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Pa	rt.l	Summa	ry						
Т	1	Briefly des	cribe the organization's	s mission or most significant	activities Non-	profit youth lacro	ssc orga	nization support	ng _
ပ္ပ		-	_	and summer leagues for area b		, ·			
Activities & Governance									
5,	2	Check this	oox 🗲 🔲 if the organi	zution discontinued its opera	tions or dispos	ed of more than	25% of	ils riet ássets.	
Š	Ġ	Number of	voting members of the	e governing body (Part VI, line	e 1aı		3		11
5	4			embers of the governing bod		1b)	4		0
3	5			oyed in calendar year 2019 (F			5		0
	6	Total numb	par of volunteers (estim	rate if necessary)			6		50
2	7a	Total unrel	ated business revenue	from Part VIII column (C) Iii	e.12		7a		0
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-1						2020 O	)r [	Current Year	r
.	8	Contribute							
Ž	9	Program s	cryice revenue (Part VI	ll, line 2g) . ကြ	NOV 1 0	S	175,046		296,224
Rovemue	10			ب إيار and 7d ). Ines 3, 4 and 7d		- <u> </u>   <u>- </u>			15
- 1	11		nue (Part VIII, column (	(A), lines 5: 6d   8c: 9c, 10d-ar			<u>i</u>	<u> </u>	
- 1					1000 (A) line 101				296,239
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Part		ce Accomplishments a response or note to any line in this f	Part III	
1	Briefly describe the organization's mi	·		
	•	rls to learn the fundamentals of lacrosse in	a safe, respectful, and fun envi	ironment.
	***************************************			
2		ignificant program services during the y		
	If "Yes," describe these new services	on Schodulo O	· · · · · · · · · · · ·	. LYES VINO
3	•	iting, or make significant changes in	how it conducts any progr	am
3				
	If "Yes," describe these changes on S			
4	. •	service accomplishments for each of it	s three largest program service	ces, as measured b
•		(c)(4) organizations are required to repo		
	the total expenses, and revenue, if an	ny, for each program service reported.	·	
4a		75,062 including grants of \$		
	Lacrosse League Fees			
	(Code: \( \sum_{1} \sum_{2} \)	40 000 maludus seeds of C	0\/D======	40.000 \
4b		40,989 including grants of \$		
		••••••		
			·	
4-	(Code \/Evpenses \$	27.746 including grants of \$	a) /Povonuo ¢	27.746\
4c		37,746 including grants of \$	o) (Nevenue \$	37,746)
	Supplies for the sport			
		••••••••		
<u></u>	Other program convect (December 2)	Schodulo ()	<u> </u>	
4d	Other program services (Describe on (Expenses \$ 129,663 including	•	\$ 442.427)	
4e	Total program service expenses ▶	283,460	142,427)	
		200,100		

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u>*</u>	1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<b>✓</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		1
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<b>\</b>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<b>\</b>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓_
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		<b>✓</b>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		<u>·</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<b>✓</b>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓



# Part IV Checklist of Required Schedules

			163	140
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		7. 7.	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		``
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		

Part	Checklist of Required Schedules (continued)			·
•			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>✓</b>
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .	28b		1
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		1
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38		1
Part				
	Check if Schedule O contains a response or note to any line in this Part V		<del></del> ;	
4 -	Entantha number reported in Boy 2 of Form 1006 Enter 0 if not analysis is	638349AB	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		✓

