Department of the Treasury

Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-1150 2018

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

Open to Public Inspection.

	artment of t nat Revent	the Treasury ue Service	► Go to www.irs.gov/Form990EZ for instructions and	the latest informa	ation.	
				and ending	· ·	, 20
_	Check if ap					ntification number
$\overline{}$	Address ch	•	Henry County Christmas Cheer		20-2880	360
$\overline{}$	Name chan		Number and street (or PO box, if mail is not delivered to street address)	Room/suite	E Telephone nun	
=	nitial return		,		·	
=		' n/terminated	Q610 County Road 19		(419)26	7-3619
=	Amended r		City or town, state or province, country, and ZIP or foreign postal code		F Group Exempt	
二				しろ	Number ▶	7
	Application	ng Method	Napoleon, OH 43545 X Cash Accrual Other (specify) ▶	T H		ne organization is not
	Nebsite	-	Casii [] Accidai Other (specify) =	''	required to attach	
			heck only one) - 🗶 501(c)(3))(1) or 527	(Form 990, 990-EZ	
_				er OH NP Cor		-, 01 330-1 1)
		•		-,		
:			to line 9 to determine gross receipts. If gross receipts are \$200,000 or			07.60
(Pa	rt II, colu					27,62:
)Pa	art I		e, Expenses, and Changes in Net Assets or Fund Ba			
-			he organization used Schedule O to respond to any question			
5	1		g, gifts, grants, and similar amounts received			27,62
,	2		vice revenue including government fees and contracts			
9	3	Membership	dues and assessments			
	4		ncome		4	
3 2 10	5a	Gross amou	nt from sale of assets other than inventory	5a		
•	b	Less cost or	other basis and sales expenses	5b		
	/ c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	Gaming and	fundraising events			
	a	Gross incom	e from gaming (attach Schedule Cingreate) han			
ine	1	\$15,000) •		6a		
Revenue	b	Gross incom	e from fundraising events (not including 3 2 \$10 💆	of contributio	ns 🗀	
æ		from fundrais	sing events reported on line 1) (attach Schedule G if the			
		sum of such	gross income and contributions, exceeds \$15,000)	6b	*	
	c	Less direct	expenses from gaming and fundraising events T · · · · · · · ·	6c		
	1		or (loss) from gaming and fundraising events (add lines 6a and 6b and su	btract		
					6d	
	7a	•	of inventory, less returns and allowances	7a		
			goods sold · · · · · · · · · · · · · · · · · · ·	7b	,	
	1		or (loss) from sales of inventory (Subtract line 7b from line 7a) · · · ·		7c	
	8	•	ie (describe in Schedule O)		 	
	9		ie. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9	27,62
	10		imilar amounts paid (list in Schedule O) · · · · · · · · · · · · · · · ·			29,742
	11		to or for members · · · · · · · · · · · · · · · · · · ·			
	12		er compensation, and employee benefits			
Expenses	13		fees and other payments to independent contractors			
eŭ	14		rent, utilities, and maintenance			
×	15		lications, postage, and shipping			
ш	16		ses (describe in Schedule O)			1,920
	17		ses. Add lines 10 through 16 · · · · · · · · · · · · · · · · · ·			31,662
_	18		eficit) for the year (Subtract line 17 from line 9)			(4,04
क्	19		r fund balances at beginning of year (from line 9)		10	(4,04.
Se	13		igure reported on prior year's return) · · · · · · · · · · · · · · · · · · ·			11 05
Net Assets	20		es in net assets or fund balances (explain in Schedule O)			11,95
2	20		es in net assets or fund parances (exprain in Scriedule O) · · · · · · · · · · · · · · · · · ·			7 910
	21	INGLESCEIC U	r uno parances at end of year. Compine lines to infolion zo 🕠 🔻 🗼			/ 411

