	000
Form	330

Return of Organization Exempt From Income Tax

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

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information

20**19** Open to Public

OMB No. 1545-0047

Inte	rnal Revei	nue Service		is and the late	estimo	mation.		Inspection
<u>A</u>	For the	e 2019 calen	lar year, or tax year beginning ,	2019, and end	ding			, 20
в	Check i	if applicable:	C Name of organization				D Emplo	oyer identification number
	Address	s change	Doing business as					
	Name c	change	Number and street (or P.O. box if mail is not delivered to street a	ddress)	Room	/suite	E Teleph	none number
	Initial re	eturn						
	Final ret	turn/terminated	City or town, state or province, country, and ZIP or foreign posta	l code				
	Amende	ed return					G Gross	receipts \$
	Applicat	tion pending	F Name and address of principal officer:			H(a) Is this a grou	up return fo	r subordinates? 🗌 Yes 🗌 No
						H(b) Are all su	bordinate	es included? 🗌 Yes 🗌 No
I	Tax-exe	empt status:	501(c)(3) 501(c) () ◀ (insert no.) 4947	(a)(1) or 52	7	If "No," at	tach a lis	st. (see instructions)
J	Website	e: 🕨	· · · · · · · · · · · · · · · · · · ·			H(c) Group ex	emption	number 🕨
к	Form of	organization:	Corporation	L Year of for	rmation:		M State	of legal domicile:
Ρ	art I	Summa		I		I		
	1		cribe the organization's mission or most significant a	ctivities:				
è		,						
Governance								
ern	2	Check this	box ►	ons or dispos	ed of r	more than 2	5% of	its net assets.
⁰	3		voting members of the governing body (Part VI, line				3	
∞ ∞	4		independent voting members of the governing body	,			4	
es	5		per of individuals employed in calendar year 2019 (Pa	-	-		5	
iviti	6		per of volunteers (estimate if necessary)				6	
Activities &	7a		ated business revenue from Part VIII, column (C), line				7a	
	b		ed business taxable income from Form 990-T, line 39				7b	
		Not unrela			· ·	Prior Year	10	Current Year
	8	Contributio	ns and grants (Part VIII, line 1h)					
anc	9		ervice revenue (Part VIII, line 2g)					
Revenue	10	-	income (Part VIII, column (A), lines 3, 4, and 7d)					
Re	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and					
	12		ue—add lines 8 through 11 (must equal Part VIII, colum					
	13		similar amounts paid (Part IX, column (A), lines 1–3)		_			
	14		aid to or for members (Part IX, column (A), line 4)					
	15		her compensation, employee benefits (Part IX, column (A), interview.					
ses	16a		al fundraising fees (Part IX, column (A), line 11e)					
neu			aising expenses (Part IX, column (D), line 25) ►					
Expenses	b 17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)					
	18		nses. Add lines 13–17 (must equal Part IX, column (A)	 line 25)				
	19		ss expenses. Subtract line 18 from line 12					
_ v	-			<u></u>		nning of Curre	nt Voor	End of Year
Net Assets or Fund Balances	20	Total asso	s (Part X, line 16)		Degi		ni i cai	
Asse Bala	20							
Vet/	21							
	22 art II		or fund balances. Subtract line 21 from line 20 . re Block					
				le le	4-4-	4		
			I declare that I have examined this return, including accompanying e. Declaration of preparer (other than officer) is based on all informat					iy knowledge and belief, it
	.,	,					, ···	
c:,	nn	Cianat	ire of officer			Data		
Siq	-	Signat	ire of officer			Date		
He	e	Time	r print name and title					
			r print name and title			-		

Paid Preparer	Print/Type preparer's name	Preparer's signature	Date		Check if self-employed	PTIN			
	Firm's name ► Firm's address ►	Firm's Phone	EIN ►						
May the IRS discuss this return with the preparer shown above? (see instructions)									
For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y									

Form 99	0 (2019)			Page 2
Part		e Accomplishments response or note to any line in this Pa	art III	
1	Briefly describe the organization's miss			<u>· · · </u>
•				
2	Did the organization undertake any sig	nificant program services during the ye	ar which wore not listed on the	
2	prior Form 990 or 990-EZ?			/es 🗌 No
3	,	ng, or make significant changes in h	ow it conducts any program	
Ū	services?			res 🗌 No
4	-	ervice accomplishments for each of its	three largest program services as r	nessured by
4)(4) organizations are required to report		
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	('
4d	Other program services (Describe on S		* ``	
4e	(Expenses \$ including Total program service expenses ►	grants of \$) (Revenue :	Þ)	
-+0				

