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Form **990-EZ** 

Department of the Treasury

## **Short Form** Return of Organization Exempt From Income Tax

Under section 601(c), 627, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

OMB No 1545-1150 2016

Open to Public Inspection

inter	mal Rev	enue Service	Information about Form 990-EZ and its Instructions is at www	lis.gov/fonii990		_	1
Α	For th	e 2016 calen	ar year, or tax year beginning , and ending				
В	Check if	eppl.cable	C Name of organization		DE	nploye	r Identification number
X	Address	change	WEST BOULEVARD NEIGHBORHOOD	ļ		•	
П	Name cr	van <b>ge</b>	COALITION		3	30-0	401238
П	trubal ret	um .	Phember and street (or P.O. box, if must is not delivered to street address)	Room/surte			e number
П	Final ret	beta-armstvmu	PO BOX 669755	i			226-3971
Н	Amonde	netum:	City or town, state or province country, and ZIP or foreign postal code				emption
Н	Application	gribned no	CHARLOTTE NC 28266	175		•	
G	A~~~	nting Method		14 05		umber	<del></del> .
		te ► N/A	XI Cash				ne organization is not
				1			Schedule B
			eck only one) — X 501(c)(3) 501(c)( ) 4 (Insert no ) 4547(a)(1) or	527 (Fon	m 990,	, 990-E	Z, or 990-PF)
		of organization	X Corporation Trust Association Other				
L	Add line	es 5b, 6c, and 7	to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	essets			
			re \$500,000 or more, file Form 990 instead of Form 990-EZ	~- <del></del>		<b>\$</b>	75,000
, P	art I	Reven	ie, Expenses, and Changes in Net Assets or Fund Balanci	es (see the ins	tructio	ons fo	r Part I)
	· —	Check	the organization used Schedule O to respond to any question in this	ıs Part I			<u>(X)</u>
	1		rits, grants, and similar amounts received		7	1	75,000
	2	Program ser	foe revenue including government fees and contracts			2	
	3		dues and assessments			3	
	4	Investment (	corne			4	
	5a	Gross amou	t from sale of assets other than inventory 5a		_		···
	ь	Less cost or	other basis and sales expenses Sb		7	i	
	c	Gain or (loss) t	om sale of assets other than inventory (Subtract line 5b from line 5a)		- 5	ic	
	6		fundraising events		<u> </u>	-	
	а	_	from gaming (attach Schedule G if greater than			- 1	
•		\$15,000}	6a i			- 1	
Ę	b	•	e from fundraising events (not including\$ of contribu			j	
Revenue	_		ng events reported on line 1) (attach Schedule G if the	JUDIAS	j		
Œ						i	
	ء ا			<del></del>		- 1	
			expenses from gaming and fundraising events			- {	
	"		r (loss) from garning and fundraising events (add lines 6a and 6b and subtract	t			
	l	ine 6c)			6	<u>d</u>	
			of inventory, less returns and allowances 7a		_	- 1	
		Less: cost of	· Li <del>Il</del>			į.	
	i .		(loss) from sales of inventory (Subtract line 7b from line 7a)		_7	<u>c</u>	
-	8		describe in Schedule (1)			3	
<del></del>	9		e. Add fines 1, 2, 3, 4, 5c, 6d, 7c, and 8		<u> </u>	9	75,000
7	10.		milar amounts paid (list in Schedule O)	-	1	0	
5	11	•	to or for members	سنستن الأسعار	1	1	
	12	Sataries, other	r compensation, and employee benefits	EIVED	774	2	
J 88	13	Professional	ees and other payments to independent contractors		70 11	3	
	14		ees and other payments to independent contractors ent, utilities, and maintenance	0 3 2018	100 1	4	
<u></u>	15	Printing, pub	cations, postage, and shipping	ALON OF	97	5	
-	16				87 T		845
<b>`</b>	17		es (describe in Schedule O)  es. Add lines 10 through 16  OGDI	EN LIT	F/ 1		845
	18		ficit) for the year (Subtract line 17 from line 9)		1 1	_	74,155
	19	-	fund balances at beginning of year (from line 27, column (A)) (must agree with	th	_		
Assets	}		gure reported on prior year's return)		11	9	1,969
of Asset	20		s in net assets or fund balances (explain in Schedule O)		20		2,703
)~	21	Net assets or	fund halances at end of year. Combine lines 18 thm inh 20	ı	2		76,124
For	Papen	vork Reducti	on Act Notice, see the separate instructions.			•	Form 990-EZ (2016)
							FURIT 330-EZ (2016)

