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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

2017

OMB No 1545-1150

			Under Section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except priva	ite iouiidal		2
Do not enter social security numbers on this form as it may be made public. Write the						Open to Public
Depa Inten	artment o nal Rever	of the Treasury nue Service	► Go to www.irs.gov/Form990EZ for instructions and the latest inform	10	ブノ	Inspection
A F	or the	2017 calenda	ar year, or tax year beginning April 1 , 2017, and ending	M	arch 3	, 20 18
Вс	heck if ap	oplicable.	C Name of organization he	D Empl	oyer ide	entification number he
	Address c	hange 🚐	Resource Connection Outreach Center		55	-0785339
닏	Name cha	inge	Number and street (or P O box, if mail is not delivered to street address) nc. Room/suite	E Telep	hone nu	mber
=	nıtıal retu	1	3991 Ripley Road		304	-372-2552
_	inal retur Amended	n/terminated	City or town, state or province, country, and ZIP or foreign postal code	F Grou	ıp Exer	nption
=		n pending	Ripley, WV 25271	Nun	nber 🕨	he
G A	ccount	ting Method	Cash	H Check	► ☐ if	the organization is not
I W	ebsite/	::▶		required	to atta	ch Schedule B
J Ta	ax-exen	npt status (che	eck only one) — ✓ 501(c)(3)	(Form 9	90, 990	-EZ, or 990-PF)
			☐ Corporation ☐ Trust ☐ Association ☐ Other			
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if to	tal assets	_	
			v) are \$500,000 or more, file Form 990 instead of Form 990-EZ	<u> </u>	<u>▶ \$</u>	
Pa	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see the			
			the organization used Schedule O to respond to any question in this Par			10,058,21
lī.	1		ons, gifts, grants, and similar amounts received		1	10,030.21
he	2	-	ervice revenue including government fees and contracts		2	
he	3		ip dues and assessments		3	<u> </u>
he	4	Investment				
	5а b		or other basis and sales expenses			
	C		ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6		d fundraising events		~	
	а		ome from gaming (attach Schedule G if greater than			
e	ı .					
Revenue	ь	Gross inco	me from fundraising events (not including \$ of contributi	ons	. 1	
ခ်		from fundr	aising events reported on line 1) (attach Schedule G if the			
_	ļ	sum of suc	ch gross income and contributions exceeds \$15,000) 6b			
	С	Less: direc	t expenses from gaming and fundraising events 6c			
	ď	Net incom	e or (loss) from gaming and fundraising events (add lines 6a and 6b and s	subtract		
	i	line 6c) .			6d	
	7a	Gross sale	s of inventory, less returns and allowances	33,694.09		
	b		of goods sold			
!	С		it or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	33,694.09
	8		nue (describe in Schedule O)		8	40.750.00
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	•	9	43,752.30
	10		d similar amounts paid (list in Schedule O)		10	2280.00
10	11	•	aid to or for members		11	16,634.34
Ses	12 13		ther compensation, and employee benefits to	1 1700	12	10,004.04
Expenses	14		y, rent, utilities, and maintenance	1.7	-14,	24,839.70
X	15		y, rent, utilities, and maintenance $\dots\dots\dots$ \mathcal{B} . $\mathcal{AUG.2}$	0 66.	154	1
	16		enses (describe in Schedule O)	o 2018	16.	
	17		enses. Add lines 10 through 16		17.5	43,754.04
	18		(deficit) for the year (Subtract line 17 from line 9)	WIIT	18	(1.74)
ets	19		or fund balances at beginning of year (from line 27, column (A)) (must agr	ee with		
Net Assets			ar figure reported on prior year's return)		19	25,120.79
et .	20		nges in net assets or fund balances (explain in Schedule O)		20	
Ž	21		or fund balances at end of year. Combine lines 18 through 20	•	21	25,119.05
-			ion Act Nation and the congrete instructions Cost No. 106401			Sam 990-F7 (2017)

