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Form **990-E7**

Department of the Treasury

Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150

2016

Open to Public Inspection

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning 2016, and ending . 20 D Employer identification number C Name of organization B Check if applicable Address change North Star Community Development Corporation 38-2701299 Number and street (or P O box, if mail is not delivered to street address) E Telephone number Name change Initial return 419.290.2025 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Detroit, Michigan 48238 Application pending H Check ► if the organization is not G Accounting Method: Website: ▶ required to attach Schedule B J Tax-exempt status (check only one) - 501(c)(3) 501(c) ((Form 990, 990-EZ, or 990-PF)) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Other K Form of organization: Corporation Trust Association L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I . 1 Contributions, gifts, grants, and similar amounts received 2,500 2 Program service revenue including government fees and contracts 2 1,000 3 3 4 Investment income . . . 5a Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Revenue of contributions Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . Less: direct expenses from gaming and fundraising events . . 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 7a Gross sales of inventory, less returns and allowances . . Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c C 8 8 9 3,500 10 10 Grants and similar amounts paid (list in Schedule O) 11 11 Benefits paid to or for members 12 12 13 Professional fees and other payments to independent contractors 13 14 14 1,200 15 15 Printing, publications, postage, and shipping. 16 16 Other expenses (describe in Schedule O) . . . 17 1,450 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 2,050 Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 1,600

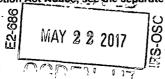
For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2016)

2,350

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Other changes in net assets or fund balances (explain in Schedule O) . . .

Net assets or fund balances at end of year. Combine lines 18 through 20

Pai	t II Balance Sheets (see the instructions	for Part II)				
	Check if the organization used Schedul	le O to respond to a	ny question in this		٠.	<u> </u>
	•			(A) Beginning of year	<u> </u>	(B) End of year
22	Cash, savings, and investments			1,200		1,600
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	
25	Total assets			1,200		1,600
26	Total liabilities (describe in Schedule O)				26	
27	Net assets or fund balances (line 27 of colum			1,200	27	1,600
Par		-		•	1	Expenses
140-	Check if the organization used Schedu	le O to respond to a	ny question in this	Part III		quired for section
	t is the organization's primary exempt purpose?				501	(c)(3) and 501(c)(4)
as m	cribe the organization's program service accomp neasured by expenses. In a clear and concise ons benefited, and other relevant information for o	manner, describe the			1 -	anizations, optional for ers)
28	Grace Learning Center & Skillman Foundation					
						
		nt includes foreign gra			282	2,500
29					1	
					İ	
	(Cronto C	nt includes foreign gra	anta abaak bara		298	. 1
30					298	
30					1	
					ì	
	(Grants \$) If this amour	nt includes foreign gra	ants check here	▶ □	302	
31	Other program services (describe in Schedule O				1	-
٠.		nt includes foreign gra			318	<u>, </u>
32	Total program service expenses (add lines 28a	a through 31a)		>	32	
	t IV List of Officers, Directors, Trustees, and K					
	Check if the organization used Schedu			·		
		(b) Average	(c) Reportable	(d) Health benefits,	1,	\
	(a) Name and title	hours per week devoted to position	compensation (Forms W-2/1099-MIS (if not paid, enter -0-	C) benefit plans, and) Estimated amount of other compensation
Donr	na Harris President					
2480	W. McNichols Rd., Michigan 48221	25		0	0	0
	Russell Treasurer				- [
2240	Franklin Ave. Ste. #3 Toledo, Ohio 43620	20		0	0	0
	new Little				- 1	
<u>3843</u>	Puritan Ave., Detroit, Mi 48238	15	 -	0	0	0
				}		
			ļ ————————————————————————————————————		∸	
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			}		-	
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•						

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Fart	Yes	
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
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)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		7
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
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	36		1
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?	37b		✓
38a	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?	200		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	38a		
39	Section 501(c)(7) organizations. Enter:	†		
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities]		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year undersection 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40ь		1
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ▶ Telephone no. ▶			
b	Located at ► ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
D	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	res	√
	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).			Ì
С	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:	42c		✓
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 • 43		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	103	✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		√
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		1
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	<u> </u>	7
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		1

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46	Did th	e organization engage, directly or in	directly, in political c	ampaign activities	on behalf o	of or in opposition	on [Yes	No
	to car	ndidates for public office? If "Yes," c	omplete Schedule C						1
Part '	_ ,	Section 501(c)(3) organizations All section 501(c)(3) organizations 50 and 51.		stions 47-49b an	d 52, and	complete the	tables f	or line	es
		Check if the organization used Sch	edule O to respond	I to any question in	this Part	VI		<u> </u>	<u>, D</u>
47		ne organization engage in lobbying if "Yes," complete Schedule C, Part		section 501(h) elec		-	ex 47	Yes	No
48	•	organization a school as described in				•	48		1
49a	Did th	e organization make any transfers to	an exempt non-cha	ritable related orga			49a		1
b		s," was the related organization a se					49b		V
50		plete this table for the organization's byees) who each received more than							
		Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	(d) H contribut benefit p	ealth benefits,	(e) Estimate other con	ed amo	unt of
					1				<u></u>
					 		_ _		
									
					l				
f 51	Comp	number of other employees paid ove plete this table for the organization's 000 of compensation from the organ	s five highest comp		nt contrac	tors who each	received	more	than
	(a)	Name and business address of each independent	ent contractor	(b) Type of s	ervice	(c) (Compensati	on	
									