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Form 980-EZ (2016) WEST BOULEVARD NEIGH	HBORHOOD	3	30-04	01238			Page 2
Part II Balance Sheets (see the instructions for	Part II)						
Check if the organization used Schedule C	to respond to a	any question i	n this P	art II			
		Į	(A) Be	ginning of ye	ar		(B) End of year
22 Cash, savings, and investments	_			1,9	69	22	76,124
23 Land and buildings					0	23	
24 Other assets (describe in Schedule O)		ļ			<u> </u>		
25 Total assets		Į.		1,9	<u> 69</u>	25	76,124
26 Total flabilities (describe in Schedule O)		Į.			0	26	0
27 Net assets or fund balances (line 27 of column (B) must a				1,9		27	76,124
Part ill Statement of Program Service Acco	mplishments	(see the instr	uctions f	for Part III	<b>)</b>		
Check if the organization used Schedule C	) to respond to a	any question	n this P	art III	Ц		Expenses
What is the organization's primary exempt purpose?						(R	equired for section
TO IMPROVE EDUCATION AND REALTH OUTCOMES IN T	THE CORRIDOR					50	11(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments for		• . •		3,		ori	ganizations, optional for
as measured by expenses. In a clear and concise manner, descr	ribe the services pr	rovided, the nur	mber of			oti	hers)
persons benefited, and other relevant information for each progra	em title					Ĺ	
28 HOSTED NATIONAL NIGHT OUT, AN ANNUAL COLMA	NITY ENGACEME	NT EVENT, W	RICE IS	3			
FREE AND OPEN TO THE PUBLIC. APPROXIMATELY	Y 400 PEOPLE .	attended th	e even	r		1	
AND ENJOYED THE ENTERTAINMENT, INFORMATION	, AND FOOD PR	OVIDED.				ļ	
(Grants \$ ) If this amount Includes	foreign grants, ch	eck here		<u> </u>	П	28a	547
29							-
(Grants \$ ) If this amount includes	foreign grants, ch	eck here		▶	П	29a	
30							
(Grants \$ ) If this amount includes	foreign grants, ch	eck here			П	30a	
31 Other program services (describe in Schedule O)							
(Grants \$ ) If this amount includes	toreign grants, ch	eck here		▶	П	31a	
32 Total program service expenses (add lines 28a through 31					•	32	547
Part IV List of Officers, Directors, Trustees, and Key Check if the organization used Schedule O to res	Employees (list e	ach one even	f not corr	pensated -	- see	the ir	estructions for Part IV
Check if the diganization used Schedule O to les	(b) Average	(c) Report	able	(d) Heat	th be	nefits	<del></del>
(a) Name and title	hours per week	compensa	iton 189-MISC)	(d) Heat contribution benefit	s to (	employe	
	devoted to position	(if not paid, e	inter -0-)	deferred	compe	nsation	other compensation
RICKEY HALL		İ					
PRESIDENT	20.00		0				0 0
BRENDA CAMPBELL							
VICE PRESIDENT	5.00		0				0 0
BEVERLY CLARK							
SECRETARY	5.00		0	l			0 0
JOHN HOWARD							
TREASURER	5.00		0				0 0
	<u> </u>	l					
	<u> </u>	1					
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DAA	<del></del>						Form 990-EZ (2018)
							(2010)