Form 990-EZ (2018) Henry County Christmas	Cheer		20-	2880	360 Page 2
*Part:II: Balance Sheets (see the instructions for Part II)					
Check if the organization used Schedule O to res	spond to any question	n in this Part II	<u> </u>	· ·	
•		<u> </u>	A) Beginning of year	 	(B) End of year
22 Cash, savings, and investments			11,951	22	7,910
23 Land and buildings · · · · · · · · · · · · · · · · · · ·			0	23	0
24 Other assets (describe in Schedule O) · · · · · · · · · · · · · · · · · ·			00	24	0_
25 Total assets		<u> </u>	11,951	25	7,910
26 Total liabilities (describe in Schedule O) · · · · · · · · · · · · · · · · · ·			0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree wi			11,951	27	7,910
Part' ; Statement of Program Service Accomplishme	•		_		Expenses
Check if the organization used Schedule O to re	·	· · · · · · · · · · · · · · · · · · ·	<u> </u>	(Re	guired for section
What is the organization's primary exempt purpose? To support	: families in ne	ed		, .	(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments for each as measured by expenses. In a clear and concise manner, describe the	e services provided, the				anizations, optional for
persons benefited, and other relevant information for each program title 28 Food given to needy families	-				
					
(Grants \$ 23,251) If this amount in	cludes foreign grants, cl	neck here · ·	▶ []	28a	23,251
29 Toys given to needy families					
(County C		and have	<u> </u>	20.0	
(Grants \$ 6,491) If this amount in	cludes foreign grants, cr	ieck nere • •	▶ □	29a	6,491
		·			
(Grants \$) If this amount in	cludes foreign grants, cl	neck here	▶ 🔲	30a	
31 Other program services (describe in Schedule O) · · · · · · ·					
	cludes foreign grants, ch			31a	1
32 Total program service expenses (add lines 28a through 31a)				32	
Partily: List of Officers, Directors, Trustees, and Key Employ					
Check if the organization used Schedule O to respond to	any question in this Pai	t IV · · ·		• •	· · · · · · · <u> </u>
(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-M (if not paid, enter		ployee	(e) Estimated amount of other compensation
LeRoy Helberg		(II HOL paid, enter	-0-) deletted withperis	311011	
President	10.00		o	o	0
Raymond Badenhop					
Treasurer	5.00		o	o	0
Richard Kline			·		
Vice-President	2.00		0	0	00
William Wachtman					
Secretary	3.00		0	0	00
Daniel Meyer					
Trustee	2.00		0	0	0_
	 	<u> </u>			
			 		
					<u> </u>
		:			
EEA					Form 990-EZ (2018)
LLA .					1 31:11 330-LE (2010)



Form 9	90-EZ (2018) Henry County Christmas Cheer 20-28803	60	1 UP	age 3
Pai	t V Other Information (Note the Schedule A and personal benefit contract statement requirements in the		•	_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			· 🔲
	•		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O See instructions	34		X
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	dunng the year? If "Yes," complete applicable parts of Schedule N	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions			
b	Did the organization file Form 1120-POL for this year?	37b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		_X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			1
39	Section 501(c)(7) organizations Enter]
а	Initiation fees and capital contributions included on line 9 · · · · · · · · · · · · · · · · · ·		-	1
b	Gross receipts, included on line 9, for public use of club facilities			
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			i l
	section 4911 ▶, section 4912 ▶, section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958		ļ	
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			. '
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958 · · · · · · · · · · · · · · · · · · ·	İ		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
	40c reimbursed by the organization · · · · · · · · · · · · · · · · · · ·			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e	نـــــا	<u> X</u>
.41	List the states with which a copy of this return is filed.			
42 a	The organization's books are in care of Raymond Badenhop Telephone no 419-2		619	
	Located at ▶ Q100 County Road 19, Napoleon, OH ZIP+4 ▶ 43545		V	
D	At any time duning the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country	1		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and	'	- 1	1
_	Financial Accounts (FBAR)	425		
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		<u>X</u>
42	If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041-Check here		_	
43	and enter the amount of tax-exempt interest received or accrued during the tax year			Ш
	and enter the amount of tax-exempt interest received or accrued during the tax year	<u> </u>	Yes	No
<i>M</i> 2	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		163	140
44 a	completed instead of Form 990-EZ · · · · · · · · · · · · · · · · · · ·	44a		X
b .	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	1	 	
IJ	completed instead of Form 990-EZ · · · · · · · · · · · · · · · · · · ·	44b		X
•	Did the organization receive any payments for indoor tanning services during the year?	44c	 	X
	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	1		1
u	explanation in Schedule O · · · · · · · · · · · · · · · · · ·	44d	<u> </u>	<u> </u>
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	 	Х
b				
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		l	1
	Form 990-EZ See instructions	45b		X
	<u> </u>	1		

