# Form 990-EZ

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)

2015

OMB No 1545-1150

▶ 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.

Open to Public Inspection

2015, and ending A For the 2015 calendar year, or tax year beginning . 20 C Name of organization B Check if applicable D Employer identification number Address change THE NOBLE TRUTH PROJECT INCORPORATED 46.3030637 Number and street (or P O box, if mail is not delivered to street address) Name change E Telephone number Initial return 1870 DELOWED PLACE S.W. 908.591.7615 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Application pending ATLANTA, GA\_30311 Other (specify) H Check ► ☐ if the organization is not **NOBLETRUTHPROJECT.ORG** 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 K Form of organization: Corporation ☐ Trust Association Other 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 . . . . . Part I 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. Contributions, gifts, grants, and similar amounts received . . . . . . 200.00 201 2 Program service revenue including government fees and contracts . 2 406.63 63 3 3 **8** 4 4 Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses . . . . . . . . h Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c C Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than ĥа Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . 6b

Less: direct expenses from gaming and fundraising events . . 6c

Net income of (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d Gross sales of inventory less returns and allowances 7a Less: cost of goods sold . . . . . . . . . . . . . 7b Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . C 7с 8 Other revenue (describe in Schedule O) . . . . 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 606.63 10 Grants and similar amounts paid (list in Schedule O) 10 11 Benefits paid to or for members . . . . . . . . . . . . . . . 11 12 Salaries, other compensation, and employee benefits . . . . . 12 13 Professional fees and other payments to independent contractors. 13 30.00 14 14 15 15 Other expenses (describe in Schedule O) . . . 16 16 784.86 17 Total expenses. Add lines 10 through 16 17 814.86 Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . . . . . . 18 18 (208.23)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) . . . . . . . . 19 781.78 20 Other changes in net assets or fund balances (explain in Schedule O) . . . 20 Net assets or fund balances at end of year. Combine lines 18 through 20 21 57<u>3.55</u>

orm 99	0-EZ (2015)					Page 2
Part						<del>,</del> _
	Check if the organization used Schedule	O to respond to ar	ny question in this		<del></del>	<u> </u>
			F	(A) Beginning of year	-	(B) End of year
22	Cash, savings, and investments			781.78		573.55
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	
25 25	Total assets			781.78		<u>573.55</u>
26	Total liabilities (describe in Schedule O)	/D)		0.00		0.00
27	Net assets or fund balances (line 27 of column			781.78	27	573.55
art		•		•		Expenses
	Check if the organization used Schedule				Rec	jured for section
		REHABILITATION FO			501	(c)(3) and 501(c)(4)
s me	the the organization's program service accomplisesured by expenses. In a clear and concise mans benefited, and other relevant information for ea	anner, describe the			orga	inizations, optional for ers.)
28						
-					}	
-						-
-	Grants \$ ) If this amount	includes foreign gra	ints, check here .	<u> ▶ ∐</u>	28a	·
29 _					1	}
-						
7	Oranda A			<u></u>	00-	
	Grants \$ ) If this amount	includes foreign gra	ints, check here .	· · · • 💆	29a	<del> </del>
30					1	1
-					)	1
-	(Cranto A		onto obsolations		200	
		includes foreign gra			30a	<del> </del>
	Other program services (describe in Schedule O)			_	04.	
	Grants \$ ) If this amount Total program service expenses (add lines 28a t	includes foreign gra			312	<del></del>
oz Part					32	<del></del>
r ai t	List of Officers, Directors, Trustees, and Key Check if the organization used Schedule					<u> </u>
	Check if the organization used Schedule	T	(c) Reportable	Part IV		<u> </u>
	(a) Name and title	(b) Average hours per week	compensation	contributions to emplo	yee ( <b>e</b> )	Estimated amount of
	lay marie and thic	devoted to position	(Forms W-2/1099-MISC (if not paid, enter -0-			other compensation
	WORD WORD		(in the para) of the	- adiana dampanaan	-	
	LMORE-MOORE	20	ļ			
	EXECUTIVE OFFICER	2	<del> </del>	<u> </u>	+	0.00
	NI TRAXLER	100				
	OPERATING OFFICER	10	<del> </del>	<del> </del>	-+-	0.00
	EKA CADDELL	10				
HIEF	FINANCIAL OFFICER	10-	<del>                                     </del>	<del> </del>	+	0.00
		-				
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#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► 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.