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2701 BEELE NUT ROAD	Part V	Yes No
Did the organization engage in any significant activity not previously reported to the IRS7 If "Yes," provide a detailed description of each activity in Schedule O  Were any significant changer made to the organizing or governing documents? If "Yes," sittach 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)  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)?  If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O (Nas the organization filed a Form 990-T for the year? If "Yes," complete spatialism as section 501(4)4, 501(4)5, or 501(4)(5) or 501(4)(6) organization subject to section 6033(e) notice, reporting, and prinky tax requirements during the year? If "Yes," complete Schedule C, Part III  Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete spliciable purs of Statisdue N.  The year? If "Yes," complete spliciable purs of Statisdue N.  Did the organization file Form 1120-POL for this year?  36a Did the organization file Form 1120-POL for this year?  36b Uffer organization borrow from, or make any loans to, any officer, director, trustine, or key employee or were any such loans made in a prior year and still outstanking at the end of the tax year covered by this return?  If "Yes," complete Schedule L, Part I and enter the total amount involved  If "se," complete Schedule L, Part I and enter the total amount involved  Section 501(c)(7) organizations Enter  Initiation fees and capital contributions included on line 9  Gross recopits, included on line 9, to rybic use of club floatities  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 501(c)(3) organizations.	33 34 35a 35b 35c 36	x x x x
detailed description of each activity in Schedule O  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 name. Otherwise, explain the change on Schedule O (see instructions)  35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  b If "Yes," to line 35a, has the organization filed a Form 890-T for the year? If "Yo," provide an explanation in Schedule O  t Was the organization a section \$0.110(4), \$0.110(5), or \$0.110(6) organization subject to section 60.03(e) notice, reporting, and prinxy tax requirements during the year? If "Yes," complete schedule C, Part III  35 Did the organization undergo a figuridation, dissolution, termination, or significant disposition of net assett during the year? If "Yes," complete applicable parts of Schedule D, Part III  36 Did the organization bery form, and statistically a sessible of the instructions in the organization form of the year? If "Yes," complete applicable parts of Schedule D, Part III and enter the total amount involved  b If "Yes," complete Schedule L, Part II and enter the total amount involved  37a Section \$0.110(7) organizations Enter  a intuition tess and capital contributions included on line 9  9 Section \$0.110(7) organizations Enter amount of tax imposed on the organization during the year under section \$0.110(7) organizations and \$0.110(7) organizations Enter amount of tax imposed on a pair year and sets excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prory year that has not been reported on any of its prior Forms 990 or 960-E27 if "Yes," complete Schedule L, Part I  c Section \$0.110(7), \$0.110(4), and \$0.110(7) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year under sections 4912, 4955, and 495	33 34 35a 35b 35c 36	x x x x
detailed description of each activity in Schedule O  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 name. Otherwise, explain the change on Schedule O (see instructions)  35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  b If "Yes," to line 35a, has the organization filed a Form 890-T for the year? If "Yo," provide an explanation in Schedule O  t Was the organization a section \$0.110(4), \$0.110(5), or \$0.110(6) organization subject to section 60.03(e) notice, reporting, and prinxy tax requirements during the year? If "Yes," complete schedule C, Part III  35 Did the organization undergo a figuridation, dissolution, termination, or significant disposition of net assett during the year? If "Yes," complete applicable parts of Schedule D, Part III  36 Did the organization bery form, and statistically a sessible of the instructions in the organization form of the year? If "Yes," complete applicable parts of Schedule D, Part III and enter the total amount involved  b If "Yes," complete Schedule L, Part II and enter the total amount involved  37a Section \$0.110(7) organizations Enter  a intuition tess and capital contributions included on line 9  9 Section \$0.110(7) organizations Enter amount of tax imposed on the organization during the year under section \$0.110(7) organizations and \$0.110(7) organizations Enter amount of tax imposed on a pair year and sets excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prory year that has not been reported on any of its prior Forms 990 or 960-E27 if "Yes," complete Schedule L, Part I  c Section \$0.110(7), \$0.110(4), and \$0.110(7) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year under sections 4912, 4955, and 495	34 35a 35b 35c 36	x x x
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))  559. 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)?  b If "Yes", to line 35a, has the organization fied a Form 990-T for the year? If "No," provide an explanation in Schedule O.  c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and priviy tax requirements during the year? If "Yes," complete schedule C, Part III  36. Did the organization undergo a figuration, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable puris of Schedule N.  37. Errita mount of political expenditures, direct or inferted, as described in the instructions. ▶ [37a]  b 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?  b If "Yes" complete Schedule L, Part II and enter the total amount involved.  38b   Section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶	34 35a 35b 35c 36	x x x
oxyp of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions).  359 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)?  If "Yes," to line 353, has the organization filed a Form 990-T for the year? If "No." provide an explanation in Schedule O.  C. Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6003(e) notice, reporting, and privily tax requirements during the year? If "Yes," complete Schedule C, Part III.  360 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule C, Part III.  37a Enter amount of political expenditures, direct or indirect, as described in the instructions. It is not build be organization borrow from, or make any loans to, any officer, director, trustae, or key employee or were any such loans made in a pinor year and still outstanding at the end of the tax year covered by this return?  37b If "Yes," complete Schedule L, Part II and enter the total amount involved.  38c Section 501(c)(7) organizations. Enter  38a Instation fees and capital contributions included on line 9.  38a Gross receipts, included on line 9, for public use of club facilities.  38b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization engage in any section 4915 P.  38b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations of the organization engage in any section 4955 P.  38c 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 earness benefit transaction in a prior year that has not been reported on any of its pinor Forms 990 or 960-EZ? If "Yes," complete Schedule L, Part I Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter a	35a 35b 35c 36	x x x
thange on Schedule O (see instructions)  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)?  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  C Was the organization a section 501(c)(4), 501(c)(5), or \$01(c)(6) organization subject to section 6003(e) notice, reporting, and prixy tax requirements during the year? If "Yes," complete Schedule C, Part III  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule Publicative particular and indirect, as described in the instructions   □ Did the organization borrow from, or make any loans to, any officer, director, trustate, or key employee or were any such loans made in a prior year and still outstanting at the end of the tax year covered by this return?  □ If "Yes," complete Schedule L, Part II and enter the total amount involved  □ Section 501(c)(7) organizations: Enter initiation treas and capital contributions included on line 9  □ Gross receipts, included on line 9, for public use of club facilities  □ Section 501(c)(3) organizations: Enter amount of tax imposed on the organization during the year under section 4911 ▶ □ section 4912 ▶ □ section 4912 ▶ □ section 4915 ▶ □  □ Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations: Did the organization engage in any section 4955 ▶ □  □ 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  □ 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  □ Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations: Enter amount of tax imposed on organiza	35a 35b 35c 36	x x x