SCHEDULE A

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

2018 -Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the omanization

(Form 990 or 990-EZ)

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

20-2880360 Henry County Christmas Cheer Reason for Public Charity Status (All organizations must complete this part) See instructions .Part I. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (IV) is the organization (v) Amount of monetary (vi) Amount of other support (see (described on lines 1-10 listed in your governing support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Henry County Christmas Cheer

Schedule A (Form 990 or 990-EZ) 2018

Page.

20-2880360

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)

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	31,709	32,245	33,761	29,427	27,621	154,763
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	31,703	32,223	337.02	23, 12		
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 \(\cdot \cd						
5	The value of services or facilities furnished by a governmental unit to the organization without charge				~		
6	Total. Add lines 1 through 5 · · · · · · ·	31,709	32,245	33,761	29,427	27,621	<u> 154,763</u>
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 or 1% of the amount on line 13 for the year						_ ====
С	Add lines 7a and 7b · · · · · · · · · · · · · · · · · ·			7 T			
8	Public support. (Subtract line 7c from	متوالك ميساني	-	7/2	the residence were		154 762
Sec	ction B. Total Support	1, 12		t. r	ļ. * · · · · · · · · · · · · · · · · · ·		154,763
-	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6 · · · · · · · · · · ·	31,709		33,761		27,621	154,763
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less –section-511-taxes)-from businesses acquired after June 30, 1975 · · · · · · · ·		i				
С	Add lines 10a and 10b · · · · · · · · · ·			•			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						,
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12) · · · · · · · · · · · · · · · · · · ·	31,709	32,245	33,761	29,427	27,621	154,763
14	First five years. If the Form 990 is for the org organization, check this box and stop here						▶ 🔲
	ction C. Computation of Public Su	· · · · · · · · · · · · · · · · · · ·					
15	Public support percentage for 2018 (line 8, co	· · · · · · · · · · · · · · · · · · ·				15	100.00 %
16	Public support percentage from 2017 Schedu				· · · · · · · · · · ·	16	100.00 %
	ction D. Computation of Investme			(0)		47	0.00 %
17 10	Investment income percentage for 2018 (line Investment income percentage from 2017 Sch					18	0.00 %
18		1					0.00 %
	33 1/3% support tests - 2018. If the organiza 17 is not more than 33 1/3%, check this box a	nd stop here. The d	rganization qualifies	s as a publicly supp	orted organization		▶ 🏻
	33 1/3% support tests - 2017. If the organiza line 18 is not more than 33 1/3%, check this bi	ox and stop here. T	he organization qua	ilifies as a publicly s	supported organizat		
20	Private foundation. If the organization did no	t check a box on line	e 14, 19a, or 19b, cl	neck this box and se	ee instructions	 	· · · · · P []

Part IV:

Supporting Organizations

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

Section A. All S	Supporting	Organ	izations
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1	Are all of the organization's supported organizations listed by name in the organization's governing
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by
	class or purpose, describe the designation. If historic and continuing relationship, explain.
2	Did the organization have any supported organization that does not have an IRS determination of status

- under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI
 - Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to detormine whether the organization had excess business holdings)

	1		No
	2		
	3a		
	34 B	4	
	3c		
	4a		<u> </u>
	4D		
	1, 1, 1, 50	抽撒河	
	5b 5c	ما تالی	15.
-	6		
	7		
	8	1	
	9a		
	9b	Ш	
	9c	Parameters Springer	
	10a		
	10b		