art	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
•			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
20	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		1
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<b>1</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		1
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
74	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	,	وبريد	39
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>/</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>✓</b>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		<b>√</b>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b>✓</b>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor adviced fund maintained by the	8	<del></del>	· • · •
_	sponsoring organization have excess business holdings at any time during the year?	0		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?	9a		7
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		7
b 10	Section 501(c)(7) organizations. Enter	00		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter			
 а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<b>√</b>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<b>✓</b>
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	L	<b>√</b>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		<b>✓</b>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		<b>/</b>
_	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<b>✓</b>
	If "Yes " complete Form 4720. Schedule O.			1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See ir	nstruc	tions.
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 11		-	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . 1b	)		`
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	*Bigs colo	<b>*</b> (
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>✓</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	ļ	<b>✓</b>
6	Did the organization have members or stockholders?	6	ļ <u> </u>	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		<b>/</b>
8	Did the organization contemporancously document the meetings held or written actions undertaken during the year by the following:	u. G	- 1	··••
а	The governing body?	8a	<b>√</b>	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	<b>✓</b>	├
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		<u> </u>
Secti	on B. Policics (This Section B requests information about policies not required by the Internal Rever	uo Ci	000.) Yes	No
10-	Did the expensation baye legal chapters, branches, or affiliator?	10a	res	<b>√</b>
10a	Did the organization have local chapters, branches, or affiliates?	IUa		<del>                                     </del>
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a		<b>-</b>
b 12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		<b>✓</b>
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		د د	·
а	The organization's CEO, Executive Director, or top management official	15a		<b>7</b>
b	Other officers or key employees of the organization	15b		✓
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		-	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		7
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	1942	6 (II)	944. B
	organization's exempt status with respect to such arrangements?	16b		✓
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► Minnesota			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website Another's website Upon request Other (explain on Schedule O)	Γ (Sec	tion s	501(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f inter	rest p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	<b>&gt;</b>	
	The Kura Croup LLC 750 Barnes Lake Dr. NVA MN 55207			

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Part VII	Compensation of Officers,	Directors, Trustees,	Key Employees, Highest	Compensated Employees, and
	Independent Contractors			

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Check this box in notifier the organization no		1		(C)				1		
<b>(A)</b> Name and title	(B) Average			neck		e than o		(D) Reportable	(E) Reportable	(F) Estimated amount
	hours	office	er and	dad	lirect	or/trust		compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
40			1 m		ļ	ated				
(1) Chris Orcutt	0	ļ		١,					_	_
President	0		<u> </u>	✓	-	$\vdash$		0	0	0
(2) Amy Carleton				١,	Ì				_	_
Secretary	0	-	<u> </u>	✓	ļ			0	0	0
(3) Jeremy Lane	0	-	1	١,						_
Director	0		<del> </del>	✓	<u> </u>			0	0	0
(4) Jody Bergstrom	0	ł		١,				_		
Vice President	0	<u> </u>	<u> </u>	✓	<b></b> -			0	0	0
(5) Jaime Wallis	0	-		١,					_	_
Director	0		ļ	✓	-			0	0	0
(6) Chuck Friedbauer	0			,	1					
Director	0			✓	<b> </b>			0	0	0
(7) Seth Hilgert	0	-		١,	ļ					
Director	0	-		✓		$\vdash$		0	0	<u>0</u>
(8) Chris Kaufmann	0	-		,	Ì				_	_
Vice President	0			✓_	-			0	0	0
(9) Chad Lee	0	ł		,					_	_
Treasurer	0			✓		-		0	0	0
(10) Henry Whitney	0			,					_	_
Director	0		<u> </u>	<b>✓</b>	<u> </u>			0	0	0
(11) Tom Smith	0	ł		,						_
Director	0		ļ	✓	ļ			0	0	0
(12)	 									
(13)										
(14)										
	1					L				<u> </u>