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 7e, among others)?  If "Yes," to line 35a, has the organization filed a Form 99.0-T for the year? If "Yes," complete on explanation in Schedule 0  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 0, Part III  But the organization undergo a liquidation, dissolution, emiration, or significant disposition of net assets during the year? If "Yes," complete Schedule 0, Part III  But the organization borrow from or make any loans to stricture in the instructions    If Yes, "complete Schedule, Part III and enter the total amount involved    If Yes," complete Schedule, I. Part III and enter the total amount involved    Section 501(c)(7) organizations Enter    Initiation fees and capital contributions included on line 9    Gross receipts, included on fine 9, for public use of club facilities    Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶    Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations on 960-EZ? If "Yes," complete Schedule I., Part II section 4912 ▶    Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations on 960-EZ? If "Yes," complete Schedule I., Part I    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    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    Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 400 relimbursed by the organization   All organizations All any time during the tax year was the organization a	35a 35b 35c 36	x x x
activities (such as those reported on lines 2, 6a, and 7a, among others)?  If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O  Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and prisely tax requirements during the year? If "Yes," complete Schedule C, Part III  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  27a Enter amount of political expenditures, direct or indirect, as described in the instructions   □ 197a □  18b Did the organization file Form 1120-POL for this year?  18a Did the organization borrow from, or make any loans to, arry officer, director, trustate, 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?  If "Yes" complete Schedule L, Part II and enter the total amount involved  If "Yes" complete Schedule L, Part II and enter the total amount involved  If "Yes" complete Schedule L, Part II and enter the total amount involved  If "Yes" complete Schedule L, Part II and enter the total amount involved  If "Yes" complete Schedule L, Part II and enter the total amount involved  If "Yes" complete Schedule L, Part II and enter the total amount involved  If ye section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶	35b 35c 36 37b	x x
b If "Yes," to line 35s, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O  Was the organization a section 501(p)(4), 501(p)(5), 051(p)(6) organization subject to section 6033(e) notice, reporting, and printy tax requirements during the year? If "Yes," complete supplicable parts of Schedule C, Part III  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  37 Entre amount of political expenditures, direct or indirect, as described in the instructions   37e    38 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?  38 If "Yes," complete Schedule L, Part II and enter the total amount involved   38b    39 Section 501(c)(7) inganizations Enter  a Indiation fees and capital contributions included on line 9  39 Gross receipts, included on line 9, for public use of club facilities   39b    39 Gross receipts, included on line 9, for public use of club facilities   39b    39 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year undersection 4911    39 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4955    39 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4955    50 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4955    51 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    61 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organizations have managers or disqualified persons during the year unde	35b 35c 36 37b	x x
c. Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) erganization subject to section 6033(e) notice, reporting, and prixy tax requirements during the year? If "Yes," complete Scheduse C, Part III and the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N.  The amount of political expenditures, direct or indirect, as described in the instructions.    If it is complete schedule L, Part II and enter the total amount involved.    If "Yes," complete Schedule L, Part II and enter the total amount involved.    If "Yes," complete Schedule L, Part II and enter the total amount involved.    If "Yes," complete Schedule L, Part II and enter the total amount involved.    If "Yes," complete Schedule L, Part II and enter the total amount involved.    Initiation fees and capital contributions included on line 9. In public use of club facilities.    Section 501(c)(7) inganizations Enter amount of tax imposed on the organization during the year under section 501(c)(3), organizations Enter amount of tax imposed on the organization engage in any section 4955 ≥ section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.    Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.    In a expectation of the schedule L, Part II is not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II is section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.    Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958    d. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.    Enter amount of tax on line    All organizations At any time during the tax year was the organization a party to a prohibited tax shelter transaction?    The organization has a cape of by JOHN HOWARD.    The organization of the foreign country (such as a bank account, securities account, or other financial accountity	35c 36 375	ж
reporting, and proxy tax requirements during the year? If Yes," complete Schedule C, Part III  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes," complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions   [37a   ]  b Did the organization file Form 1120-POL for this year?  38a Did the organization borrow from, or make any loans to, arry 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?  b If Yes, "complete Schedule L, Part II and enter the total amount involved   [38b   ]  Section 501(c)(7) inganizations Enter amount of tax imposed on the organization during the year under section \$911(c)(3) organizations Enter amount of tax imposed on the organization during the year under section \$911(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4955   Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on eny of its prior Forms 990 or 960-E27 If Yes," complete Schedule L, Part I   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   Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization At any time during the tax year was the organization a party to a prohibited tax shefter transaction? If Yes," complete Form 8886-T   List the states with which a copy of this return is filed   NONE   NONE   No certain the organization to other financial account; Personal account; Personal account; Presonal account; Presonal account; Presonal account	36 375	ж
Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  37a	375	ж
during the year? If "Yes," complete applicable parts of Schedule N  Enter amount of political expenditures, direct or indirect, as described in the instructions    Did the organization file Form 1120-POL for this year?  38a    Old the organization borrow from, or make any loans to, any officer, director, trustae, 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?  If "Yes" complete Schedule L, Part II and enter the total amount involved    38b    Section 501(c)(7) organizations Enter    a initiation fees and capital contributions included on line 9    B    Gross receipts, included on line 9, for public use of club facilities    Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶	375	ж
Did the organization file Form 1120-POL for this year?  38a Did the organization borrow from, or make any loans to, any officer, director, trustate, 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?  b If "res" complete Schedule L, Part II and enter the total amount involved  38b		
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transaction? If "Yes," complete Form 8886-T  List the states with which a copy of this return is filed ▶ NONE  The organization's books are in care of ▶ JOHN HOWARD  2701 BEECE NUT ROAD  Located at ▶ CHARLOTTE  NC ZIP + 4 ▶ 2  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		j
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Located at CHARLOTTE NC ZIP + 4 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	000 226	2071
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If "Yes," enter the name of the foreign country   See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		Yes No
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	. 42b	^
Financial Accounts (FBAR)		j
c At any time during the calendar year, did the organization maintain an office outside the United States?	1 1	
	42c	x
If "Yes," enter the name of the foreign country		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here		▶ [
and enter the amount of tax-exempt interest received or accrued during the tax year		
		Yos No
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		7
completed instead of Form 990-EZ	44a	X
b Old the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be		
completed instead of Form 990-EZ	445	<u> </u>
c Did the organization receive any payments for indoor tanning services during the year?		X
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	446	
explanation in Schedule O	44c	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	440	
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the		X
meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	440	-   X
	440	X
Form 990-EZ (see instructions)	440	x

