the Form 990 is for the organization, check this box and stop he	•			•	ear as a section	
Secti	on C. Computation of Public Suppor				• • • • •		•••
14	Public support percentage for 2019 (line			1 column (fl)	·	14	100 %
15	Public support percentage from 2018 Sci					15	100 %
16a	331/3% support test-20/19. If the organi	ization did not	check the box	on line 13, ar	nd line 14 is 33		
	box and stop here. The organization qua						
b	331/3% support test -/2018. If the organi						
	this box and stop here. The organization	qualifies as a	publicly suppo	rted organizati	on		▶ 🗆
17a	10%-facts-and-circumstances test - 26	019. If the orga	anization did n	ot check a box	x on line 13, 1	6a, or 16b, and	l line 14 is
	10% or more, and if the organization me	eets the "facts	-and-circumsta	ances" test, ch	neck this box a	and stop here.	Explain in
	Part VI how the organization meets the "	facts-and-circ	umstances" te	st. The organi	zation qualifies	s as a publicly	supported
	organization						▶ 🗆
b	10%-facts/and-circumstances test-26	018. If the orga	anization did n	ot check a bo	x on line 13, 1	6a, 16b, or 17a	a, and line
	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization n				•	•	
40	supported organization						▶ 🗆
18	Private foundation. If the organization di instructions	a not check a	box on line 13,	16a, 16b, 17a	ı, or 17b, checl	k this box and s	see 🛌
	, 40110110						–

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

; t

	•	` ', '	
(Complete only if you	checked the box on line 10 of F	Part I or if the organization failed	I to qualify under Part II.
If the organization fai	Is to qualify under the tests liste	d below, please complete Part I	1.)

Section	Section A. Public Support							
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	-
1	Gifts, grants, contributions, and membership fees	(2) 2010						-
•	received. (Do not include any "unusual grants.")	28.391	36 4/62	35,509	44 258	45 200	46 189 8	54.
2	Gross receipts from admissions, merchandise	72,241	30, 400	99,001	11,000	10, 30	176 1 17 17 19	18
	sold or services performed, or facilities						}	
	furnished in any activity that is related to the							
3	organization's tax-exempt purpose Gross receipts from activities that are not an							-
3	unrelated trade or business under section 513							
4	Tax revenues levied for the	}						-
4	organization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							-
3	furnished by a governmental unit to the							
	organization without charge				,		1	
6	Total. Add lines 1 through 5	28001	36,493	35,509	111 250	45303	1946 199	≥4 .
_	Amounts included on lines 1, 2, and 3	28,391	78793	33,504	14/200	4.75051	- 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18
74	received from disqualified persons .	•		·	1			
b	Amounts included on lines 2 and 3							-
U	received from other than disqualified							
	persons that exceed the greater of \$5,000						ì	
	or 1% of the amount on line 13 for the year]		1	
c	Add lines 7a and 7b				-			• .
8	Public support. (Subtract line 7c from						,	4
_	line 6.)	28341	26.493	35509	44,258	45.33.	6 189,82	54,0
Secti	on B. Total Support	1 220 1 3		1-	11-11-11		· · · · · · ·	- •
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
9	Amounts from line 6	28391	36493	35509	44 258	45343.4	6 189,8	54. TA
10a	Gross income from interest, dividends,				•			
	payments received on securities loans, rents,	i	•					
	royalties, and income from similar sources .						·	-
b	Unrelated business taxable income (less	Ì						
	section 511 taxes) from businesses							
	acquired after June 30, 1975							•
	Add lines 10a and 10b					<u></u>		
11	Net income from unrelated business	ļ			1		1	
	activities not included in line 10b, whether	ĺ					ĺ	
	or not the business is regularly carried on							-
12	Other income. Do not include gain or							
	loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11,		-					40
10	and 12.)	28391	36493	35 509	44058	4.5303	189.8	ະ ປຸ
14	First five years. If the Form 990 is for the							97.
	organization, check this box and stop he	•			•			1
Secti	on C. Computation of Public Support							•
15	Public support percentage for 2019 (line			13, column (f))		15	100%	•
16	Public support percentage from 2018 Scl	. ,,,	•			16	100%	•
	on D. Computation of Investment In							•
17	Investment income percentage for 2019 (y line 13, colu	mn (f))	17	Q%	-
18	Investment income percentage from 2018		• • •	-		18	~ /%	-
19a	331/2% support tests-2019. If the organ	-	•			ore than 331/3	%, and line	•
	17 is not more than 331/3%, check this box	and stop here.	The organization	on qualifies as a	a publicly supp	orted organizat	ion . 🕨 🖪	
b	331/3% support tests-2018. If the organiz							
	line 18 is not more than 331/3%, check this	box and stop h	ere. The organi	ization qualifies	as a publicly s	upported orgar	nization 🕨 🗀	
20	Private foundation. If the organization di	d not check a	box on line 14.	, 19a, or 19b, c	check this box	and see instru	ictions 🕨 🗌]

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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.

7

- 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).
- 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.
- 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.
- 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.
- **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.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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).
- 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).
- 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.
- **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**.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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		Yes	No-
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Part	IV 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)		A S	
	below, the governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b	<u></u>	
	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		L
Secti	on B. Type I Supporting Organizations			
	·	rieses =	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
		1		CONTRACT AND
2	Did the organization operate for the benefit of any supported organization other than the supported			
1	organization(s) that operated supervised, or controlled the supporting organization? If "Yes," explain in Part	用語		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	造型	## TE	
		2		<u> </u>
Secti	on C. Type II Supporting Organizations		120	T
		In Carried In T	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	7		
	the supported organization(s).			
<u></u>] 1		L
Secu	on D. All Type III Supporting Organizations		V	
	Did the average transition arounds to each of its average transitions, but the last day of the fifth month of the	电影 型	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		- 1
2		基施	经证	
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	TE SUPPLY	E SERVICE
3	By reason of the relationship described in (2), did the organization's supported organizations have a		TO PE	15 14 F
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		. 1958
Section	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	inetnı	ction	<u></u>
a	The organization satisfied the Activities Test. Complete line 2 below.	,,,,,,,		<i>-</i>
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.			No
- a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	200		
ų	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	Marie and the	cara.
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		超過	慶
	activities but for the organization's involvement.	2b		THE PERSON
3	Parent of Supported Organizations. Answer (a) and (b) below.	15.5		100
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		神で語り
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		The same	THE ES
U	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard	3b	table in	

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3)	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	g tru nizat	st on Nov. 20, 1970 (explaitions must complete Section	n in Part VI). See ns A through E.
Section A—Adjusted Net Income		(A) Pṛior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
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	建筑的交流,在1922年	
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).		egrated Type III supporting	organization (see

Part	V - Type III Non-Functionally Integrated 509(a)(3	s) Supporting Organi	zations (continued)	
Sect	on D—Distributions	`		Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5`	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	sponsive	
9	Distributable amount for 2019 from Section C, line 6	7		
10	Line 8 amount divided by line 9 amount			
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6	排程的工程是		
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
C	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years		The said the second residence and the said the s	
b	Applied to 2019 distributable amount			an test Prince division distribution i transfer de la
<u> </u>	Remainder. Subtract lines 4a and 4b from 4.	British Care See See See See See See See See See S		
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			表现的现在分词是
6	Remaining underdistributions for 2019. Subtract lines 3h			•
	and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j	新教育。1257年(中文百姓) 之中		
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			医温度性 医二种 医二种 医
С	Excess from 2017			
d	Excess from 2018			
_	Evenes from 2010		F THE PARTY OF THE	THE PERSON NAMED IN COLUMN TO PARTY OF THE P

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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