Part	VII Section A. Officers, Directors,	Γrustees,	Key I	Emi	plo	yee	s, an	d F	lighest Compe	nsated Emplo	yees (continued)
					((	C)					
	(A)	(B)				ition			(D)	(E)	(F)
	Name and title	Average					e than o		Reportable	Reportable	Estimated amount
		hours					or/trus		compensation	compensation	of other
		per week (list any	익호	5	Q.	줎	a E	Fo	from the organization	from related organizations	compensation from the
		hours for	individual trustee or director	ž	Officer	Key employee	함	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
		related	cto	ğ	-	큘	st co	۳			related organizations
		organizations below	7 हू	ᆲ		oye	ă	l	]		1
		dotted line)	stee	Institutional trustee		"	Highest compensated employee	1			
				ď			ated				
(15)				_							
X			1	ŀ							
(16)								<b>-</b>			
1			1								
(17)			<del>                                     </del>								
X:::7			1								
(18)			1	-		_		_			
X.27			1			1					
(19)											
3.1.22			1								
(20)											-
3==22		·	1								
(21)											
3=.:7			1							1	
(22)			<b>†</b> • • •								
37.72			1								
(23)				$\vdash$							
3			1								
(24)											
3=.22			1								
(25)											
35.17			1								
1b	Subtotal		<del>'</del>	٠	_			<b>&gt;</b>	0	0	0
С	Total from continuation sheets to Part	VII, Sectio	n A					<b></b>	0	0	<del></del>
d	Total (add lines 1b and 1c)							<b>&gt;</b>	0		0
2	Total number of individuals (including but							e) w	ho received mor	e than \$100,000	
-	reportable compensation from the organi							•	0	•	
						_					Yes No
3	Did the organization list any former of	officer, dire	ector.	tru	stee	e. k	ev e	lam	ovee, or highes	st compensated	
_	employee on line 1a? If "Yes," complete										3 ✓
4	For any individual listed on line 1a, is the							n a	nd other compe	nsation from the	
·	organization and related organizations										
	individual			. '					· · · · ·		4 🗸
5	Did any person listed on line 1a receive of	r accrue co	ompei	ารส	tion	froi	m anv	un!	related organizat	tion or individua	
•	for services rendered to the organization										5 ✓
Section	on B. Independent Contractors										
1	Complete this table for your five high	nest compo	ensate	ed	ınde	eper	ndent	co	ntractors that r	eceived more	than \$100,000 of
•	compensation from the organization. Rep										
	(A)	·····						<u> </u>	(B)		(C)
	Name and business add	ress							Description of serv	rices	Compensation
											·
<del></del>											<del></del>
						-		<u> </u>			
2	Total number of independent contractor	rs (includir	na hu	t n	ot i	lmit	ed to	th	ose listed abov	e) who	
-	received more than \$100,000 of compens								0	-,	144

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Part VIII		Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII											
		Ondok ii Odnoduje	0 00				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514			
Contributions, Gifts, Grants and Other Similar Amounts	1a b	Federated campaig Membership dues			1a 1b								
عَ ق	С	Fundraising events			1c		]						
T A	d	Related organization	ns .		1d	<u>-</u>	]						
Ω ie	е	Government grants	(cont	ributions)	1e		1						
Sir	f	All other contribution											
utic le		and similar amounts no	ot incli	uded above	1f					ĺ			
d t	g												
out nd		lines 1a-1f			1g								
a C	h	Total. Add lines 1a-	<u>-1f .</u>	• • •	<u> </u>								
6)						Business Code				<u> </u>			
ķ	2a	Player Fees					296,224	296,224					
Ser	b												
m (	c d							<u></u>					
Program Service Revenue	e						<del> </del>						
ro	f	All other program se											
	g	Total. Add lines 2a-					296,224			· · · · · · · · · · · · · · · · · · ·			
	3	Investment income					200/22						
		other similar amoun					15	15					
	4	Income from investr											
	5	Royalties				🕨							
				(ı) Rea	ıl	(ii) Personal				•			
	6a	Gross rents	6a										
	b	Less: rental expenses	6b										
	С	Rental income or (loss)		<u> </u>									
	đ	Net rental income o	r (los:	1									
	7a	Gross amount from		(i) Securi	ties	(iı) Other							
		sales of assets	l _										
	_	other than inventory	7a				4						
enne	b	Less cost or other basis	76				1						
		and sales expenses . Gain or (loss)	7b	ļ									
Re	c d						-						
Other Rev					<u> </u>	i i							
ᅙ	Oa	events (not including											
		of contributions re	porte	d on line									
		1c). See Part IV, line	e 18		8a								
	b	Less: direct expens	es .		8b								
	С	Net income or (loss)	) from	n fundraisir	ig eve	nts ▶							
	9a	Gross income f					1						
	_	activities. See Part I			9a					ļ			
		Less direct expens			9b								
	С	Net income or (loss)	•		CTIVITIE	es <u>.</u>	<del> </del>			-			
	10a	Gross sales of in			40-								
	<b>1</b> _	returns and allowan			10a 10b		-[						
	b	Less: cost of goods Net income or (loss)							<del> </del>				
		HOLINGOINE OF 1033	, 11 011	. 30103 01 11		Business Code							
Miscellaneous Revenue	11a												
scellaneo Revenue	b												
ella ve	C												
S &	d	All other revenue											
Σ	e	Total. Add lines 11a				>	L						
		Total revenue, See				<b>&gt;</b>	296 239	296 239					