Pa	rt·IV-	Supporting Organizations (continued)		<u>, </u>	
•				Yes	No
11		e organization accepted a gift or contribution from any of the following persons?	3 3 4	1 2 3	لتبدي
а	A perso	on who directly or indirectly controls, either alone or together with persons described in (b) and (c)	\equiv		
	below,	the governing body of a supported organization?	11a		
b	A family	y member of a person described in (a) above?	11b		
С	A 35%	controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B.	Type I Supporting Organizations			
				Yes	No
1	Did the	directors, trustees, or membership of one or more supported organizations have the power to		11.27	
	regular	ly appoint or elect at least a majority of the organization's directors or trustees at all times during the	===		
		r? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			,25
	controll	ed the organization's activities. If the organization had more than one supported organization,	3	-	
	descnb	e how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organiz	ations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	J				
2	Did the	organization operate for the benefit of any supported organization other than the supported	. "		10.0
		ation(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	444	-	-
		providing such benefit carned out the purposes of the supported organization(s) that operated,	三三		
		sed, or controlled the supporting organization.	2		
Sec		Type II Supporting Organizations			<u> </u>
				Yes	No
1	Were a	majority of the organization's directors or trustees during the tax year also a majority of the directors	ST.		
		ees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		-	. 1000
		agement of the supporting organization was vested in the same persons that controlled or managed	77		7.5
		ported organization(s)	1		
Sec		All Type III Supporting Organizations			
		,		Yes	No
1	Did the	organization provide to each of its supported organizations, by the last day of the fifth month of the			3
	organiz	ation's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	مندنج		
) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the	مجيرة		-
	organiz	ation's governing documents in effect on the date of notification, to the extent not previously provided?	1		74.1
•	10/	and the annual officers discretely as to store although a majoridad or stored by the averaged of	7	-	
2		ny of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
	-	ation(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			-
	the org	anization maintained a close and continuous working relationship with the supported organization(s)	2	1. 1. In	t 7:5-1
3	By reas	son of the relationship described in (2), did the organization's supported organizations have a		*/3-5_/**	Van Tartel
	signific	ant voice in the organization's investment policies and in directing the use of the organization's		\equiv	====
	_	or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		===	-
		ted organizations played in this regard	3		
Sec		Type III Functionally Integrated Supporting Organizations			
1	Chock	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	uctio	ns)	
а	☐ The	organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The	organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The	organization supported a governmental entity. Describe in Part VI how you supported a government entity (se	e ınst	ructio	ns)
2	Activitie	es Test Answer (a) and (b) below.		Yes	No
а	Did sub	stantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the sup	ported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	-	===	
	those s	supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the	organization was responsive to those supported organizations, and how the organization determined		 -	
		se activities constituted substantially all of its activities	2a		
b		activities described in (a) constitute activities that, but for the organization's involvement, one or more	-		
		irganization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	-		
		s for the organization's position that its supported organization(s) would have engaged in these		-	
		es but for the organization's involvement.	2b		
3		of Supported Organizations. <i>Answer (a) and (b) below.</i>	=	===	******
a		organization have the power to regularly appoint or elect a majority of the officers, directors, or		-	
•		s of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b		organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ser.		
~		ipported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		<u> </u>
		11			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See						
· instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E						
Section A. Adjusted Not Income		(A) Prior Voor	(B) Current Year			
Section A - Adjusted Net Income		(A) Prior Year	(optional)			
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3	, , , , , , , , , , , , , , , , , , ,	<u> </u>			
4 Add lines 1 through 3	4	•	<u> </u>			
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or	一					
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					
		(4) 0 : 1/	(B) Current Year			
Section B - Minimum Asset Amount		(A) Prior Year	(optional)			
Aggregate fair market value of all non-exempt-use assets (see	-27.	**************************************	Late Fact the Distance of the Company			
instructions for short tax year or assets held for part of year)	1.44					
Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other	-					
factors (explain in detail in Part VI)	1					
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d	3	'				
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	1					
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					
	•		Current Veer			
Section C - Distributable Amount		panding of the particular and partic	Current Year			
_1_Adjusted net income for prior year (from Section A, line 8, Column A)	1_					
2 Enter 85% of line 1.	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		The special strength of the second				
emergency temporary reduction (see instructions).	6					
7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see						

instructions)

