# POSTMARK DATE APR 1 0 2017

EXTENDED TO MAY 16, 2016

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

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

2014 Open to Bublic

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public

| ΔF                      | or the              | 2014 calendar year, or tax year beginning OCT 1, 2014 and  |                       | BP 30, 201               | 5                              |  |
|-------------------------|---------------------|--|-----------------------|--------------------------|--------------------------------|--|
|                         |                     |  | D Employer ident      |                          |                                |  |
|                         | policable           | C Name of organization  COMMUNITY CAPITAL DEVELOPMENT  | □ Employer ident      | Incarron number          |                                |  |
| _                       | ⊣Addres             |  |                       |                          |                                |  |
| 느                       | _ichange<br>⊤Name   |  |                       |                          | 4004705                        |  |
| $\vdash$                | Change<br>  Initial |  |                       | 1021735                  |                                |  |
|                         | ]return             | Number and street (or P O. box if mail is not delivered to street address)   | E Telephone number    |                          |                                |  |
|                         | ]Final<br>return∕   |  | 110                   | 614                      | -645-6171                      |  |
|                         | termin-<br>ated     | City or town, state or province, country, and ZIP or foreign postal code   | G Gross receipts \$   | 844,561.                 |                                |  |
|                         | Ameno               |  |                       | H(a) Is this a group     | retum                          |  |
| F                       | Application         |  | VD.                   | for subordinat           |                                |  |
| _                       | pendin              | SAME AS C ABOVE  |                       | H(b) Are all subordinate | <u> </u>                       |  |
|                         |                     | empt status 501(c)(3) X 501(c)(4) ◄ (insert no) 4947(a)(1)   | or 527                | 1 ' '                    | a list (see instructions)      |  |
|                         |                     | e· ► WWW.CCDCORP.ORG   | UI JZ1                | 1                        | ,                              |  |
|                         |                     |  | 1                     | H(c) Group exemp         |                                |  |
|                         |                     | organization X Corporation Trust Association Other   | L Year                | of tormation: 1961       | M State of legal domicile: OH  |  |
| <b>=</b> 7,5            |                     | Summary  |                       |                          |                                |  |
| €.                      |                     | Bnefly describe the organization's mission or most significant activities PROC   |                       |                          |                                |  |
|                         | :                   | AND STATE OF OHIO LOANS TO AID IN THE ECO  | NOMIC                 | DEVELOPMEN               | T OF                           |  |
| Ē                       | 2                   | Check this box 🕨 🔲 if the organization discontinued its operations or dispos   | sed                   | its net                  | asșets                         |  |
| Š                       | 3                   | Number of voting members of the governing body (Part VI, line 1a)  |                       | L                        | 3 14                           |  |
| ŏ                       | 4                   | Number of independent voting members of the governing body (Part VI, line 1b)  |                       | [                        | 4 14                           |  |
| ₹                       |                     | Total number of individuals employed in calendar year 2014 (Part V, line 2a)   |                       | ľ                        | 5 7                            |  |
| Activities & Governance |                     | Total number of volunteers (estimate if necessary)   |                       | F                        | 6 14                           |  |
| ŧΝ                      |                     | Total unrelated business revenue from Part VIII, column (C), line 12   |                       | - i                      | 7a 0.                          |  |
| A                       | l                   | •  |                       | <u> </u>                 | <del></del>                    |  |
|                         |                     | Net unrelated business taxable income from Form 990-T, line 34.  | · <del></del>         |                          |                                |  |
|                         |                     | A solution of the solution of  | -                     | Prior Year               | Current Year                   |  |
| 흑                       |                     | Contributions and grants (Part VIII, Ilne 1h)  | _                     | 0                        |                                |  |
| Revenue                 | 9                   | Program service revenue (Part VIII, line 2g)   | <u> </u>              | 730,468                  |                                |  |
| <u> </u>                | 10                  | Investment income (Part VIII, column (A), lines 3, 4, and 7d)  | <u> </u>              | 168,123                  |                                |  |
| -                       | 11 (                | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |                       | <b>2,4</b> 62            |                                |  |
|                         | 12                  | Total revenue - add Ilnes 8 through 11 (must equal Part VIII, column (A), line 12)   |                       | 901,053                  | 817,576.                       |  |
|                         | 13                  | Grants and similar amounts paid (Part IX, column (A), lines 1-3)   |                       | 0                        | 0.                             |  |
|                         | 14                  | Benefits paid to or for members (Part IX, column (A), line 4)  |                       | 0                        | 0.                             |  |
|                         | 46                  | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  |                       | 666,596                  | 658,087.                       |  |
| Expenses                | 16a                 | Professional fundraising fees (Part IX, column (4), line 11e)  | <u> </u>              | 0                        |                                |  |
| Jec.                    | h                   | Total fundraising expenses (Part IX, column (D), line 25   | <b>h</b> 33           |                          |                                |  |
| EX                      | 17                  | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)   | <del>√-</del>         | 284,545                  |                                |  |
|                         | 18                  | Total expenses. Add lines 13-17 (must equal Page 1 column (A) line 25)   | 51 <del> -</del>      | 951,141                  |                                |  |
|                         | 10                  | the subgrape and interest of the state of th | <b>}</b>              |                          | <u></u>                        |  |
|                         | 19                  | Revenue less expenses Subtract line 18 from the 12 71 7 4 2017   | <del>-   -  </del>    |                          | -48,435.                       |  |
| Assets or<br>Halances   |                     | 100  |                       | ginning of Current Yes   |                                |  |
| 33et                    | 20                  | Total assets (Part X, line 16)   | 1                     | 1,859,968                |                                |  |
| 矍                       |                     | Total liabilities (Part X, time 26)  | រ                     | 1,331,573                |                                |  |
| 慧                       |                     | Net assets or fund balances Subtract line 21 from line 20  |                       | 528,395                  | 444,261.                       |  |
| Re                      | rtill?              | Signature Block  |                       |                          |                                |  |
| Und                     | er pena             | ities of perjury, I declare that I have examined this return, including accompanying schedule  | s and stateme         | ents, and to the best of | my knowledge and belief, it is |  |
| true.                   | correc              | t, and complete Declaration of preparer (other than officer) is based on all information of wi   | hich <b>ore</b> parer | has any knowledge .      |                                |  |
|                         |                     | Att Allen V Att 14 Your  |                       | 5/1                      | 0/1/0                          |  |
| Sign<br>H <b>er</b> e   |                     | Signature of officer   |                       | Date /                   | <del>-/14</del>                |  |
|                         |                     | CATHERINE J. GARLAND, PRESIDENT  |                       |                          |                                |  |
| ner                     | e                   | Type or print name and title   |                       |                          | <del></del>                    |  |
|                         |                     |  | <del></del>           | )nto                     | DTIN                           |  |
|                         |                     | Print/Type preparer's name Preparer's signature  |                       | Date Check               | PTIN                           |  |
| Paid                    |                     | MARY BLIZABETH WRIGHT, CP MARY ELIZABETH I   | WRIGH                 | self-en                  | <del></del>                    |  |
| -                       | erer                | Furn's name REA & ASSOCIATES, INC.   |                       | Firm's EIN 1             | 34-1310124                     |  |
| Use                     | Only                | Firm's address > 941 STEUBENVILLE AVE., P.O. BOX   | 820                   |                          | <del> </del>                   |  |
|                         |                     | CAMBRIDGE, OH 43725-0820   |                       | Phone no (               | 740)-432-5658                  |  |
| May                     | the IF              | S discuss this return with the preparer shown above? (see instructions)  |                       |                          | X Yes No                       |  |
|                         | 01 11-07            |  | ons                   | ·                        | Form 990 (2014)                |  |