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	or note to any line	in this Dart IV	must complete colu	mn (A).
	Check if Schedule O contains a response			(0)	
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16			.,	
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits			1	
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
	Accounting				
C	f				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				·
16	Occupancy				
17	Travel	3,120	3,120		
18	Payments of travel or entertainment expenses	0,120	0,120		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	25,113	25,113		<del></del>
20	Interest				
21	Payments to affiliates				<del></del>
22	Depreciation, depletion, and amortization .				
23	Insurance	750	750		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Lacrosse League Fees	75,062	75,062		
b	Uniforms	40,989	40,989		
С	Supplies	37,746	37,746		
d	Equipment	21,639	21,639		
e	All other expenses	79,041	79,041		
25	Total functional expenses. Add lines 1 through 24e	283,460	283,460		
26	Joint costs. Complete this line only if the	200,400	200,400		<del></del>
	organization reported in column (B) joint costs				
	from a combined educational campaign and		j		
	fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Pa	<del></del>		
		Check if Schedule O contains a response or note to any line in this Pa	<del></del>		
	_		(A)		
			(A) Beginning of year		( <b>B)</b> End of year
- 1	1	Cash-non-interest-bearing	153,213	1	165,992
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	the had a date going a within	5	Surface to be leave a minimal of the surface of the
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) $$ .		6	graph the service of the Constant of the
Ş.	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ا ته	9	Prepaid expenses and deferred charges		9	
1	0a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
1	1	Investments—publicly traded securities		11	
1	2	Investments—other securities. See Part IV, line 11		12	
1	3	Investments—program-related. See Part IV, line 11		13	
1	4	Intangible assets		14	
1	5	Other assets. See Part IV, line 11	17,233	15	17,233
1	6	Total assets. Add lines 1 through 15 (must equal line 33)	170,446	16	183,225
1	7	Accounts payable and accrued expenses		17	
1	8	Grants payable		18	
1	9	Deferred revenue		19	
2	20	Tax-exempt bond liabilities		20	
2	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	2	Loans and other payables to any current or formor officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%		,, <u>,,</u>	TELL AND A STORY
<u>a</u>		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
2	24	Unsecured notes and loans payable to unrelated third parties		24	
2	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		25	
2	26	Total liabilities. Add lines 17 through 25	0	26	C
ssets or Fund Balances		Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.			
<u>a</u>   2	27	Net assets without donor restrictions		27	f
Ba	., 28	Net assets with donor restrictions		28	
힏		Organizations that do not follow FASB ASC 958, check here ▶ ✓			
<u> </u>		and complete lines 29 through 33.	,		'
ر اة	9	Capital stock or trust principal, or current funds	0	29	
ets 3		Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
388		Retained earnings, endowment, accumulated income, or other funds		31	0