Type in Non-Functionally integrated 303(a)(3) Supporting Organizations (continued)							
Sec	Section D - Distributions						
1	Amounts paid to supported organizations to accomplish exem	pt purposes					
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported					
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purposes	of supported organizat	ons				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions. Add lines 1 through 6						
8	Distributions to attentive supported organizations to which the	organization is respons	ive				
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount		" 				
•		(3)	(ii)	(iii)			
S	ection E - Distribution Allocations (see instructions)	(i)	Underdistributions	Distributable			
	· · · · · ·	Excess Distributions	Pre-2018	Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6	A * **	Lucia buggar gagagayar a Kuma x dalayar Lucia				
	Underdistributions, if any, for years prior to 2018						
	(reasonable cause required - explain in Part VI). See	Andrew to the same of the same		د المستونية			
	instructions.						
3	Excess distributions carryover, if any, to 2018		And the state of t				
	From 2013	A STATE OF THE STA	The Antiques of the State of	Cartinate processing the processing of the proce			
	From 2014	يترجب عدائه سيجين					
	From 2015	Tive the same of					
	From 2016	TIL ANTIFECE.		The state of the s			
	From 2017	. 9. 7. 2. 6. 5 4.	Bracker of Sec.	grand - Table - / F			
	Total of lines 3a through e		· · · · · · · · · · · · · · · · · · ·	6 7			
	Applied to underdistributions of prior years						
	Applied to 2018 distributable amount						
	Carryover from 2013 not applied (see instructions)		E and seed to the seed of				
i	Remainder Subtract lines 3g, 3h, and 3i from 3f		An internal property of the party of the par				
4	Distributions for 2018 from	No. 154 ALTSIV. 4.78					
	Section D, line 7. \$						
a	Applied to underdistributions of prior years	Constanting or the same					
	Applied to 2018 distributable amount		THE CHARLES AND A STATE OF THE A				
	Remainder, Subtract lines 4a and 4b from 4.						
	Remaining underdistributions for years prior to 2018, if						
_	any Subtract lines 3g and 4a from line 2. For result	Application to FF and A A					
	greater than zero, explain in Part VI See instructions						
6	Remaining underdistributions for 2018 Subtract lines 3h						
=	and 4b from line 1 For result greater than zero, explain in						
	Part VI See instructions.	The state of the s					
7	Excess distributions carryover to 2019 Add lines 3j		M. 1999 H. Sell Walt - Zave-der- ser. F. 454				
-	and 4c						
8	Breakdown of line 7						
	Excess from 2014	Not be a second of the second		a a single and the same			
	Excess from 2015						
	Excess from 2016	HITAXIII TO LIET.	* 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	No. 1988 STO 14 Stopp - 2 Stop - 1 Stop - Marco Name St.			
	Excess from 2017		International Property of the				
	Excess from 2018						
_		· · · · · · · · · · · · · · · · · · ·					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

2018

Open to Publication

Employer identification number

OMB No 1545-0047

Henry County Christmas Cheer		20-2880360
01. List of grants and simila	r amounts paid (Part I, line 10)	
Activity	Food given to needy families	
Amount	23,251	_
Activity	Toys given to needy families	
Amount	6,491	
		,
02. Description of other expense	nses (Part I, line 16)	
Description	Amount	
PNC Bank service charges	24	
Postmaster	120	
Walmart (tape & batteries)	480	
Nashville Wrap	333	
Funatisc_(corn_hole_boards)	240	
Hill Top Printing	223	
Filling Home (use of gym)	500	t
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