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Γ.	Other Information (Note the Schedule A and personal benefit contract statement requirement			_	
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in the	s Part	Yes	No	-
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	1.00	110	-
34	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the				-1
35	a Did the organization have unrelated business gross income of \$1,000 or more during the year from business	34	-	•	-
	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 c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 	35b 35c	-	y	-
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		y	-
37			-	_	•
38	 b Did the organization file Form 1120-POL for this year? a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 	37b 38a	-		ļ
20	b If "Yes," complete Schedule L, Part II and enter the total amount involved	ļ <u></u>			-
39	Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9				r
40	b Gross receipts, included on line 9, for public use of club facilities	7			t
40	a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶				ì
	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	404			
	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	40b	<u> </u>	V	
	d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization				1
	e 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	1
41 42			<u> </u>		-
72	Telephone no. ► Located at ► Telephone no. ► ZIP + 4 ►		·- 		
	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	401	Yes	_	-
	If "Yes," enter the name of the foreign country: ►	42b		✓	
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
	 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	<u> </u>	1	-
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		. 1	▶ □	-
44	a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No	
	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		•	•
	c Did the organization receive any payments for indoor tanning services during the year?	44c		1	
	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			
45		45a		1	
	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 Earn 990-E7 (see instructions)				
_	Form 990-EZ (see instructions)	45b m 990	<u></u>		-

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46 C	Did th	ne organization engage, directly or in ndidates for public office? If "Yes," o	ndirectly, in political c	ampaign activities of	n behalf	of or in opposi	tion	Yes	No
Part V		Section 501(c)(3) organizations All section 501(c)(3) organization	only						nes
		50 and 51. Check if the organization used Scl	nedule O to respond	I to any question in	this Par	t VI			
		<u> </u>	3	<u> </u>				Yes	No
		ne organization engage in lobbying If "Yes," complete Schedule C, Par		section 501(h) electi		ect during the		17	V
48 1	s the	organization a school as described in	section 170(b)(1)(A)(i	i)? If "Yes," complete	Schedu	le E	⊢	18	1
		ne organization make any transfers t			ization?		. 4	9a	V
		s," was the related organization a se						9b	ــــــــــــــــــــــــــــــــــــــ
		plete this table for the organization's pyees) who each received more than							
	anpi	byees) who each received more than		1		lealth benefits,	e, enter	None.	
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	contribu	itions to employee plans, and deferred empensation		nated amo compens	
None					†				
					+				
					<u> </u>				
						:			
								-	
	_				+				
					<u> </u>				
		number of other employees paid over				_			
51 C	Comp 100,	plete this table for the organization 000 of compensation from the orga	s five highest compenies at a second	ensated independen one, enter "None."	t contra	ctors who each	receiv	ed mor	e than
<u> </u>	(a) 	Name and business address of each independ	lent contractor	(b) Type of ser	vice	(c)	Compen	sation	
d T	otal	number of other independent contra	ctors each receiving	over \$100,000	<u> </u>				
52 [oid t	he organization complete Scheduleted Schedule A	•	• •	anization	s must attach	ı a .▶ 🛭 \	 ′es □	No
Under pen true, corre	alties ct, an	of perjury, I declare that I have examined this is decomplete. Declaration of preparer (other than	etum, including accompan officer) is based on all info	ying schedules and statem	nents, and has any ki	to the best of my kr			f, it is
		Susan Each	0			7-11-3	2018		
Sign Here _	- [Signature of officer Susan Eades, Director				Date 7/11/2018			
Lete C	.	Type or print name and title	·			//1/2016			
Paid	٠,	Print/Type preparer's name	Preparer's signature	To	ate	Check	d Pil	N	
Prepai	rer	<u> </u>	1	Check L.J if self-employed			yed		
Use O	nly	Firm's name				Firm's EIN ▶			
May the	IRS	Firm's address ▶ discuss this return with the preparei	shown above? See i	nstructions	 -	Phone no	▶ □ `	es 🗌	No
								990-E	

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 chantable trust. ► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2017

Open to Public

Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization Employer identification number **Resource Connection Outreach Center** 55-0785339 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization 60 FIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10) support (see other support (see above (see instructions) instructions) instructions) Yes No (A) (B) (C) (D)