32

33

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183,225

183,225

170,446 32

170,446 33

_	-4	^
Page	- 1	~

						.3
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		· · ·			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			29	3,23 <u>9</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			28	<u>33,460</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			1	2,779
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) [	4			17	0,446
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain on Schedule O) [	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			18	3,225
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other					1
	If the organization changed its method of accounting from a prior year or checked "Other," ex	(plain	ın			
	Schedule O.					لــــا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		·	2a	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or			
	reviewed on a separate basis, consolidated basis, or both					
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		_			
b	Were the organization's financial statements audited by an independent accountant?	•		2b		<b>✓</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed or	n a			
	separate basis, consolidated basis, or both:		Į			'
	Separate basis Consolidated basis Both consolidated and separate basis		_			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ove					
	the audit, review, or compilation of its financial statements and selection of an independent accounta-		_	2c	✓_	
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın	on			
	Schedule O.		_		· 	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in t				
	Single Audit Act and OMB Circular A-133?	•	·  -	3a		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?					_
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits		3b		
				Forn	ւ 990	(2019)

### **SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Employer identification number

OMB No 1545-0047 2019

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

Inspection

23 <u>H</u> a	awks Youth Lacrosse Association					81-06				
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.									
The o	he organization is not a private foundation because it is (For lines 1 through 12, check only one box.)									
1	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).)									
2							<i>)</i>			
3	A hospital or a cooperative hos A medical research organizatio	pital service org	janization described if	n section	1 7 (0)(17 (18)(17 (18)	)(A)(III).	(iii) Enter the			
4	hospital's name, city, and state		injunction with a nost	Jilai desc	nbeu m s	ection trotby(1)(A)(	ini). Enter the			
5	An organization operated for t		college or university	owned o	r operate	d by a government	al unit described in			
•	section 170(b)(1)(A)(iv). (Comp		conege of anivolony	0441100	Орогин	d by a government	ar arme addornood			
6	A federal, state, or local govern	=	mental unit described	ın sectio	on 170(b)	(1)(A)(v).				
7	An organization that normally i						the general public			
	described in section 170(b)(1)(									
8	A community trust described in	section 170(b)	(1)(A)(vi). (Complete I	Part II.)						
9	An agricultural research organiz	zation described	d in section 170(b)(1)	(A)(ix) op	crated in	conjunction with a l	and-grant college			
	or university or a non-land-grar university	nt college of agr	iculture (see instructio	ons). Ente	r the nan	ne, city, and state of	the college or			
10	✓ An organization that normally re-	eceives (1) more	e than 331/3% of its st	ipport fro	m contril	outions, membership	o fees, and gross			
	receipts from activities related support from gross investment	to its exempt ful income and uni	nctions—subject to co related business taxal	ertain ext ble incom	ceptions, ie (less se	and (2) no more that ection 511 tax) from	businesses			
	acquired by the organization af	ter June 30, 197	75. See <b>section 509(</b> a	ı <b>)(2).</b> (Cor	nplete Pa	art III.)				
11	An organization organized and									
12										
	of one or more publicly suppo Check the box in lines 12a throi									
_		=								
a	the supported organization									
	supporting organization. You									
b	Type II. A supporting organ	nization supervis	ed or controlled in co	nnection	with its s	upported organizati	on(s), by having			
	control or management of t	he supporting o	rganization vested in	the same						
	organization(s). You must o	-					n			
С	Type III functionally integral its supported organization(s						ally integrated with,			
d		• •					orted organization(s)			
	that is not functionally integ									
	requirement (see instruction									
е		zation received	a written determination	on from tl	ne IRS th	at it is a Type I, Type	e II, Type III			
	functionally integrated, or T			oporting	organizat	on.				
f	Enter the number of supported o						[			
g	<u> </u>			· · ·						
	(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–10		rganization or governing	(v) Amount of monetary support (see	(vi) Amount of other support (see			
			above (see instructions))	docu	ment?	instructions)	instructions)			
				Yes	No					
(A)										
(B)										
, D,			·							
(C)	1									
				ļ						
(D)										
··				<del> </del>						
(E)										
Tota		· · · · · · · · · · · · · · · · · · ·	STATE OF THE PARTY OF THE PARTY.	distant.	1					