				-					
						_			
	Total	number of other independent as	otoro ocob recours	Over \$100,000					
52	Did t	number of other independent contra he organization complete Schedu leted Schedule A					a ► ✓ Yes	. 🗆	No
Jnder p	enalties rect, and	of penury, I declare that I have examined this red complete Declaration of preparer/lother than	officer) is based on all info				wledge and	belief,	ıt ıs
Sign Here	,	organie o organie	1 ABA CA Pres	(Cusic		3-/3 - Date	107		
		Type or print name and title	,				1		
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature		Date	Check Self-employe	1		
Use (Firm's name ►				Firm's ElN ▶			
Mav th	e IRS	Firm's address ▶ discuss this return with the preparer	shown above? See	Instructions		Phone no	- □ Yes		No

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.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

		Community Development Corp						01299
Par	_	Reason for Public Cha			<u> </u>			ons.
		zation is not a private founda						
1		church, convention of church						
2 3		school described in section						
4		hospital or a cooperative ho medical research organization	spital service or	ganization described i	ın secuoi	י)(מ)טיר ה	1){A}{III}. 	(ii) Catastha
7		ospital's name, city, and stat		onjunction with a rios	pital desc	indea in s	section 170(b)(1)(A)	(III). Enter the
5	☐ Aı	n organization operated for ection 170(b)(1)(A)(iv). (Com	the benefit of a	college or university	owned o	or operate	ed by a government	tal unit described in
6		federal, state, or local gover		mental unit described	t in sectio	on 170(h	\(1\(Δ\(_V)	
7								
8	□А	community trust described i	n section 170(b)(1)(A)(vi). (Complete	Part II.)			
9								
10	O An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)							
11		n organization organized and						
12		n organization organized and						
	of	one or more publicly support	orted organizatio	ns described in sect	ion 509(a	ı)(1) or s	ection 509(a)(2). Se	e section 509(a)(3)
	CI	heck the box in lines 12a thro						_
а		Type I. A supporting organ	iization operated	l, supervised, or conti	rolled by	its suppo	rted organization(s),	typically by giving
		the supported organization supporting organization. Ye	(s) the power to	regularly appoint or e	elect a ma	ajority of t	the directors or trust	ees of the
b		Type II. A supporting orga					ounnested assessment	on(a) by baying
J		control or management of organization(s). You must	the supporting o	rganization vested in	the same	with its s persons	supported organization in the state of the s	age the supported
С		Type III functionally integ	rated. A suppor s) (see instruction	ting organization oper	rated in c lete Part	onnectio	n with, and functionations	ally integrated with,
d		Type III non-functionally it that is not functionally integrequirement (see instructionally integrationally integrated).	grated. The orga	nization generally mu	st satisfy	a distribi	ution requirement an	orted organization(s) id an attentiveness
е		Check this box if the organ functionally integrated, or 7	ization received Type III non-func	a written determination	on from ti pporting (ne IRS th	at it is a Type I, Type ion.	e II, Type III
f	Ente	er the number of supported o	organizations .					
<u>g</u>	Prov	vide the following information	about the supp	orted organization(s).				
	(i) Nan	ne of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Total					1	l		

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Part	I Support Schedule for Organiza	ations Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked the	ne box on line	e 5, 7, or 8 of	Part I or if the	e organizatioi	n failed to qua	alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, pl	ease comple	te Part III.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not]			
	include any "unusual grants.")	ļ		1,250	3,500	3,500	8,250
2	Tax revenues levied for the		1				
	organization's benefit and either paid		1	1			
	to or expended on its behalf						
3	The value of services or facilities]	1]			
	furnished by a governmental unit to the]				
_	organization without charge	<u> </u>					_
4	Total. Add lines 1 through 3			1,250	3,500	3,500	
5	The portion of total contributions by	Ì					
	each person (other than a						
	governmental unit or publicly]				
	supported organization) included on line 1 that exceeds 2% of the amount	ļ]			
	shown on line 11, column (f)						0.050
6	Public support. Subtract line 5 from line 4			<u> </u>			8,250
	on B. Total Support	<u> </u>	<u> </u>	L		<u> </u>	8,250
	idar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	(8) 2012	(6) 2010	(0) 2014	10, 2010	(0) 2010	(i) Total
8	Gross income from interest, dividends,			† · · ·			
U	payments received on securities loans,			}			
	rents, royalties and income from similar	İ					
	sources						
9	Net income from unrelated business		<u> </u>				
	activities, whether or not the business	ļ					
	is regularly carned on	1					
10	Other income. Do not include gain or						
	loss from the sale of capital assets		į	ĺ			
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10		<u></u>				8,250
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the	ne organizatioi	n's first, secor	ıd, thırd, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he			<u>· - : - : · · · </u>	<u></u>		. <u>P</u> [
	on C. Computation of Public Suppor		<u> </u>				
14	Public support percentage for 2016 (line		-			14	100 %
15 160	Public support percentage from 2015 Sch					15	100 %
16a	331/3% support test—2016. If the organi box and stop here. The organization qua					o'/3% or more,	
b	331/3% support test—2015. If the organi			-			. ► 🔽
U	this box and stop here. The organization						ore, check
47.	•	-		_			
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me						
	Part VI how the organization meets the "						
	organization			· · · · ·			> -
b	10%-facts-and-circumstances test—2					6a 16b or 17	ـــ a and tine
D	15 is 10% or more, and if the organization	_					
	Explain in Part VI how the organization r						