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

**Public Charity Status and Public Support** 

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

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www irs gov/form990 Employer identification number Name of the organization

Open to Public Inspection

|   | Δ NIL/ | CTD   | EET DI AVEDS OF DECATIID                                       |                                       |   |  |                             | 45-52   | 74271                               |  |  |
|---|--------|---|--|---------------------------------------|---|--|-----------------------------|---|-------------------------------------|--|--|
|   | Par    |   | ET PLAYERS OF DECATUR  Reason for Public Char                  | rity Status (All                      | organizations must  | comple   | te this p                   |   |                                     |  |  |
| _   |        | _   | zation is not a private founda                                 |                                       |   |  |                             |   |                                     |  |  |
|   | 1      | _   | church, convention of church                                   |                                       | •   |  | -                           |   | $\mathbf{C}_{h}$ $\mathbf{I}$       |  |  |
|   | 2      |   | school described in section                                    |                                       |   |  |                             |   | K\/                                 |  |  |
|   |        |   | hospital or a cooperative hos                                  |                                       |   |  |                             |   | / \V                                |  |  |
|   |        |   | medical research organization                                  |                                       |   |  |                             |   | iii) Enter the                      |  |  |
| FK  | -      |   | espital's name, city, and state                                | •                                     | 511,511,511,511,111,111,111,111,111,111                     | J. 1. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.                             |                             |   | ,                                   |  |  |
| 5   | 5      |   |  |                                       | college or university                                       | lege or university owned or operated by a governmental unit described in |                             |   |                                     |  |  |
| <u>i</u>  | Ū      |   | ection 170(b)(1)(A)(iv) (Comp                                  |                                       | college of aniversity                                       | OWNEG C  | п ороган                    | sa by a government                                  | ar arme accombca irr                |  |  |
| The prospital's name, city, and state  5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv) (Complete Part II)  6 ☐ A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v) |        |   |  |                                       |   |  |                             |   |                                     |  |  |
| ñ   |        | · · · · · · · · · · · · · · · · · · ·   |  |                                       |   |  |                             |   |                                     |  |  |
|   | •      | An organization that normally receives a substantial part of its support from a governmental unit or from the general public          |  |                                       |   |  |                             |   |                                     |  |  |
| •   | 0      | 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) |  |                                       |   |  |                             |   |                                     |  |  |
| í   |        |   | -  |                                       |   | -  |                             |   |                                     |  |  |
|   | 9      | ⊔ Ar<br>or  | n agricultural research organi<br>university or a non-land-gra | zation described<br>nt college of agr | d in <b>section 170(b)(1)</b><br>riculture (see instruction | (A)(IX) op<br>ons) Ente  | erated in<br>er the nan     | conjunction with a line, city, and state of         | and-grant college<br>the college or |  |  |
| ,<br>I  |        |   | nversity   |                                       |   |  |                             |   |                                     |  |  |
| · ·   | 10     | ✓ Ar  | organization that normally r                                   | eceives (1) mor                       | e than 331/3% of its su                                     | upport fro   | om contri                   | butions, membership                                 | o fees, and gross                   |  |  |
| ,   |        | re<br>SL  | ceipts from activities related<br>ipport from gross investment | to its exempt in                      | nctions—subject to c<br>related business taxal              | ertain ext<br>ble incom  | cepuons,<br>ne (less si     | ano (2) no more mai<br>ection 511 tax) from         | businesses                          |  |  |
|   |        |   | quired by the organization a                                   |                                       |   |  |                             |   |                                     |  |  |
|   | 11     | ☐ Ar  | n organization organized and                                   | operated exclusi                      | sively to test for public                                   | c safety   | See <b>sect</b>             | ion 509(a)(4)                                       |                                     |  |  |
|   | 12     | ☐ Ar  | n organization organized and                                   | operated exclus                       | sively for the benefit o                                    | f, to perfo  | orm the fu                  | unctions of, or to car                              | ry out the purposes                 |  |  |
|   |        |   | one or more publicly suppo                                     |                                       |   |  |                             |   | , ,, ,                              |  |  |