OMB No 1545-0047

2016

Open to Public Inspection
Employer identification number

	NOBLE TRUTH PROJECT INCORPOR				اا	46.303	
Par	<del></del>						ns
The o	organization is not a private foundat			-	•	,	
1	A church, convention of church						
2	A school described in section 1					• •	
3	A hospital or a cooperative hos						
4	A medical research organization hospital's name, city, and state		njunction with a nosp	ital desci	ribed in <b>s</b>	ection 170(b)(1)(A)(	iii). Enter the
5	An organization operated for the	ho bonofit of a	collogo or upworphy	owned a		d by a gayaramant	al wait described in
3	section 170(b)(1)(A)(iv). (Comp	ilete Part II.)	conege of university	OWINEG O	operate	d by a government	ai unit described in
6	A federal, state, or local govern	•	mental unit described	ın sactic	n 170/h)	(4\/A\/ <sub>6</sub> .)	
7	An organization that normally r						the general nublic
•	described in section 170(b)(1)(			3011 110111	a goven	montal dist of hon	r the general pashe
8	A community trust described in		•	Part II.)			
9	An agricultural research organiz			•	erated in	conjunction with a la	and-grant college
	or university or a non-land-gran university:						
10	An organization that normally re receipts from activities related	to its exempt fui	nctions—subject to co	ertain exc	eptions.	and (2) no more that	n 331/3% of its
	support from gross investment acquired by the organization af	income and uni ter June 30, 197	elated business taxal 75. See <b>section 509</b> (a	ole incom i <b>)(2).</b> (Cor	ie (less se nolete Pa	ection 511 tax) from art III.)	businesses
11	☐ An organization organized and		· · · · · · · · · · · · · · · · · · ·			·	
12	☐ An organization organized and	operated exclus	ively for the benefit of	f, to perfo	orm the fu	inctions of, or to car	ry out the purposes
	of one or more publicly suppo						
	Check the box in lines 12a throi	-	• • • •		-	·	
а							
	the supported organization					he directors or trust	ees of the
	supporting organization. Yo		· ·				
b							
	control or management of to organization(s). You must on		-		persons	that control or man	age the supported
	Toma III formationally into a	•	•		onnaction	with and functions	ally integrated with
C	its supported organization(s						any integrated with,
c	Type III non-functionally in	<b>ntegrated.</b> A su	pporting organization	operated	l in conne	ection with its suppo	orted organization(s)
	that is not functionally integ						
	requirement (see instruction	ns). <b>You must c</b>	omplete Part IV, Sec	tions A a	and D, ar	nd Part V.	
e		zation received	a written determination	on from ti	ne IRS th	at it is a Type I, Type	e II, Type III
	functionally integrated, or T	ype III non-func	tionally integrated sup	oporting	organizat	ion.	
f	Enter the number of supported of						
	Provide the following information					<del></del>	<del></del>
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		rganization ir governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
			above (see instructions))		ment?	instructions)	instructions)
				Yes	No		
		· · · · · · · · · · · · · · · · · · ·	<del></del>			<del></del> -	
(A)	ļ						
(B)							
		! 					
(C)							
(D)							·
				<del> </del>	<del>                                     </del>		
(E)							
7	1	· · · · · · · · · · · · · · · · · · ·	3770 . 3,88	1 /	: »	I	

