(Rev January 2020)

D*partment of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (MICC).

section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foun		2019
 Do not enter social security numbers on this form as it may be made public. Go to www.irs gov/Form990 for instructions and the latest information. 	CAND	Open to Public
► Go to www.irs gov/Form990 for instructions and the latest information.	MULLY	Inspection

<u>A</u> _	For the 201	9 calendar year, or tax year beginning $0.7/01/19$, and ending $0.6/$	<u>/30/2</u>	<u> 10 </u>		1	c	
В	Check if applicable	e C Name of organization HOKE, COUNTY PARTNERSHIP FOR			D Employe	r identification number	er 🕻	
	Address change	CHILDREN AND FAMILIES						
\vdash	•	Doing business as			1 56-1	898931	F	
Ш	Name change	Number and street (or P O box if mail is not delivered to street address)		Room/suite	E Telephone number			
\Box	Initial return	P.O. BOX 1209			910-	904-5452	9	
覀	Final return/	City or town, state or province, country, and ZIP or foreign postal code						
\Box	terminated				1		I 0 4 1	
	Amended return	RAEFORD NC 28376-1209 F Name and address of principal officer			G Gross reco	eipts \$ 00	5,941	
\vdash	8			H(a) Is this a n	roup return for si	ubordinates? Yes	X No	
Ш	Application pendi	I OLAN SQUILK		1 1 (4) 10 time 2 gi	roup rotation to		\equiv	
		SAME AS C ABOVE		H(b) Are all su	ibordinates incli	uded? Yes	: No	
			~	If "No	," attach a list	(see instructions)		
	Tax-exempt stat	us X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 52	, 	j				
÷		WWW.HOKECHILDREN.NET		ή		_		
<u> </u>	Website		-		emption numbe			
	Form of organiza		L Ye	ear of formation	1994	M State of legal domi	icite NC	
<u> F</u>	Part I 🕛	Summary						
	1 Briefly	describe the organization's mission or most significant activities						
ø	TH	E PARTNERSHIP BELIEVES IN HELPING CHILDREN AND F	'AMILI	ES BY PF	ROVIDING	G A		
ĭ	I .	UNDATION TO DEVELOP SELF-ASSURANCE FOR LIFE THRO						
Governance	1	SOURCES.	,0011 E	DOCATION	AND	•		
ē	1							
်	2 Check	this box 🕨 🔛 if the organization discontinued its operations or disposed of more	than 25	% of its net as	sets			
ಹ	3 Numb	er of voting members of the governing body (Part VI, line 1a)			3	15		
S	4 Numb	er of independent voting members of the governing body (Part VI, line 1b)			4	11		
Activities	1	number of individuals employed in calendar year 2019 (Part V, line 2a)			5	5		
矣	1							
ĕ	1	number of volunteers (estimate if necessary)			6	26		
	7a Total	unrelated business revenue from Part VIII, column (C), line 12	7a		0			
	b Net ur	nrelated business taxable income from Form 990-T, line 39 RECEIVED			7b		0	
		112021425	70 L	Prior Ye		Current Yea		
a	8 Contri	butions and grants (Part VIII, line 1h)		79	6,867	800	,476	
Ž	9 Progra	am service revenue (Part VIII, line 2g) MAR 0 8 2021		·	2,560	3	,072	
Revenue	10 Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d	RS-OSC				0	
ಹಿ	44 04	butions and grants (Part VIII, line 1h) am service revenue (Part VIII, line 2g) ment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 19) revenue – add lines 8 through 11 (must equal Part VIII—column (A) lines 12)	┚═╽├		2 021			
	11 Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and TEDEN, UT			2,021		, 393	
	12 ,0,0,,	Trende and mice of through 11 (mast educat art vin, column (74), line 12)	\longrightarrow		1,448		<u>,941</u>	
	13 Grants	s and similar amounts paid (Part IX, column (A), lines 1–3)		1	2,259	13	,677	
	14 Benef	its paid to or for members (Part IX, column (A), line 4)			0			
w	4- 0.	es, other compensation, employee benefits (Part IX, column (A), lines 5–10)	Г	23	0,554	240	,519	
Š	16a Profes				0,001		0	
ē	I da Fioles	ssional fundraising fees (Part IX, column (A), line 11e)	⊢					
Expenses	b lotal i	fundraising expenses (Part IX, column (D), line 25) ▶ 0	L					
ш	17 Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	L		7,197		,603	
	18 Total	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	L	80	0,010	799	,799	
	19 Reven	ue less expenses Subtract line 18 from line 12			1,438	6	,142	
5	3			Beginning of Cu		End of Year		
Net Assets or	20 Total	assets (Part X, line 16)			1,215		,110	
ASS Pal	21 Total I	iabilities (Part X, line 26)			444		,197	
팔	21 10(41)		-	1		1.0		
		sets or fund balances Subtract line 21 from line 20		<u>_</u>	0,771	τρ	<u>,913</u>	
<u> </u>	art II 🕕	Signature Block				 		
U	nder penalties	of perjury, I declare that I have examined this return, including accompanying schedules and	d statemer	nts, and to the b	est of my kn	owledge and belief,	it is	
tr	ue, correct, an	d complete Degraration of preparer (other than officer) is based on all information of which p	reparer ha	as any knowled	ge			
		100 1		C=_ =	2.5	V. 21		
0:	•	Signature of officer			Date	7-21		
Sig	- 1 .				Date			
He	re	COTT L. COWARD, BOARD CHATRIMAN						
		Type or print name and title						
	Print/	Type preparer's name Preparer's signature		Date	Check	ıf PTIN		
Pai	d DAME	CLA W. VILLEGAS, CPA Panelow. Villegac	s CVA	1 102/04			1	
	Darer FAITE				1/21 self-emp	picyeu	!	
	· Finals	name COMSTOCK & VILLEGAS, CPAS, PA			Firm's EIN			
USE	Only	2545 RAVENHILL DR STE 106						
	Firm's	address FAYETTEVILLE, NC 28303			Phone no	910-483-	-6077	
Ma		cuss this return with the preparer shown above? (see instructions)			·	X Yes	No	
_		eduction Act Notice, see the separate instructions.					90 (2019)	
DAA		, contrasted and superinte managing,				rom 3	JU (2019)	