|   |        | CH  | neck the box in lines 12a thro                                 | ugh 12d that de:                      | scribes the type of sup                                     | oporting o   | organizati                  | on and complete line                                | s 12e, 12f, and 12g                 |  |  |
|   | а      |   | Type I A supporting organ                                      | zation operated                       | l, supervised, or contr                                     | olle <b>d by</b> i   | ts suppo                    | rted organization(s),                               | typically by giving                 |  |  |
|   |        |   | the supported organization                                     | (s) the power to                      | regularly appoint or e                                      | elect a ma   | ajority of t                | the di <mark>rect</mark> ors or trusti              | ees of the                          |  |  |
|   |        |   | supporting organization Ye                                     | ou must comple                        | ete Part IV, Sections                                       | A and B  |                             |   |                                     |  |  |
|   | b      |   | Type II A supporting organ                                     | nization supervis                     | ed or controlled in co                                      | nnection   | with its s                  | supported organizati                                | on(s), by having                    |  |  |
|   |        |   | control or management of                                       | the supporting o                      | rganization vested in                                       | the same   | persons                     | that control or mana                                | age the supported                   |  |  |
|   |        |   | organization(s) You must                                       | complete Part I                       | V, Sections A and C   |  |                             |   |                                     |  |  |
|   | C      |   | Type III functionally integ                                    |                                       |   |  |                             |   | illy integrated with,               |  |  |
|   |        |   | its supported organization(                                    | •                                     | •   |  | •                           |   |                                     |  |  |
|   | d      |   | •                        |                                       |   |  |                             |   |                                     |  |  |
|   |        |   | that is not functionally integ                                 |                                       |   |  |                             |   | d an attentiveness                  |  |  |
|   |        |   | requirement (see instructio                                    | ns) <b>You must c</b>                 | omplete Part IV, Sec  | ctions A   | and D, ar                   | nd Part V   |                                     |  |  |
|   | е      |   |  |                                       |   |  |                             |   | : II, Type III                      |  |  |
|   |        |   | functionally integrated, or 1                                  |                                       | tionally integrated sur                                     | pporting (   | organizat                   | ion   |                                     |  |  |
|   | f      |   | er the number of supported of                                  |                                       |   |  |                             |   |                                     |  |  |
| _   | g      |   | vide the following information                                 |                                       |   | r  |                             | <del>, - · - · - · · · · · · · · · · · · · · </del> |                                     |  |  |
|   |        | (i) Nan   | ne of supported organization                                   | (ii) EIN                              | (iii) Type of organization<br>(described on lines 1–10      |  | rganization<br>Ir governing | (v) Amount of monetary                              | (vi) Amount of                      |  |  |
|   |        |   |  |                                       | above (see instructions))                                   |  | meni?                       | support (see<br>instructions)                       | other support (see<br>instructions) |  |  |
|   |        |   |  |                                       |   | Yes  | N-                          |   |                                     |  |  |
| _   |        |   |  |                                       |   | res  | No                          |   |                                     |  |  |
| (/  | A)     |   |  |                                       |   |  | Į                           |   |                                     |  |  |
| _   |        |   |  |                                       |   |  |                             |   |                                     |  |  |
| (E  | 3)     |   |  |                                       |   |  |                             |   |                                     |  |  |
|   |        |   |  |                                       |   | <del></del>  |                             |   |                                     |  |  |
| (0  | •)     |   |  |                                       |   |  |                             |   |                                     |  |  |
| ([  | ))     |   | <del></del>  |                                       |   |  |                             |   |                                     |  |  |
| _   |        |   |  |                                       |   |  |                             |   |                                     |  |  |
| (E  | :)     |   |  |                                       |   |  |                             |   |                                     |  |  |
| T   | otal   |   |  |                                       |   |  |                             |   |                                     |  |  |