Part	(Complete only if you checked th	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
<del></del>	Part III. If the organization fails to	qualify unde	er the tests li	sted below, p	lease compl	ete Part III.) /	
	on A. Public Support dar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2013	(0) 2010	(6) 2017	(d) 2016	(e) 2019	_(i) 10tai
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						
• 46-	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				/		<del></del>
Sect	on B. Total Support				/		
	idar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(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		/				<del></del>
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for th						
	organization, check this box and stop her			<u> </u>	· · · · ·		· · <b>&gt;</b> 🗆
	on C. Computation of Public Suppor					<del>,</del>	
14	Public support percentage for 2019 (line 6	• • •	y -	. , ,		14	
15 16a	Public support percentage from 2018 Sch 331/3% support test—2019. If the organiz			 v on line 13 ar		15	chook this
104	box and <b>stop here.</b> The organization qual				id line 14 is 33	· · · · · · · · · · · · · · · · · · ·	Crieck this . ► □
b	331/3% support test—2018. If the organization of this box and stop here. The organization of	zation did ngt	check a box c	on line 13 or 16	a, and line 15		
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization	ets the facts-	and-circumst	ances" test, ch	eck this box a	and stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part VI how the organization in supported organization	tion meets the eets the "fact	e "facts-and-d s-and-circums 	circumstances" stances" test.	test, check the organization	this box and son qualifies as	top here. a publicly
18	Private foundation. If the organization did	d not check a l	box on line 13	, 16a, 16b, 17a	, or 17b, checl	k this box and s	see .
	instructions					<u> </u>	▶ 🗆
	<del></del>				Sch	edule A (Form 990	or 990-EZ) 2019

## 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)

	If the organization fails to qualify	under the te	sts listed belo	w, please co	mplete Part I	1)	
	on A. Public Support	·					
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	191,083	188,873	161,983	175,046	296,224	1,013,209
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	191,083	188,873	161,983	175,046	296,224	1,013,209
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
~	received from other than disqualified						
	persons that exceed the greater of \$5,000		1				
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from	TE LENGTH			14 m = 10 5 3 mm	人。到海性等"品种	
•	line 6)			The state of the s			1,013,209
Secti	on B. Total Support	14 14 15 22 444	7 . 1212 4.24		FU 32 112 20		1,013,203
	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	191,083	188,873	161,983	175,046	296,224	1,013,209
10a	Gross income from interest, dividends,			•	·		
	payments received on securities loans, rents,						
	royalties, and income from similar sources					15	15
b	Unrelated business taxable income (less		·				
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b		-			15	15
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on		i				
12	Other income Do not include gain or						
	loss from the sale of capital assets		ļ				
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	191,083	188,873	161,983	175,046	296,239	1,013,224
14	First five years. If the Form 990 is for the	he organization	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a section	
	organization, check this box and stop he	ere					▶ 🗆
Secti	on C. Computation of Public Suppo	rt Percentag	е				
15	Public support percentage for 2019 (line	8, column (f), d	livided by line	13, column (f))		15	100 %
16	Public support percentage from 2018 Sc	hedule A, Part	III, line 15			16	100 %
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2019	(lıne 10c, colun	nn (f), divided b	y line 13, colu	mn (f))	17	0 %
18	Investment income percentage from 201					18	0 %
19a	331/3% support tests-2019. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2018. If the organic						
	line 18 is not more than 331/3%, check this	box and stop h	ere. The organ	zation qualifies	as a publicly s	upported organi	zation 🕨 🔽
20	Private foundation. If the organization d	id not check a	box on line 14	, 19a, or 19b, c	check this box	and see instruc	tions 🕨 🗌

### **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.)

Se	ction	À.	Αll	Supporting	Org	anizations
----	-------	----	-----	------------	-----	------------

ecti	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 <b>Part VI</b> how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	<b>1</b>		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a	أستسأ	10,18
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 <b>Part VI</b> when and how the organization made the determination	3b	N. S.	100 m
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с	,	
4a	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a	1 1 1 1	ž Ž.
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> 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 <b>Part VI</b> 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	The state of the s	100
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 <b>Part VI</b> , 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		一大 一
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	ì . , s	II (5 )
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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 <b>Part VI</b> .	6		大大
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	<u> 8</u>	3	\$ 170 \$6.
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 <b>Part VI</b> .	9a	7 17	Se se se
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 <b>Part VI.</b>	9b	31.23	
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c		À.
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	10a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