Form 990-E	Z (2016)	WEST	BOULEVARD	NEIG	HBORHOOD		30-04	01238			F	Page 4
40 514											Yes	No
\$8 Didi toca	the organs andidates	zation engage for public offic	e, directly or indirections? If "Yes," comple	ly, in politica te Scheduls	al campaign activitie • C. Part I	s on be	half of or in opp	osition		46	ŀ	x
Part V	Sec	tion 501(c	(3) organization	ons only	,				•			<u></u>
	All s	section 501(	c)(3) organization	ns must ai	nswer questions	47–49b	and 52, and	complete	the tables	for lines		
		and 51 ck of the on	ganization used S	ichedule C	) to respond to a	IDV ALIE	stion in this P	art VI				
											Yes	No
			In fobbying activitie	sorhavea	section 501(h) ele	ction in a	effect during the	tax			7-	
			hedule C, Part II I as described in se	ction 1700s		complete	e Schadula E			47		X X
			any transfers to an o					•	•	494		X
	_		janization a section	-		- g				491	_	<del> </del>
0 Com	plete this	table for the	organization's five h	ighest com	pensated employee	s (other	than officers, d	rectors, trus	tees, and ke	.y		
emp	layees) w	no each recer	ved more than \$100	0,000 of cor	npensation from the	organo	tation if there is	none, ente	r "None "			
	(a) ?	same and title	of each employee		(b) Average hours per weak devoted to position	l òo	Reportable ripensetion W-2/1099-MISC)	contributions benefit o	n benefits, to employee lans, and ompensation	(e) Estimate other oc		
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\$100	D,000 of o	ompensation (	organization's five hi	ngnest comp n_lfthere s	persated independs 3 none, enter "None	em contr e	actors who ead	n receiveo r	nore than			
	(a) Na	me and busines	se address of each inc	lependent co	ntractor		( <b>b</b> ) Тур	e of service		(c) Comp	ensatio	n
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Bign	-	nature of officer	ft me		<del></del>		<u>l_</u>	9-28	-2018			
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way the I	KS discus	s this return v	with the preparer sh	own above	7 See instructions						Yes	No
										Form 9	₃v-EZ	. (2016)
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cis image, do not correspond for signature