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A Public Support (a) 2012 (b) 2013 (e) 2016 (f) Total Calendar year (or fiscal year beginning in) (c) 2014 (d) 2015 Gifts. grants, contributions, membership fees received (Do not include any "unusual grants") 2 revenues levied the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total Add lines 1 through 3 The portion of total contributions by than each person (other publicly governmental unit or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support Subtract line 5 from line 4 Section B Total Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI) 11 Total support Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) First five years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f) 14 % Public support percentage from 2015 Schedule A. Part II. line 14 15 % 331/3% support test-2016 If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 331/3% support test -2015. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2016 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization gualifies as a publicly supported organization П 10%-facts-and-circumstances test-2015 If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 

### Schedule A (Form 990 or 990 EZ) 2016 Page 3 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) Section A Public Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (e) 2016 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities 4,310 15,256 12,862 22,614 22,653 77,694 furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 24119 23,33925,78026,322 105,411 Total Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 from other than disqualified received persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from 24,119 23,339 25,780 line 6 ) Section B Total Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (f) Total (d) 2015 (e) 2016 Amounts from line 6 5,851 26.32A 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 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 13 Total support (Add lines 9, 10c, 11, and 12) 5.85/24.119 23339 25.780 26322 /05 First five years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here V

Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2015 Schedule A, Part III, line 15 16 % Section D Computation of Investment Income Percentage Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) % 17 18 Investment income percentage from 2015 Schedule A, Part III, line 17 18 %

Section C Computation of Public Support Percentage

331/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 19a 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ □

b 331/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization. Private foundation If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 20

# 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.)

|       | Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P   | art v |     |    |
|-------|---|-------|-----|----|
| Secti | on A All Supporting Organizations   | _     | Yes | No |
| 1     | Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.   | 1     | 163 | No |
| 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    |     |    |
| b     | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination  | 3b    |     |    |
| С     | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use  | 3с    |     |    |
| 4a    | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below   | 4a    |     |    |
| b     | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations   | 4b    |     |    |
| 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   | 4c    |     |    |
| 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) | 5a    |     |    |
| b     | Type I or Type II only Was any added or substituted supported organization part of a class already designated in the organization's organizing document?  | 5b    |     |    |
| С     | 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 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  | 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 regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)   | 7     |     |    |
| 8     | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)  | 8     |     |    |
| 9a    | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b>  | 9a    |     |    |
| b     | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI  | 9b    |     |    |
| С     | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.  | 9c    |     |    |
|       | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below   | 10a   |     |    |
| b     | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to  |       |     |    |

determine whether the organization had excess business holdings)