1,000) (Revenue \$

DAA

(Expenses \$

4e Total program service expenses ▶

4d Other program services (Describe on Schedule O)

165,628 including grants of \$

705,588

56-1898931

Checklist of Required Schedules ≭Part:IV≇

- Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
- Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?
- Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II
- Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III
- Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III
- 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. Part VI
 - b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
 - c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
 - d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
 - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
 - b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional
- Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV
- Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)
- Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
 - b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II

		Yes	No
		,,	
	2	X	X
	3		X
	_ <u>`</u>		
	4		X
	_		v
	5		X
i			
	6		X
	7		Х
	- '		
	8		X
	9		X
	10	edM%	X 23% 24
			** ****/ ** ****/
	, 1 Table	1. Oral	20
	11a		X
	11b		Y
	110		<u>X</u>
	11c		X
	11d		X
	11e		X
	11f		X
	425	İ	X
	12a		
	12b		Χ
	13		X
	14a		<u>X</u>
			v
	14b		<u>X</u>
	15		X
	16		X
	17		X
			٠,
	18		<u>X</u>
	19		X
	20a		<u>X</u>
	20b		
	.		v
	21	₇ 990	X
	For	n 33U	(2019)

	art IV Checklist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22	X	$oxed{oxed}$
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			}
	employees? If "Yes," complete Schedule J	23	ļ	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			١.,
	through 24d and complete Schedule K If "No," go to line 25a	24a	-	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24.5		
	to defease any tax-exempt bonds?	24c	1	-
d		24d	<u> </u>	
∡ɔa	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		<u>├</u> ^
U	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	l		
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	100	 	 ^^`
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	i		
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c	X	ļ
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			۱
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32	 	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	24		v
250	or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	 	X
35a b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		<u>^</u>
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	335	 	 -
•	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
••	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		 	
	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
P	art V Statements Regarding Other IRS Filings and Tax Compliance		4	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 11			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and]	_	
	reportable gaming (gambling) winnings to prize winners?	1c		1