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

▶ □

Part III Support Schedule for Organizations Described in Section 509(a)(2)

• •	_			
(Complete only	if you checked the box of	n line 10 of Part I or if the	e organization failed to quali	fy under Part II.
If the organizati	ion fails to qualify under t	re tests listed below inles	ase complete Part II)	

	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	1.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees	· · ·					
	received. (Do not include any "unusual grants.")]		
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities			ľ			
	furnished in any activity that is related to the organization's tax-exempt purpose			ļ.			
3	Gross receipts from activities that are not an			 		· · · · · ·	
•	unrelated trade or business under section 513			1			
4	Tax revenues levied for the			 	 		
7	organization's benefit and either paid			1			
	to or expended on its behalf			.			
_	•			 			
5	The value of services or facilities			Į.			
	furnished by a governmental unit to the	1		Ì]		
_	organization without charge						
6	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]		
	received from other than disqualified			}	1		
	persons that exceed the greater of \$5,000		}	1	1		
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)			}			
Secti	on B. Total Support		· · · · · · · · · · · · · · · · · · ·	<u> </u>			
Calen	dar 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 income from interest, dividends,						
•	payments received on securities loans, rents,						
	royalties and income from similar sources						
h	Unrelated business taxable income (less						
	section 511 taxes) from businesses			1	Į.		
	acquired after June 30, 1975			Ì			
^	Add lines 10a and 10b		·				
11	Net income from unrelated business		 -	 -	 		
''	activities not included in line 10b, whether			ļ	i		
	or not the business is regularly carried on				<u> </u>		
40	•			 			
12	Other income Do not include gain or loss from the sale of capital assets			1			
	(Explain in Part VI.)						
12	Total support. (Add lines 9, 10c, 11,		 	 	 	 	
13	and 12)		1	1	1		
4.4	•		l first	d should forces			501/c\/2\
14	First five years. If the Form 990 is for the				-		_
	organization, check this box and stop he			· · · · ·	<u> </u>		· <u> </u>
	on C. Computation of Public Suppor				····	T T-	
15	Public support percentage for 2016 (line						%
16	Public support percentage from 2015 Sch			<u></u>	<u> </u>	16	
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2016 (lıne 10c, colun	nn (f) divided b	y line 13, colu	mn (f))	17	%_
18	Investment income percentage from 2015					18	%
19a	331/3% support tests - 2016. If the organ						
	17 is not more than 331/3%, check this box	and stop here.	. The organizati	ion qualifies as	a publicly supp	orted organizati	ion 🕨 🗌
b	331/2% support tests - 2015. If the organiz	ation did not o	heck a box on	line 14 or line	19a, and line 16	is more than 3	331/3%, and
	line 18 is not more than 331/3%, check this	box and stop h	ere. The organ	ization qualifies	s as a publicly s	upported organ	iization 🕨 🔲
20	Private foundation If the organization di	d not check a	hoy on line 14	10a or 10h	chack this hav	and see instru	

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	<u>'.) </u>	
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		
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		1
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		1
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 Part VI when and how the organization made the determination.	3b		1
c	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.	3c		1
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		1
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		1
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in 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		1
5а	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		1
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		1
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		1
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		1
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		1
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		1
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		1
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 .	9с		1
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		1
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

	W Composition Operations (and investigation			age o
Part	IV Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		162	140
	'A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
a	below, the governing body of a supported organization?	11a		1
h	A family member of a person described in (a) above?	11b		1
	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		7
	ion B. Type I Supporting Organizations		L	
			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.			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		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 carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion 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)			
		1	Ĺ	<u> </u>
Sect	ion D. All Type III Supporting Organizations		Yes	No
	Did the assessment as well as a such of the assessment assessment and but the last day of the fifth month of the	·	res	NO
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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?	1		1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	- <u>-</u> -		-
•	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		1
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	'		ł
	supported organizations played in this regard.	3		1
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).
	☐ The organization satisfied the Activities Test. Complete line 2 below.			•
a b	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 (see in	structi	ions).
Ŭ	The digamental supported a governmental charge possible in a service year supported a government principle			
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	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.	2h		
_	· · · · · · · · · · · · · · · · · · ·	2b	 	✓
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Put the erganization have the power to requirely exposit or elect a majority of the efficiers, directors, or	1		
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		1
L	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	100		-
b	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		1