Part	I Support Schedule for Organiza	ations Descr	ibed in Secti	ons 170(b)(1	(A)(iv) and 1	70(b)(1)(A)(vi	) 0
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, pl	ease comple	te Part III.)	
	on A. Public Support	<del>, , , , , , , , , , , , , , , , , , , </del>					
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			4 570 04	606.60		0.476.04
2	Tax revenues levied for the			1,570 21	606.63		2,176.84
2	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						·
4	Total. Add lines 1 through 3			1,570.21	606.63		2,176.84
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		N 18 1	¥ /		AN ** **	2,176.84
Secti	on B. Total Support						
Caler	idar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4			1,570.21	606.63		2,176.84
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10		5. W.	*** *** *** **	\$ 18 × 18		2,176.84
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for to organization, check this box and stop he	ere		nd, thìrd, fourth			
	ion C. Computation of Public Suppo			11 001: (6)		144	
14 15	Public support percentage for 2016 (line Public support percentage from 2015 So		=			15	<u>%</u> %
16a		nization did no	t check the bo	x on line 13, a	nd line 14 is 3	31/3% or more,	check this
b	331/3% support test—2015. If the organization						nore, check
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization in Part VI how the organization meets the organization	neets the "facts	s-and-circums	tances" test, c est. The organ	heck this box	and stop here	. Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiz Explain in Part VI how the organization supported organization	zation meets ti meets the "fac	he "facts-and-	circumstances stances" test.	" test, check The organizat	this box and	stop here.
18	Private foundation. If the organization of					k this box and	see

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

• •	•	• • • • • • • • • • • • • • • • • • • •	
(Complete only	if you checked the box	on line 10 of Part I or if the organization failed to qualify under Par	t II.
If the organizati	ion fails to qualify unde	r the tests listed below, please complete Part II )	

	The organization falls to quality	under the tee	ito iloted beit	iv, picase ce	mpiete i ait	<u>'''</u>	
	on A. Public Support						
Calend 1	dar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees	(a) 2012	<b>(b)</b> 2013	(c) 2014	( <b>d</b> ) 2015	(e) 2016	(f) Total
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise		<del></del>			<del> </del>	
	sold or services performed, or facilities	]				Ì	
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an				<del></del>	<del>                                     </del>	<del></del>
	unrelated trade or business under section 513						
4	Tax revenues levied for the				1	ì	
	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 70	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3	<del></del>	<del></del>		<del> </del>	<del>                                     </del>	
/a	received from disqualified persons .						
b	Amounts included on lines 2 and 3					-	
	received from other than disqualified			]		]	
	persons that exceed the greater of \$5,000	İ					
	or 1% of the amount on line 13 for the year		L				
	Add lines 7a and 7b	77.			***		
8	Public support. (Subtract line 7c from		., ***				
04	line 6.)	4 - 3.		* ^9/Abs	<u> </u>		
	on B. Total Support	(-) 0040	(1.) 0040	( ) 0014	( 1) 0045	1 1 2010	
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 10a	Amounts from line 6				<del> </del>	<del> </del>	
IUĄ	payments received on securities loans, rents,	į į		1		1	
	royalties and income from similar sources .						
b	Unrelated business taxable income (less			<del></del>			
	section 511 taxes) from businesses						 
	acquired after June 30, 1975			1			
c	Add lines 10a and 10b						
11	Net income from unrelated business			<del>                                     </del>		<u> </u>	
•	activities not included in line 10b, whether	}		1			l
	or not the business is regularly carried on						
12	Other income. Do not include gain or			ļ —	†		
	loss from the sale of capital assets	]					
	(Explain in Part VI)			<u> </u>	<u> </u>	<u> </u>	<u></u>
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			L	<u> </u>	L	
14	First five years. If the Form 990 is for the		n's first, secor	nd, third, fourth	n, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he			<u></u>	<u> </u>	<u> </u>	•
	ion C. Computation of Public Suppo			_ <del></del>	<del></del>		<del></del>
15	Public support percentage for 2016 (line		•			<del></del>	<u>%</u>
16	Public support percentage from 2015 Sc			<u> </u>	_ · · · · ·	16	%
	ion D. Computation of Investment In			<del></del>	<del></del>	14-1	
17	Investment income percentage for 2016					17	%
18	Investment income percentage from 201					18	%
19a	331/3% support tests—2016. If the organ						
	17 is not more than 331/3%, check this box		-				_
b	331/3% support tests—2015. If the organiane 18 is not more than 331/3%, check this						
20	Private foundation. If the organization d	=	•	•	•		
/U	- cuvate iuunuanon. II DE 010301/3000 0	ан июн инеск А	131X OH HDP 14	LIMALITE IMP	CHECK (DIS DOX	and see msmi	a.uOus 💌 1