2a Ener the number of amployees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calander year ending with or within the year covered by this return 2	Form	990 (2019) HOKE COUNTY PARTNERSHIP FOR 56-1898			Р	age 5
2a Ener the number of amployees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calander year ending with or within the year covered by this return 2	Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (contin	ued)			
2a Enter the number of employees reported on Form W-3, Transmital of Wage and Tax Staterments, filed for the calendar year ending with or within the year covered by this return 3 Istatements, filed for the calendar year ending with or within the year covered by this return 4 It seast one is reported on line 2a, did the organization file all required feefant employment tax returns? 5 Note: If the sum of lines 1 and 2a greater than 250, you may be required to e-file (see instructions) 5 It if Yea, "Inside a file a form 990 27 for the year of If "Not file not 8, provide an explanation on Schedule O 5 It if Yea," enter the name of the foreign country 6 It if Yea," enter the name of the foreign country 6 It is a bank account, securities account on the financial accountry 7 See instructions for filing requirements for FinCBH Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 8 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 9 Dead any leadle party nority the organization file Form 8868-T? 9 Dead see y leadle party nority the organization file Form 8868-T? 9 Capanization solict any contributions that were not tax deductible as charitable contributions? 9 If Yea's to line 5a or 5b, did the organization file Form 8868-T? 9 Organization solict any contributions that were not tax deductible as charitable contributions? 9 If Yea's did the organization time were a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 9 Organizations that may receive deductible contributions under excellen 179(c). 10 Did the organization received a contribution of underly the payor and services provided to the payor? 11 Yea," indicate the number of Forms 8282 filed during the year 12 Did the organization received a contribution of care, boots, any premiums, directly, or a personal benefit contract? 12 Did the organization received a contribution of care flooring the year? 13 Section 591(C)T organizati					Yes	No
b If a least one is reported on line 2 a. dut the organization file all required federal employment tax returns? Note: If the sum of lines 1 and 2 is greater than 250, you may be required to effect exe instructions) 33 Did the organization have unrelated business gross income of \$1.000 or more during the year? 34 At any time during the calendary year, did the organization have an intestist in, or a significant or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other fehanical account)? 55 Bi If Yes, are the manner of the frosting country (such as a bank account, securities account, or other fehanical accounts)? 56 Was the organization or foreign country yeur as a bank account, securities account, or other fehanical accounts? 56 Was the organization protein organization that it was or is a party to a prohibed tax sheller transaction at any time during the tax year? 57 Did any taxable party notify the organization that it was or is a party to a prohibed tax sheller transaction? 58 Did any taxable party notify the organization that it was or is a party to a prohibed tax sheller transaction? 59 Did any taxable party notify the organization that it was or is a party to a prohibed tax sheller transaction or organization shell organization include with every solicitation an express statement that such contributions? 50 Did the organization network eductible contributions under section 170(c). 50 Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 50 Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 50 Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 51 Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provide	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1		<u> </u> ``	'
Note: if the sum of lines 1s and 2s is greater than 250, you may be required to <i>e-file</i> (see instructions) 3						
b If Yes, 'has of field a Form 950-Tr firth year?' If 'No' to fine 3b, provide an explanation on Schedule O 3b If Yes, 'has of field a Form 950-Tr firth year?' If 'No' to fine 3b, provide an explanation on Schedule O 4c A ray 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); See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5s Was the organization an party to a prohibited tax scheller transaction at any time during the tax year? 5c Was the organization and the organization that it was or is a party to a prohibed tax scheller transaction? 5d Doss the organization have annual gross receipts that are normally greater than \$100,000, and did the organization in fellow the very solicitation an express statement that such contributions or gifts were not tax deductibles and tax deductibles a charitable contributions or gifts were not tax deductibles and tax deductibles and charitable contributions or gifts were not tax deductibles and account to the second of the se	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?	2b	X	
b If "Yes," has if lifled a Form 990-T for this year? If No? to the 3b, provide an explanation on Schedule O 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)? 4		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)	<u> </u>		
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 county (such as a bank account, securities account, or other financial account)? See instructions for filting requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR) Was the organization for by a prohibited tax shelter transaction at any time during the tax year? 5a	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	<u> </u>	X
a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for filing requirements for FanCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 55	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		ļ
b If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a purty to a prohibited tax shelter transaction at any time during the tax year? 5b Usy the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7 If "Yes," did the organization notify the donor of the value of the goods or services provided? 8 If "Yes," did the organization notify the donor of the value of the goods or services provided to the payor? 9 If "Yes," did the organization notify the donor of the value of the goods or services provided to the services provided to the payor? 10 If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 12 If the organization received a contribution of cars, boots, arplanes, or other vehicles, and the organization file a Form 1098-C? 13 Sponsoring organization marked adstribution to allow of the values of the organization file a Form 1098-C? 14 If the organization have excess business holdings at any time during the year? 15 Sponsoring organization marked adstribution to allow, and of the organization file a Form 1098-C? 16 Ordan for	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over,			ì
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 3 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any tisable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Sc. X Year		a financial account in a foreign country (such as a bank account, securities account, or other financial	l account)?	4a		X