10606N1 09/24/2016 5 14 PM

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

## **Public Charity Status and Public Support**

Complete if the organization is a section 601(c)(3) organization or a section 4947(a)(1) nonexempt charticise trust.

DMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Information about Schedule A (Form 990 or 990-EZ) and its Instructions is at www.us.gov/form990
WEST BOILEVARD NETGHBORHOOD

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Part	Pose		Status (All assessments				30-040	1238
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1 H			sociation of churches describe				O	1
<sup>2</sup>  -			)(A)(ii). (Altach Schedula E (Fo					
3 ⊣	A nospital or	, a cooperative hospital serv	nce organization described in s	ection 1	<b>ΛΟ(Β)(1)(Α</b>	A)(in).		
4 ⊔			d in conjunction with a hospita	l describe	d in sect	tion 170(b)(1)(A)	(lil). Enter th	e hospitars name
_	city, and star							
5 [_]			of a codlege or university owner	d or open	nted by a	governmental un	t described a	n
. $\Box$		)(b)(1)(A)(lv). (Complete Pa						
6 L	A federal st	ate, or local government or	governmental unit described in	section	170(b)(1)	(A)(√).		
7 🔀	described in	section 170(b)(1)(A)(vi). (			vemment	al unit or from the	general put	olic
8 📙	A community	/ trust described in section	170(b)(1)(A)(vi). (Complete P	art II)				
8 [_]	An agnoultur or university university	al research organization des or a non-land grant college	scribed in section 170(b)(1)(A of agriculture (see instructions)	(ix) oper Enter th	ated in co e name	onjunction with a city, and state of	land-grant oo the oo!lege o	xi Xi
10 📗	receipts from support from	nactivities related to its exer gross investment income a	(1) more than 33 1/3% of its sumpt functions—subject to certaind unrelated business taxable 30, 1975. See section 509(a)(	in excepti (income	ons, and less secti	(2) no more than on 511 tax) from	33 1/3% of	gross its
11 🔲			exclusively to test for public sa			•		
12			exclusively for the benefit of, in				v out the our	TOCOC
	of one or mo	re publicly supported organ	zations described in section 5	i09(a)(1) (	or section	1.509(a)(2).See	section 509	fal/3).
	Check the bo	ox in lines 12a through 12d	that describes the type of supp	orang org	anization	and complete in	es 12e, 12f,	and 12g
a	∐ Type i/	A supporting organization of	perated, supervised, or controlla wer to regularly appoint or elec-	ed by its	supported	organization(s),	typically by g	
	supportin	g organization You must o	complete Part IV, Sections A	and B				
b	Type II.	A supporting organization si	upervised or controlled in conn	ection wit	h nts sup	ported organization	n(s), by havi	ing
	control o	r management of the suppo	rting organization vested in the	same pe	rsons tha	t control or mana	ge the suppo	orted
			Part IV, Sections A and C.					
С	_ its suppo	orted organization(s) (see in	supporting organization operations you must comple	te Part (\	, Section	ns A, D, and E.		
đ	that is no	non-functionally integrated. The	d. A supporting organization of e organization generally must s	perated in satisfy a c	connect	ion with its suppo	rted organiza	ation(s) eness
	requirem	ent (see instructions) You	must complete Part IV, Secti	ons A an	d D, and	Part V.		
0	Check th	is box if the organization red	perved a written determination for	rom the IS	RS that It		li, Type IIi	
_	functiona	lly integrated, or Type III no	on-functionally integrated suppo	ating orga	mzaton			
f		rriber of supported organizat						
	Provide the I	ollowing information about t	he supported organization(s)	<del></del> _				
	e of supported	(II) EIN	(III) Type of organization		organization	(v) Amount of		(vf) Amount of
org	janization		(described on lines 1-10 above (see instructions))		ur governing Neat?	instruction		other support (see instructions);
			0.000 (0.00 -1.000.00)	Yes	No	1 3350000		***************************************
(A)				† <del></del> -	-			<del> </del>
				1	Ì			
(B)				1				
				ĺ	İ			
(C)								
(D)								
(E)								
Total				1	1	1		

<u>Sch 8</u>	lute A (Form 990 or 990-EZ) 2016 WES	T BOULEV	ARD NEIGH	BORHOOD	30-	0401238	Page 2
P	rt II Support Schedule for C	Organizations	Described in	Sections 170	b)(1)(A)(iv) an	d 170(b)(1)(A)	(vi)
	. (Complete only if you che	ecked the box	on line 5, 7, o	r 8 of Part I or	if the organizat	ion failed to qu	alify under
	Part III. If the organizatio						
Sec	tion A. Public Support						
Cate	der year (or fiscal year beginning in)	(8) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
4	Gifts, grants, contributions, and						
•	membership fees received (Do not		<b>\</b>	i :	1	}	
	include any "unusual grants")			500	1,000	75,000	76,500
2	Tax revenues levied for the			1			
	organization's benefit and either paid	{	Į.	l {	1	{	
	to or expended on its behalf	ļ		<del></del>			
3	The value of services or facilities				1		
	furnished by a governmental unit to the				į		
	organization without charge	<del> </del>		} <del></del>		<del></del>	
4	Total. Add lines 1 through 3	<del> </del>	<del>                                     </del>	500	1,000	75,000	76,500
5	The portion of total contributions by each person (other than a	1		Į l			
	governmental unit or publicly	<u> </u>	}	1	1		
	supported organization) included on			[			
	line 1 that exceeds 2% of the amount shown on line 11, column (f)	İ	i	[		]	73,470
6	Public support. Subtract line 5 from line 4		<del></del>	t			3,030
_	tion B. Total Support		<del></del>	·			
Care	idar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	[		500	1,000	75,000	76,500
8	Gross income from interest, dividends,						
	payments received on securities loans,	1		1	ļ	ŀ	
	rents, royalties and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the business	}			1		
	is regularly carried on	<u> </u>					
10	Other income. Do not include gain or	i	ļ	[ [	ĺ		
	loss from the sale of capital assets			i l	•		
	(Explain in Part VI)	<u> </u>		<del> </del>			
11	Total support. Add lines 7 through 10		<u> </u>	ll		<del></del>	76,500
12 13	Gross receipts from related activities, etc. First five years. If the Form 990 is for the	•				12	
13	organization, check this box and stop he	•	iist, secono, uiro,	lourni, or mun tax y	rear as a section s	NOT(C)(3)	▶ □
Sec	tion C. Computation of Public S		entage				
14	Public support percentage for 2016 (line			ume (fi)		14	3.96%
15	Public support percentage from 2015 Sci	• • • • • • • • • • • • • • • • • • • •	•	.,,		15	100 00 %
168	33 1/3% support test-2016. If the orga			ne 13, and line 14 is	s 33 1/3% or more	, check this	
	box and stop here. The organization qua	alifies as a publich	supported organi	zation			▶ 🛚
Þ	33 1/3% support test-2015. If the orga	inization did not d	neck a box on line	13 or 16a, and line	15 is 33 1/3% or	more, check	
	this box and stop here. The organization	qualifies as a pu	blicty supported or	ganization			<b>▶</b> [X
17a	10%-facts-and-circumstances test-2	-					
	10% or more, and if the organization me				•	-	
	Part VI how the organization meets the	"facts-and-circums	tances" test. The	organization qualific	es as a publicity su	pported	
	organization						▶
Þ	10%-facts-and-circumstances test-2	_					
	15 is 10% or more, and if the organization				•		
	Explain in Part VI how the organization in	neets the "facts-a	na-arcumstances"	rest. The organizat	tion qualifies as a p	publicty	~ [
40	supported organization	د داده هم امرا	v en line 12 15-	46h 47a47⊦ =	had the haves		▶ [
18	Private foundation if the organization of instructions	IN UOT CLISCK B 00	x ∪⊓ mæ ≀3,168,	100, 1/a, 0F1/b, C	neux uns dox and :	sec	▶□
	0 600 0 600 0 600						