10b

| Part    | Supporting Organizations (continued)  |            | ·       |            |
|---------|---|------------|---------|------------|
|         |   |            | Yes     | No         |
| 11      | Has the organization accepted a gift or contribution from any of the following persons?   |            |         |            |
| а       | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?   | 44.        |         | •          |
| h       | A family member of a person described in (a) above?   | 11a<br>11b | _       | -          |
|         | 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        |         |            |
|         | on B Type I Supporting Organizations  | 1110       |         |            |
|         |   |            | Yes     | No         |
| 1       | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or  |            |         |            |
|         | controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  |            |         |            |
|         |   | 1          |         |            |
| 2       | Did the organization operate for the benefit of any supported organization other than the supported 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, supervised, or controlled the supporting organization          | 2          |         |            |
| Section | on C Type II Supporting Organizations   |            |         |            |
|         |   |            | Yes     | No         |
| 1       | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)                       |            |         |            |
| Saction | on D All Type III Supporting Organizations  | 1          |         | L          |
| Jecui   | on b Air Type in 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  |            | 163     |            |
|         | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?                             |            |         |            |
| 2       | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)  | 2          |         |            |
| 3       | 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               | 3          |         |            |
| Section | on E Type III Functionally Integrated Supporting Organizations  |            | ,       |            |
| 1       | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in   | netru      | ctions  |            |
| а       | The organization satisfied the Activities Test Complete line 2 below  | 150 0      | CHOIR   | <b>3</b> / |
| b       | The organization is the parent of each of its supported organizations. <i>Complete line 3 below</i>   |            |         |            |
| С       | ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s  | see in:    | structi | ions)      |
| 2       | Activities Test Answer (a) and (b) below.   | 1          | Yes     | No         |
| а       | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of  | ┌┤         | 162     | 140        |
|         | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined   |            |         |            |
|         | that these activities constituted substantially all of its activities   | 2a         |         |            |
| b       | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement | OL.        |         |            |
| 3       | Parent of Supported Organizations Answer (a) and (b) below  | 2b         |         |            |
| а       | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>   | 3a         |         |            |
| b       | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard  | 3b         |         |            |

| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org   | anı    | zations                               |                                |
|--|--------|---------------------------------------|--------------------------------|
| 1 Check here if the organization satisfied the Integral Part Test as a qualifying  |        |                                       |                                |
| instructions All other Type III non-functionally integrated supporting organ   | ıızatı | ons must complete Sect                |                                |
| Section A - Adjusted Net Income  |        | (A) Pnor Year                         | (B) Current Year<br>(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      |                                       | _                              |
| 5 Depreciation and depletion   | 5      |                                       |                                |
| 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6      |                                       |                                |
| 7 Other expenses (see instructions)  | 7      |                                       |                                |
| 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)   | 8      |                                       |                                |
| Section B - Minimum Asset Amount   |        | (A) Prior Year                        | (B) Current Year<br>(optional) |
| Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)   |        |                                       |                                |
| a Average monthly value of securities  | 1a     |                                       |                                |
| <b>b</b> Average monthly cash balances   | 1b     |                                       |                                |
| c Fair market value of other non-exempt-use assets   | 1c     |                                       |                                |
| d Total (add lines 1a, 1b, and 1c)   | 1d     | · · · · · · · · · · · · · · · · · · · |                                |
| e Discount claimed for blockage or other factors (explain in detail in Part VI)  |        |                                       |                                |
| 2 Acquisition indebtedness applicable to non-exempt-use assets   | 2      |                                       |                                |
| 3 Subtract line 2 from line 1d   | 3      |                                       |                                |
| 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)  | 4      |                                       |                                |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3)   | 5      |                                       |                                |
| 6 Multiply line 5 by 035   | 6      | ···                                   |                                |
| 7 Recoveries of prior-year distributions   | 7      |                                       |                                |
| 8 Minimum Asset Amount (add line 7 to line 6)  | 8      |                                       |                                |
| Section C - Distributable Amount   |        |                                       | Current Year                   |
| 1 Adjusted net income for prior year (from Section A, line 8, Column A)  | [1]    |                                       |                                |
| 2 Enter 85% of line 1  | 2      |                                       | _                              |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A)   | 3      |                                       |                                |
| 4 Enter greater of line 2 or line 3  | 4      |                                       |                                |
| 5 Income tax imposed in prior year   | 5      | ···                                   |                                |
| 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-functional   | y int  | egrated Type III support              | ing organization (see          |