#### 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:	Suppo	orting	Orgai	nizations

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by	7	Yes	No
2	class or purpose, describe the designation. If historic and continuing relationship, explain.  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 <b>Part VI</b> how the organization determined that the supported	1		13
3a	organization was described in section 509(a)(1) or (2).  Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2		· . L.
b	(b) and (c) below.  Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the	3a	<b>*</b>	ř, š.
С	organization made the determination.  Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3b		
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.	3c 4a	â.	9 <b>%</b> .
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		
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 <b>Part VI</b> 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	t. 🚵	
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 <b>Part VI</b> , 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	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	.ú.	Ĉ
6	Substitutions only. Was the substitution the result of an event beyond the organization's control?  Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c	* *	*
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 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	. Dù	,
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		Á.
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 <b>Part VI.</b>	9b	ì	ř.
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 <b>Part VI.</b>	9c	ÀÌ	Ž
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to	<b>3</b> -	31.	1 1/1

determine whether the organization had excess business holdings.)

Part	W Supporting Organizations (continued)		F	age 5
raru	V Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		1 62	140
	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?	11a		
	A family member of a person described in (a) above?	11b		
c	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		
Secti	on B. Type I Supporting Organizations			
	Did the discretize twisters as a second control of the second cont	$\overline{}$	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 <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or	-	٠,	
	controlled the organization's activities. If the organization had more than one supported organization,	3	\ A	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		1	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	· .uriness,	William Land
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	A <sub>s</sub> .	-\$\disp. \$\psi\$	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	****	<u> </u>	
Sooti		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			140
-	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control	à `	4 1	
	or management of the supporting organization was vested in the same persons that controlled or managed	1		* *
	the supported organization(s).	1		,
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1	160	
	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	د	5 7	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		Samuel
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		4 8%	W . i
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	Ť	á.	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	1 40000 1	
3	By reason of the relationship described in (2), did the organization's supported organizations have a	∰ე,		
	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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	Ē	3.	11:
Cook	. ' <u>'</u>	3		
	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	instru	ction	s).
a	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	,		
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	see in:	struct _	ions).
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		į	
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	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	Ž	<u> </u>
b		24	<del> </del>	× 1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the		120	, ,
	reasons for the organization's position that its supported organization(s) would have engaged in these	100	l .	* *
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	.§ ;	_	3
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? Provide details in Part VI.	За		
þ	O	3 1.	91	6.3