Form 99	0 (2019)		F	Page 3
Part	V 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)? <i>If "Yes," complete Schedule A</i>	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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If</i> "Yes," <i>complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i> .	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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		
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? <i>If "Yes," complete Schedule D, Part VII</i>	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? <i>If "Yes," complete Schedule D, Part VIII</i> .	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		
е	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)? <i>If "Yes," complete Schedule D, Part X</i>	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		
	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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	145		
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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i>	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		

Form 990 (2019)	Form	990	(2019)
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Part	Checklist of Dequired Schedules (continued)			raye -
Part	IV 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	100	
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? <i>If "Yes," complete Schedule J</i> .	23		
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
d	to defease any tax-exempt bonds?	24c 24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		
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? <i>If "Yes," complete Schedule L, Part II</i>	26		
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? <i>If "Yes," complete Schedule L, Part III</i>	27		
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? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
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		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
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		
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? <i>If "Yes," complete Schedule R, Part I </i>	33		
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		
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .	35a 35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38		
Part				
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			
b	Enter the number of Forms W-2G included in line 1a. 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		

Page **4**

Form **990** (2019)

Form 99	0 (2019)		F	Page 5
Part	V 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 Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
ia	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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		
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		
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?	0		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	55		
a	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	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		
	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	4.4-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
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		
	If "Yes," see instructions and file Form 4720, Schedule N.	15		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			

Form 99	90 (2019)		I	Page 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See in	struc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI			
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 1a 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		
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		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
6	Did the organization have members or stockholders?	6		
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		
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		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a		
b	Each committee with authority to act on behalf of the governing body?	8b		
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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9	(-)	
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	,	
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	IUa		
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		
14	Did the organization have a written document retention and destruction policy?	14		
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?			
а	The organization's CEO, Executive Director, or top management official	15a		
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		
b	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			
0	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
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 (<i>explain on Schedule O</i>)	I (Sec	tion \$	5U1(C)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	of inter	est p	olicy,
20	and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and re	corde		

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

Check if Schedule O contains a response or note to any line in this Part VII

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 employee."

• 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.

				(0	C)					
(A) Name and title	(B) Average hours	box, u office	Position (do not check more than one box, unless person is both an officer and a director/trustee)			n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week (list any hours for related organizations below dotted line)	Individua or directo	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
(3)										
(4)										
(5)										
(6)										
(7)										
(8)		•								
(9)		•								
(10)		•								
(11)										
(12)										
(13)										
(14)										

Part	VII Section A. Officers, Directors,	Frustees,	Key I	Em			s, an	d F	lighest Compe	nsated	Emplo	yees (contir	nued)
	(A) Name and title	(B) Average hours	Average hours per week			is both	n an	(D) Reportable compensation	(E) Report compen	able sation	0	(F) Ited among the second se		
		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 re organiza (W-2/1099	ations	fr	pensation om the ization organiza	and
(15)			-				<u>a</u>							
(16)			-											
(17)			-											
(18)			-											
(19)														
(20)														
(21)			-											
(22)			-											
(23)			-											
(24)			-											
(25)			-											
С	Subtotal	VII, Sectio	n A				- -							
2	Total number of individuals (including but reportable compensation from the organi	t not limited						e) w	ho received mor	e than \$1	00,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	officer, dire						-	loyee, or highes	-	ensated	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations <i>individual</i>	e sum of re greater th	portal an \$ ⁻	ble 150,	con ,000	npei)? /	nsatic f "Ye	on a s, "	and other competend other completend oth	nsation fr dule J fo	om the or such	4		
5	Did any person listed on line 1a receive of for services rendered to the organization								0			5		
Section 1	on B. Independent Contractors Complete this table for your five high compensation from the organization. Rep													
	(A) Name and business add	i	5010						(B) Description of serv			(C) Compens		,
								-						