(E) Total

	shown on line 11, column (f)						ļ		
6	Public support. Subtract line 5 from line 4			/		 			
	on B. Total Support					<u></u>			_
	dar year (or fiscal year beginning in)	(a) 2013	(b) 201,4"	(c) 2015	(d) 2016	(e)	2017	(f) Total	
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	, f							
9	Net income from unrelated business activities, whether or not the business is regularly carned 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							_	
12	Gross receipts from related activities, etc					12			
13	First five years. If the Form 990 is for the	-						, ,, ,	
5	organization, check this box and stop he				<u> </u>	<u> </u>	<u> </u>	<u> </u>	
14	on C. Computation of Públic Suppor Public support percentage for 2017 (line			1 column (6)		14			%
15	Public support percentage from 2016 Sch					15			%
16a	331/3% support test—2017. If the organi	zation did not	check the box	on line 13 ar	nd line 14 is 3		or more		70
	box and stop here. The organization qua	lifies as a publ	icly supported	organization				•	\Box
ь	331/3% support test - 2016. If the organi								_
	this box and stop here. The organization								
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the " organization	ets the "facts	-and-circumsta	ances" test, ch	eck this box	and st	op here.	Explain in	
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization in Part VI how the organization is supported organization	ation meets the fac	e "facts-and-c ts-and-circums	circumstances' stances" test.	' test, check The organizati	this b ion qu	ox and s alifies as 	stop here. a publicly	
18	Private foundation. If the organization di instructions					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 Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sacti	on A. Public Support	under the ter	sto notog bole	ow, ploade ec	mpioto i di i	<u>··/</u>	
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
Calen 1	Gifts, grants, contributions, and membership fees	(a) 2013	(0) 2014	(6) 2015	(a) 2010	(6) 2017	(i) iotai
•	received. (Do not include any "unusual grants.")	6,127.38	7,992.85	5,971.77	8,955.08	10,058.21	39,105.29
2	Gross receipts from admissions, merchandise		7,502.00	5,57 1.77			55,155,125
	sold or services performed, or facilities		l l		,		ļ
	furnished in any activity that is related to the organization's tax-exempt purpose	28,713.22	32,192.80	32,652.23	34,601.77	33,694.09	161,854.11
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						ŀ
4	Tax revenues levied for the						
•	organization's benefit and either paid to		·		1		}
	or expended on its behalf				ļ		
5	The value of services or facilities						
-	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	34,840.60	40,185.65	38,624.00	43,752.30	43,752.30	/ 200,959.40
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	0	0	0	o	0	{ }
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	0	0	0	0	0	.
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from		İ				
	line 6.)						
	on B. Total Support			· · · · · · · · · · · · · · · · · · ·			
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	34,840.60	40,185.65	38,624.00	43,752.30	43,752.30	200,959.40
10a	Gross income from interest, dividends,		ľ		Ì		ì /
	payments received on securities loans, rents, royalties, and income from similar sources						}
	Unrelated business taxable income (less					 	<u> </u>
b	section 511 taxes) from businesses		ļ				l <i>I</i>
	acquired after June 30, 1975				i		
_	Add lines 10a and 10b						<u> </u>
11	Net income from unrelated business						
••	activities not included in line 10b, whether		Ì	{			
	or not the business is regularly carried on		-				
12	Other income. Do not include gain or						<u> </u>
	loss from the sale of capital assets		Į	į	ŀ		ļţ
	(Explain in Part VI.)				·		
13	Total support. (Add lines 9, 10c, 11,						1
	and 12.)			<u> </u>			<u> </u>
14	First five years. If the Form 990 is for the	_			•	ear as a sectio	on 501(c)(3)
	organization, check this box and stop her			<u> </u>	<u> </u>	<u> </u>	▶ □
	on C. Computation of Public Suppor						100
15	Public support percentage for 2017 (line 8	• •	•			15	100 % 100 %
16 Socti	Public support percentage from 2016 Schon D. Computation of Investment Inc				: : · ·	16	100 %
17	Investment income percentage for 2017 (v line 13 colum	on (fl)	17	%
18	Investment income percentage from 2016					18	——————————————————————————————————————
19a	331/2% support tests—2017. If the organi						
.50	17 is not more than 331/3%, check this box			•			•
b	331/3% support tests—2016. If the organiz		-			-	
	line 18 is not more than 331/3%, check this t						
20	Private foundation. If the organization di		_				_

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.)

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		
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 Part VI 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 Part VI 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 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 7? 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 Part VI.	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 .	9Ь		
C	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		
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 determine whether the organization had excess business holdings.)	10b		-

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Funct		izotiono	rage
1 Check here if the organization satisfied the Integral Part Test as a qualifying			lain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ			
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) Pnor Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
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-functionally integrated Type III supporting organization (see instructions).

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity	 		
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			ļ
	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	n the organization is res	sponsive	
9	(provide details in Part VI). See instructions. Distributable amount for 2017 from Section C. line 6			
10	Line 8 amount divided by line 9 amount			
	Line 6 amount divided by line 9 amount		(ii)	(iii)
S-	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
_1	Distributable amount for 2017 from Section C, line 6		·	
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
с	From 2014			
d	From 2015		· · · · · · · · · · · · · · · · · · ·	
e	From 2016			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2017 distributable amount			
i_	Carryover from 2012 not applied (see instructions)	<u> </u>	· 	
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7:			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
5	Remaining underdistributions for years prior to 2017, if			
•	any. Subtract lines 3g and 4a from line 2. For result			ļ
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
е	Excess from 2017	<u>L </u>	<u> </u>	

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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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