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	<u>ani</u>	zations	<del></del>
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-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 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 (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 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	<u> </u>	
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	38 <u>Ath</u>	
5 Income tax imposed in prior year	5	\$6 77 V	
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 instructions).	y in	tegrated Type III supporting	g organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	) Sup	port	ting Or	gani	zatio	ns (con	tınued)				
Secti	on D - Distributions									Currer	nt Year	
1	Amounts paid to supported organizations to accomplish e	exemp	t pur	poses								
2	Amounts paid to perform activity that directly furthers exe	mpt p	urpo	ses of s	uppo	rted	_					
	organizations, in excess of income from activity								_			
3	Administrative expenses paid to accomplish exempt purp	oses c	of su	pported	orga	nızatıc	ons					
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.											
7	Total annual distributions. Add lines 1 through 6.											
8	Distributions to attentive supported organizations to whic	h the c	orgar	nizatıon	is res	ponsi	ve		}			
	(provide details in Part VI). See instructions.											
9	Distributable amount for 2016 from Section C, line 6											
10	Line 8 amount divided by Line 9 amount											
Se	ection E - Distribution Allocations (see instructions)			(i)		Und	(ii) erdistril	outions			iii) butable	
		Exce	ss D	istribut	ions		Pre-20				for 201	
1	Distributable amount for 2016 from Section C, line 6	-	·~	. 33 .	,		× 4	- ·	<del></del>			
	Underdistributions, if any, for years prior to 2016	*	*	3.	N.		998 7 5	Nu 1	٧.,	T 3L	7.9.	
2	(reasonable cause required—explain in Part VI). See		7	×	~~;				1 1	2.4	4	
_	instructions.	<b>*</b>	<b>%</b>							l-a	1	\$ 44
3	Excess distributions carryover, if any, to 2016:		w .	"	٠,	: N	. 14	3 1		20 8		5. s
a		8 3	bi .	70.5	ŀ	v. (g)	*5	1	- %		114	15
b		1	74	. 1	***	**. 1	. %	***		7:00g	7 1 8	
	From 2013	1 %		W 70		8.	**************************************	'}	78 .			7 4
d	From 2014	N	* /	*	19g.	1,1	**************************************		<u>*</u>	8 23	7.36	
е	From 2015	1 7	V <sub>e</sub>	- ;	<u> </u>	334	· * 3					V (1
f	Total of lines 3a through e	<b></b>			***	****	N .	* y *	7/	k/)	1 &	*
g	Applied to underdistributions of prior years	1 4.	<u> </u>	Ada B					1	- 3	-	-%
h		¥ <u>,,</u>	7%	WAGE.	i	*	7.1	¥, ,	1		2.995	
ī	Carryover from 2011 not applied (see instructions)	1 7	/ *J	<b>6</b> '1	36	* ^	4.8 .	. Th.	** }	* :	: \$	14 A.
j	Remainder Subtract lines 3g, 3h, and 3i from 3f.					***	W - 1/4		, ·	** · ·	* **	
4	Distributions for 2016 from		4.	' Aŭ	<b>A</b>	<b>N</b>	Y 1 9	<b>4</b> 19,		**	<u> </u>	₩.
	Section D, line 7:	l ĝ	'Aik		244	1		Ja:	40	ł.	11/2	
а	Applied to underdistributions of prior years	· 1	4 34	7	*5				***	77%	7.79	<b>%</b> , .
b	Applied to 2016 distributable amount	6 3	i,	٠,		*	` "}	* 15				
С	Remainder. Subtract lines 4a and 4b from 4.					₩,	, ÿ:		₹.,,	<b>A</b>	, § 2°,	
5	Remaining underdistributions for years prior to 2016, if	36.00	7	á. 14	. 4				36	*1	4 3	<b>1</b>
	any. Subtract lines 3g and 4a from line 2. For result		ž.		۱۴				٠,	<u>.</u>		73.7
	greater than zero, explain in Part VI. See instructions.	£ ***	Ŷ 	₹	*			_		<u>~~</u>	·	
6	Remaining underdistributions for 2016. Subtract lines 3h	3 .	*	Sa	\$	7.5	Λ <sub>α</sub> . *					
	and 4b from line 1. For result greater than zero, explain in	<b>1</b> '∴ .	ΛĬ				- 3 <u>1</u> 1					
	Part VI. See instructions.	1	¥	1	<u> </u>	*, , ,	<u> </u>	,8			_	
7	Excess distributions carryover to 2017. Add lines 3j and 4c.				_				P. Value on	4.		
-8	Breakdown of line 7:	l é	<b>X</b> S	\$4 °	7//	1	<u> </u>	**	<u> </u>	2.8.	12	43
a			**************************************	;	\$ .			***	違	<del>-</del>		<u> </u>
<u>_</u>	Excess from 2013	*	* 3	<u> </u>	, (y.		1 18		377	18	7.0	*
		135	37	*	37.		***	143	2.2	- 78		
d		13	327		in the second	*		- 2				
		12 8	-	<u>~</u>	<u> </u>	*		W.	76.3			

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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 1c, 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 6. Also complete this part for any additional information. (See instructions.)
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