	dule A (Form 890 or 890-EZ) 2016 WES	T BOULEV	ARD NEIGH	EBORHOOD	30	-0401238	Page 3
Pá	art III Support Schedule for (	Organizations	Described in	Section 509(	a)(2)		
	. (Complete only if you che If the organization fails to	ecked the box	on line 10 of	Part I or if the	organization fa	ailed to qualify t	inder Part II
Sec	tion A. Public Support	o quality direct	uic lesis liste	d below, pleas	se complete P	art !i)	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(1) Total
1	Gats, grants, contributions' and membership fees received. (Do not include any "umusual grants")					(9) 23 13	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's fax-exempt purpose						<i></i>
3	Gross receipts from activities that are not an unrelated trade or business under section 513	ĺ					
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		<u> </u>				
6	Total. Add lines 1 through 5					1	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	i					
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						
	Add lines 7a and 7b		1				
8	Public support. (Subtract line 7c from line 6.)		Ì				
Sec	tion B. Total Support	<del></del>	·	<i>k</i>	i	<u> </u>	
	nder year (or fiscal year beginning in) 🗩	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross moome from interest, dividends, payments received on securities loans, rents, royalties and moome from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						<del></del>
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)						
14	First five years. If the Form 990 is for the	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this/box and atop he	ne					▶□
	tion C. Computation of Public S					···	
15 16	Public support percentage for 2016 (line - Public support percentage from 2015 Sci			ımın (f))		15	<del>%</del>
	tion D. Computation of Investre					. 16	<u>%</u>
17	Investment income percentage for 2016			13, column (i))		17	%
18	Investment income percentage from 2015					18	%
19a	33 1/3% support tests—2016. If the org						
ь	/33 1/3% support tosts2015. If the org	anızatıon did not o	check a box on line	e 14 or line 19a, a	nd line 15 is more	then 33 1/3%, and	۳ ت
_	line 18 is not more than 33 1/3%, check to						<b>▶</b> ∐
<u></u> _	Private foundation. If the organization d	ia uct cueck a poi	con line 14 19a,	or 1930, check this			<b>▶</b> []
						Schedule A (Form 99	10 or 920-EZ) 2018

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No_
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	1 1		
	class or purpose, describe the designation. If historic and continuing relationship, explain,	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported		_	
_	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
ь	The side of the state of the st			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
_	organization made the determination	3b		
С	13			
4-	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
48	Was any supported organization not organized in the United States ("foreign supported organization")? If	1.1		
_	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
Þ	the state of the s	1 1		
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
c	despite being controlled or supervised by or in connection with its supported organizations  Did the organization support any foreign supported organization that does not have an IRS determination	4b		
٠	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)	1 1		
	purposes.	4c		
5a	Oid the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	46		
	enswer (b) end (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations edded, 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	1 1		
	was accomplished (such as by amendment to the organizing document)	5a		
Þ				
	designated in the organization's organizing document?	5ь		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the chantable class benefited			
	by one or more of its supported organizations or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	1 .		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	ff "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
98	3,,,,	}		
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	i i		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
ь	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 litterest? If "Yes," provide detail in Part VI.	8p		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	<b>,</b> ,		
40-	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	- · · · · · · · · · · · · · · · · · · ·	<u> </u>		
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," enswer 10b below	10a		<del></del>
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)	400		
		dule A (Form 990	or 990-	EZ) 2016