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►

Part VIII Statement of Revenue

Part	VIII	Statement of Revenue Check if Schedule O contains a response or note	to any line in this P	art VIII		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts ts	1a	Federated campaigns 1a				
ran un	b	Membership dues 1b				
, G	С	Fundraising events 1c				
ifts ar A	d	Related organizations 1d				
s, G nila	е	Government grants (contributions) 1e				
ons	f	All other contributions, gifts, grants,				
buti		and similar amounts not included above 1f				
ot	g	Noncash contributions included in				
Contributions, Gifts, Grants and Other Similar Amounts	h	lines 1a–1f	•			
			-			
e	2a					
e rvi	b					
Se	с					
jram Ser Revenue	d					
Program Service Revenue	е					
Pr	f	All other program service revenue				
	g	Total. Add lines 2a–2f				
	3	Investment income (including dividends, interest,				
	4	other similar amounts)				
	4 5	Royalties				
	5	(i) Real (ii) Person	nal			
	6a	Gross rents 6a				
	b	Less: rental expenses 6b				
	с	Rental income or (loss) 6c				
	d	Net rental income or (loss)				
	7a	Gross amount from (i) Securities (ii) Othe	r			
		sales of assets				
		other than inventory 7a				
venue	b	Less: cost or other basis				
ver		and sales expenses . 7b Gain or (loss) 7c				
Re	с 	Gain or (loss)	•			
Other R	8a	Gross income from fundraising				
ot	ou	events (not including \$				
		of contributions reported on line				
		1c). See Part IV, line 18 8a				
	b	Less: direct expenses 8b				
	С	Net income or (loss) from fundraising events	•			
	9a	Gross income from gaming				
		activities. See Part IV, line 19 . 9a				
		Less: direct expenses 9b Net income or (loss) from gaming activities	•			
		Gross sales of inventory, less	F			
	iva	returns and allowances 10a				
	b	Less: cost of goods sold 10b				
		Net income or (loss) from sales of inventory	•			
S		Business C	code			
eor	11a					
and	b					
scellanec Revenue	С					
Miscellaneous Revenue	d					
2	e	Total. Add lines 11a–11d	▶			
	12	Total revenue. See instructions				<u> </u>

Part IX Statement of Functional Expenses						
Sectio	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX					
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) 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					
10	Payroll taxes					
11	Fees for services (nonemployees):					
а	Management					
b						
	Accounting					
c C						
d						
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					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings					
20						
21	Payments to affiliates					
22	Depreciation, depletion, and amortization					
23						
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						
b						
с						
d						
e	All other expenses					
25	Total functional expenses. Add lines 1 through 24e					
26	Joint costs. Complete this line only if the					
-	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)					

Form 990 (2019)

Par	τX	Balance Sheet Check if Schedule O contains a response or note to any line in this Par	+ X		
			(A) Beginning of year		
	1	Cash-non-interest-bearing		1	
	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		5	
	~			Э	
	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	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ζ.	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		15	
1	6	Total assets. Add lines 1 through 15 (must equal line 33)		16	
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	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
liab		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		26	
		Organizations that follow FASB ASC 958, check here ► □ and complete lines 27, 28, 32, and 33.			
o lar	27	Net assets without donor restrictions		27	
	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances อ. อ. อ. อ. อ. อ. อ. อ. อ. อ.	-	Organizations that do not follow FASB ASC 958, check here ► □			
or	29	and complete lines 29 through 33.		29	
ts	<u>-9</u> 30	Capital stock or trust principal, or current funds		30	
sse		Retained earnings, endowment, accumulated income, or other funds		30	
۳				101	
ہ انب	81 82	Total net assets or fund balances		32	

Form **990** (2019)

	90 (2019)				Pa	age '
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	-	<u> </u>	•		
1	Total revenue (must equal Part VIII, column (A), line 12)	1				
2	Total expenses (must equal Part IX, column (A), line 25)	2				
3	Revenue less expenses. Subtract line 2 from line 1	3				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
0	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10				
art	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>			—
			_		Yes	1
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	explain	in			
	Schedule O.					
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 con	mpiled	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		
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ited or	na			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov					
	the audit, review, or compilation of its financial statements and selection of an independent account			2c		
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for					ĺ
	Single Audit Act and OMB Circular A-133?			Ba		
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not une	dergo				ĺ
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such			Bb		1

Form	990) (2019)
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SCHEDULE O		
(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.		2019
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information. 	Open to Public Inspection
Name of the organization		mployer identification number

Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)

Employer identification number