**b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings)

10b

	(FA) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		r	age o
Part	Supporting Organizations (continued)			
•			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	- 44	. " de 18	34 F 3
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	2 5 2 2 2		10 N
	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 <b>Part VI.</b>	11c		
	on B. Type I Supporting Organizations	110		<u> </u>
	on b. Type I dapporting digunizations	Т	Yes	No
_	Dollar division division as a second such as of one or many as monated assessment as a basic the many attention	30 1 THE AT 1	100	300
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		1	463 K
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	ر جور مقیده	2 2 3	
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or	學例	4-1-1	25.4
	controlled the organization's activities. If the organization had more than one supported organization,	المراجعة المراجعة	, , , , , , , , , , , , , , , , , , ,	1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	100	, , , , , , , , , , , , , , , , , , ,	1,7
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	577		8 2
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>		1	100
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		و من المنظمة ا منظمة المنظمة	1.0 ( )
	supervised, or controlled the supporting organization	2	1	33360-2
So a ti	on C. Type II Supporting Organizations			
secu	on C. Type it Supporting Organizations			<b>.</b>
		1250 1° Sul	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	7年代	7	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	2. 2.54		
	or management of the supporting organization was vested in the same persons that controlled or managed	- 10		
	the supported organization(s)	1		
Secti	on D. All Type III Supporting Organizations			
		T	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	5. (A)	-3 - ,	720 5 40 19
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	10 mg	·	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	20	* ,	4.7
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	232		2
•		h 20 412 4	3. 1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		ر د	100
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	State wi	شنش	انتشتا
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		4-0-7
3	By reason of the relationship described in (2), did the organization's supported organizations have a	6	1 1 1 1 to 1	8.2
	significant voice in the organization's investment policies and in directing the use of the organization's		170	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		نشئن	1 Table 1
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstruc	tions	s)
а	☐ The organization satisfied the Activities Test. Complete line 2 below			,
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below</i>			
c	The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity (	see ins	truct	ionel
2	Activities Test Answer (a) and (b) below.		Yes	·
		2190 -	163	* - 1
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	300	Ö, '	Jan San
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>	3 3		Marin Control
	those supported organizations and explain how these activities directly furthered their exempt purposes,	4 38	Artol	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	how the organization was responsive to those supported organizations, and how the organization determined	2		100
	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	13		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1	· ·	1
	reasons for the organization's position that its supported organization(s) would have engaged in these	逐	, er ar er Klass (	23.5
	activities but for the organization's involvement	2b		المنحمد
3	Parent of Supported Organizations Answer (a) and (b) below.	\$ \$7.34	3, -	3
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1		Sec. 1
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	33	كت	المستعدين
_	· · · -	3a	91 3	10
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		تعسنفة	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		<u> </u>