Part		401238		Page
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	helow, the governing body of a supported organization?	11a		
	A family 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.	190		
ectio	on B. Type I Supporting Organizations			
	Bulling and the second of the		Yes	N
	Did the directors, trustees, or membership of one or more supported organizations have the power to	[ ]		
	regularly appoint or elect at least a majority of the organization's directors or trustees at ail times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	cuntrolled the organization's activities. If the organization had more than one supported organization			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	11		
	Old the organization operate for the benefit of any supported organization other than the supported			1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1		
42	supervised, or controlled the supporting arganization	2		
ecuc	on C. Type II Supporting Organizations	<del></del>		
_	184		Yes	<u>N</u>
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)			
BCUC	on D. All Type III Supporting Organizations	<del></del>		_
1	Old the emanistation provide to each of us exercised environmentation. It is less do not the 60h world of the		Yes	_,
	Old the organization provide to each of its supported organizations, by the last day of the fifth month of the	, ,	į	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the order tax	) }		
	year (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		j	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1-1-1		_
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and communous working relationship with the supported organization(s)	2		
	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	- { }		
	supported organizations played in this regard	13_1		
	on E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	Instructions)		
a	The organization satisfied the Activities Test Complete Ilno 2 below			
ь	The organization is the parent of each of its supported organizations. Complete line 3 below			
c [	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(SBE Instruction	S)	
2 Ar	divities Test Answer (a) and (b) below.	1	Yes	N
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	L	100	
	the supported organization(s) to which the organization was responsive? If "Yes" then in Part VI Identify	1 1		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b ·	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	1 1		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		1	
1	antendrate that the amendments for the second	2b		
	activities but for the organization's involvement			
	Parent of Supported Organizations Answer (a) and (b) below.			
3				
3   a	Parent of Supported Organizations Answer (a) and (b) below.	<b>3</b> a		
3   a	Parent of Supported Organizations Answer (a) and (b) below.  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3a		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting  1 Check here if the organization satisfied the Integral Part Test as a qualifying trust or			
1 Chark here if the amonitation extended the integral Post Tart as a qualificant test on	Nov 20		
		V . F .	
instructions. All other Type III non-functionally integrated supporting organizations	must com	plete Sections A through	1 E
Section A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recovenes of phor-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	1 1		1
maintenance of property held for production of income (see instructions)	8	_	l
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 8 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)	1		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		T ==
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 Milnimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for pnor year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for pnor year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		I
5 Income tax imposed in pnor year	5	<del>-</del> -	
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-functionally integra	ated Type	III supporting organization	on (see
instructions)			

Schedule A (Form 990 or 990-EZ) 2016

J

ection D - Di	ype III Non-Functionally Integrated 509(a stributions			Current Year
	paid to supported organizations to accomplish exempt	ourooses		<u> </u>
	paid to perform activity that directly furthers exempt put			<del></del>
	ons, in excess of income from activity	, , , , , , , , , , , , , , , , , , , ,		
3 Administr	ative expenses paid to accomplish exempt purposes of	supported organizations		
	paid to acquire exempt-use assets			
	set-aside amounts (pnor IRS approval required)			
	tributions (describe in Part VI) See instructions			
7 Total and	nual distributions. Add lines 1 through 6			
8 Distribution	ns to attentive supported organizations to which the or	ganization is responsive		
	letails in Part VI) See instructions	<u> </u>		
9 Dismbuta	ble amount for 2016 from Section C, line 6			
10 Line 8 an	tount divided by Line 9 amount			
		(1)	(ii)	(111)
Section	E - Distribution Allocations (see Instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 201
1 Distributa	ble amount for 2016 from Section C, line 6			
	ributions, if any, for years prior to 2016			
2 (reasonat	ile cause required-explain in Part VI) See			
instruction				
	stributions carryover, if any, to 2016			
8				
<u>b</u>				
c From 201				
d From 201	<del></del>			
9 From 201	· · · · · · · · · · · · · · · · · · ·			
	nes 3a through e			
	underdistributions of prior years			
	2016 distributable amount			
	from 2011 not applied (see instructions)			
	er Subtract lines 3g, 3h, and 3l from 3f			
	ns for 2016 from	]		
Section C	<u> </u>			
	underdistributions of prior years			
	2016 distributable amount			
	er Subtract lines 4a and 4b from 4			
	g underdistributions for years prior to 2018, if	j		
	ract lines 3g and 4a from line 2. For result	Į.	:	
	an zero, explain in Part VI See instructions			
	g underdistributions for 2016. Subtract lines 3h	ł		
	orn line 1. For result greater than zero, explain in	ì		
	ee Instructions			
	listributions carryover to 2017. Add lines 3			
and 4c				
	n of line 7			
<u> </u>				
b Excess fr				
c Excess fr				
d Excess fr				
e Excess fr	om 2018			(Form 990 or 990-EZ

## 10808N1 09/74/2018 5 14 PM

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 1, 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 8. Also complete this part for any additional information (See instructions)

10808N1 09/24/2018 5 14 FM

1.1

SCHEDULE O (Form 980 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.

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or 990-EZ.

Open to Public

Name of the organization WEST BOULEVARD NEIGHBORHOOD

Inspection information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Inspection Employer identification number

COALITION

30-0401238

FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES

**DESCRIPTION** 

AMOUNT

**EXPENSES** 

SUPPLIES

\$ 845

TOTAL \$

845