| Part     |   | 3) Supporting Organi        | zations (continued)                    | ·   |
|----------|---|-----------------------------|--|---|
| Secti    | tion P - Distributions  |                             |  | Current Year                              |
| 1        | Amounts paid to supported organizations to accomplish   | exempt purposes             |  |   |
| 2        | Amounts paid to perform activity that directly furthers exe   | empt purposes of suppo      | orted                                  |   |
|          | organizations, in excess of income from activity  |                             |  |   |
| 3        | Administrative expenses paid to accomplish exempt purp  |                             |  |   |
| 4        | Amounts paid to acquire exempt-use assets   |                             |  |   |
| 5        | Qualified set-aside amounts (prior IRS approval required)   |                             |  |   |
| 6        | Other distributions (describe in Part VI) See instructions  | <del>.</del>                |  |   |
| 7        | Total annual distributions. Add lines 1 through 6   |                             |  |   |
| 8        | Distributions to attentive supported organizations to which   | sponsive                    |  |   |
|          | (provide details in Part VI) See instructions   | <u> </u>                    |  |   |
| 9        | Distributable amount for 2016 from Section C, line 6  |                             |  | <del></del>                               |
| 10       | Line 8 amount divided by Line 9 amount  | <del> </del>                |  |   |
| Se       | ection E - Distribution Allocations (see instructions)  | (i)<br>Excess Distributions | (II)<br>Underdistributions<br>Pre-2016 | (III)<br>Distributable<br>Amount for 2016 |
| 1        | Distributable amount for 2016 from Section C, line 6  |                             |  |   |
| 2        | Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI) See instructions   |                             |  |   |
| 3        | Excess distributions carryover, if any, to 2016   |                             |  |   |
| a        |   |                             |  |   |
| b        |   |                             |  |   |
| С        | From 2013   |                             |  |   |
| d        | From 2014   |                             |  |   |
| e        | From 2015   |                             |  | ""  |
| f        | Total of lines 3a through e   |                             |  |   |
| g        | Applied to underdistributions of prior years  |                             |  |   |
| h        | Applied to 2016 distributable amount  |                             |  |   |
| 1        | Carryover from 2011 not applied (see instructions)  |                             |  |   |
|          | Remainder Subtract lines 3g, 3h, and 3i from 3f   |                             |  |   |
| 4        | Distributions for 2016 from   | •                           |  |   |
|          | Section D, line 7 \$  |                             |  |   |
| a        | Applied to underdistributions of prior years  |                             |  |   |
| b        | Applied to 2016 distributable amount  |                             |  |   |
| С        | Remainder Subtract lines 4a and 4b from 4   |                             |  |   |
| 5        | Remaining underdistributions for years prior to 2016, if<br>any Subtract lines 3g and 4a from line 2. For result<br>greater than zero, explain in Part VI. See instructions |                             |  |   |
| 6        | Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions                                |                             |  |   |
| 7        | Excess distributions carryover to 2017 Add lines 3j and 4c  |                             |  |   |
| 8        | Breakdown of line 7   |                             |  |   |
| a        |   |                             |  |   |
| b        | Excess from 2013  |                             |  |   |
| C        | Excess from 2014  |                             |  |   |
| d        | Excess from 2015  |                             |  |   |
| <u>e</u> | Excess from 2016  |                             |  |   |

| <br> | III, line 12, Part I\<br>B, lines 1 and 2,<br>3a, and 3b, Part | V, Section A, Iir<br>Part IV, Section<br>V, Iine 1, Part \ | nes 1, 2, 3b, 3c,<br>n C, line 1, Part l<br>/, Section B, line | 4b, 4c, 5a, 6<br>IV, Section D<br>: 1e, Part V, 3 | i, 9a, 9b, 9c, 1<br>), lines 2 and 3<br>Section D, line | line 10, Part II, lir<br>1a, 11b, and 11c<br>3, Part IV, Section<br>es 5, 6, and 8, an<br>see instructions) | c, Part IV, Section<br>n E, lines 1c, 2a, 2 | 2b, |
|------|--|--|--|---|---|---|---|-----|
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