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	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			
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
<b>b</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)	1		
2 Acquisition indebtedness applicable to non-exempt-use assets	2	11 10 10 10 10 10 10 10 10 10 10 10 10 1	in the state of the state of
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	The state of the s	
2 Enter 85% of line 1	2	3-2967 1. 你只被家一个路边	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	<b>医外域不是,位于第</b>	, , , , , , , , , , , , , , , , , , , ,
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5	TARRELIES TO THE	
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 in	tegrated Type III supporting	organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Secti	ion 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	···		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	ınızatıons	
4	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)		····	
<u>         6                           </u>	Other distributions (describe in Part VI) See instructions			
	Total annual distributions. Add lines 1 through 6	,		
8	Distributions to attentive supported organizations to which (provide details in <b>Part VI</b> ). See instructions	h the organization is res	sponsive	
9	Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6	STATE PROPERTY	· · · · · · · · · · · · · · · · · · ·	
2	Underdistributions, if any, for years prior to 2019			The state of the s
	(reasonable cause required—explain in Part VI) See			THE PART OF THE PA
	instructions	156. 15 A. S. P. E.	was as a second second second	是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
3	Excess distributions carryover, if any, to 2019	Sear Carrier Marie	The second second	是一个人,但是一个人的一个人的一个人。 第一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的
a	From 2014		13.6.4.3.50	The state of the s
b	From 2015	Line Transport	· 海绵、水杨、	THE PROPERTY OF THE
c	From 2016		1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	The state of the s
d	From 2017	<b>《李明》(1984)</b>	A SUBSTRICT AND SOLVEN	<b>教教以李宗教教以《李宗奉》</b>
<u>e</u>	From 2018	一种 ""		一一一一一一一一一一
f	Total of lines 3a through e	26 2 15 15 15 15 15 15 15 15 15 15 15 15 15	1、発展を関する。	The Months Aug
<u>g</u>	Applied to underdistributions of prior years	THE PASS TOWN	and the same of the	<b>西班马维斯 ) 经</b> 国
h	Applied to 2019 distributable amount	· 电影响 一种 二次 "是是这个		८. दरक्षणस्य स्थाप्तः । क्षेत्रसम्
	Carryover from 2014 not applied (see instructions)		ANT TO LET STORY OF THE STORY O	B 100 1 10 10 10 10 10 10 10 10 10 10 10
	Remainder Subtract lines 3g, 3h, and 3i from 3f		· 大學學 1988年	· 大学 · 大學
4	Distributions for 2019 from	<b>建筑</b> 第二十二章		
	Section D, line 7 \$	S. A. C. A. C. A. C.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	<b>第一次</b>
a	Applied to underdistributions of prior years	The state of the s	Property of	事語 は悪い さご
b	Applied to 2019 distributable amount	以上的自己的是一种的。 1000年12月 12日		TO A PLANT OF THE
<u>c</u>	Remainder Subtract lines 4a and 4b from 4	I CAR BAIRS YURD	Frank State	Market with water the will also
5	Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2. For result	<b>学课文学会演员</b>		<b>阿里尔斯</b> 丁里克
	greater than zero, explain in <b>Part VI.</b> See instructions			
	The state of the s	· · · · · · · · · · · · · · · · · · ·	  8. 智知さる <b>  </b> 7. <b>数間</b> 576	Million & Marie Marie Land
6	Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions	<b>《李教教》</b>	The state of the s	
7	Excess distributions carryover to 2020. Add lines 3j and 4c	COUNTY ENDING THE THROUGH		
8	Breakdown of line 7	L'AM CHANGE	The state of the s	
a	Excess from 2015	a part of the same of the same	THE PARTY TO SEE THE TENTON	Strate a Walter State of the St
<u>b</u>	Excess from 2016 .	THE STATE OF THE S	Control of the contro	
	Excess from 2017	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Le de la maria de la contra del la contra de la contra del la contra de la contra del la co	The same of the sa
d	Excess from 2018	A SECTION OF THE PARTY	から ないかい はいない	
	Excess from 2019	医病性 海州流气小	The state of the s	July 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information. (See instructions)
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#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## 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.

▶ Attach to Form 990 or 990-EZ.

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

2019 Open to Public Inspection

OMB No 1545-0047

Name of the organization	Employer identification number
C3 Hawks Youth Lacrosse Association	81-0669806
Form 000 Port III June Ad. Other Evenmen	
Form 990 Part III, Line 4d - Other Expenses	
EXPENSES	
EXPENSES	
Schools \$37,052	
Officials \$36,620	
Farry 2014 620	
Equipment \$21,639	
Conferences/Meetings \$25,113	
Rent Expense \$3,548	
Travel Expenses \$3,120	
Maintenance \$1,921	
Maintenance \$1,821	
Insurance \$750	
Total = \$129,663 Equals Line 4d	
Form 990 Part IX, Line 24e - All Other Expenses	
Schools \$37,052	
Officials #25 520	
Officials \$36,620	
Rent Expense \$3,548	
Maintenance \$1,821	
Total =\$79,041 Equals Line 24e	