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 8 Was the organization a part to a prohibited tax shelter transaction at any time during the tax year? 8 Do do any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 8 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organizations that may receive deductible contributions under section 170(c). 10 Other organizations that may receive deductible contributions under section 170(c). 10 Organizations that may receive deductible contributions under section 170(c). 11 Yes, do the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 12 Organizations that may receive deductible contributions under section 170(c). 13 Organizations that may receive deductible contributions under section 170(c). 14 Organizations that may receive deductible contributions under section 170(c). 15 Organizations that may receive deductible contributions under section 170(c). 16 Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 17 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8292? 18 Obt the organization neceived a contribution of qualified intellectual property, did the organization file Form 8899 as required? 19 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 19 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any tabule distributions under section 4966? 19 Organization received a contribu	b	If "Yes," enter the name of the foreign country ▶		, , ,	', ، ا	. ,
b Old any taxable party notify the organization that it was on is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8866-T? Does the organization have annual gross recepts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," date the organization notify the donor of the value of the goods or services provided? The contribution sell, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8232? If "Yes," indicate the number of Forms 8282 filed during the year required to life Form 8232? If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If the organization, during the year, pay premiums, directly or indirectly, to na personal benefit contract? If the organization received a contribution of qualified intellectual property, od the organization flex forms 899 as required? If the organization calceved a contribution of crass, boats, as palmes, or other vehicles, did the organization flex forms 899 as required? If the organization service access business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds, Did a donor advised fund maintained by the sponsoring organization make any attable distributions under section 4966? Did the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make as a distribution to a donor, donor advised, or related person? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross inc		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial /	Accounts (FBAR)			
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that are normally greater than \$100,000, and did the organization solicit any contributions or gifts were not tax deductible? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 8 Did the organization notify the donor of the value of the goods or services provided? 9 Did the organization notify the donor of the value of the goods or services provided? 10 If "Yes," indicate the number of forms 8282 filed during the year 11 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 12 Did the organization received a contribution of qualified intellectual property, did the organization file a form 1098-C? 13 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a form 1098-C? 14 Sponsoring organizations maintaining donor advised funds. Did a donor advised funds	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? Ta Dif "Yes," indicate the payor? Ta Dif "Yes," indicate the number of Forms 8282 filed during the year Dif the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? The bif the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? The bif the organization received a contribution of qualified intellectual property, did the organization floating the year, pay premiums, directly or indirectly, on a personal benefit contract? Sponsoring organization make action cars, boats, arginates, or other vehicles, did the organization floating and contribution of cars, boats, arginates, or other vehicles, did the organization the a Form 1098-C? Sponsoring organization make and stortule of and once advised funds. Did the sponsoring organization make and stortule once and the form the form that is a form to see the sponsoring organization make and stortule on a donor, donor advisor, or related person? Did the sponsoring organization make and stortule on a donor, donor advisor, or related person? Did the sponsoring organization make and stortule on a donor, donor advisor, or related person? Did the sponsoring organization make and stortule on a donor, donor advisor, or related person? Did the sponsoring organization make and stortule on a donor, donor advisor, or related person? Did the sponsoring organization make and stortule on a donor, donor advisor, or rela	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of fangible personal property for which it was required to file Form 8282? If "Yes," did the organization receive any funds, directly or indirectly, or pay premiums on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of orars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization maintaining donor advised funds. Did the sponsoring organization make a distribution is a donor, donor advised fund fund maintained by the sponsoring organization make a distribution is a donor, donor advised funds. Did the sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make a distribution is a donor, donor advised fund funds. Did the sponsoring organization make a distribution is a donor, donor advised fund funds. Did the sponsoring organization make a distribution is a donor, donor advised funds. Did the sponsoring organization make a distribution is a donor, donor advised funds. Did the sponsoring organization funds are a distribution to a donor, donor advised funds. Did the sponsoring organization funds are a distribution to advised funds. Did the sponsoring organization fun	С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization nell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year equired to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year equired to file organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1998-C? 7g If the organization received a contribution of dars, boats, anylanes, or other vehicles, did the organization file a Form 1998-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. a Did the sponsoring organizations maintaining donor advised funds. b Did the sponsoring organizations maintaining donor advised funds. a Did the sponsoring organizations maintaining donor advised funds. b Gross receipts, included on Form 990, Part VIII, line 12 f Orsas receipts, included on Form 990, Part VIII, line 12 f Orsas receipts, included on Form 990, Part VIII, line 12 f Orsas receipts, included on Form 990, Part VIII, line 12 forsas receipts on the manual formation the organization filing Form 990 in lieu of Form 1041? 12a Section 991(a)(7) organizations. Enter f Orsas income from other sources (Do not net amounts due or pad to other sources (Do not net amounts due or pad to other sources (Do not net amounts due or received from them) in the sponsory of the pad of the pad of the pad of the pad o	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	ne		ĺ	
b If "Yes," aid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8293 as required? 7 The sponsoring organization received a contribution of cars, boats, any planes, or other vehicles, did the organization file Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. a Did the sponsoring organizations make any taxable distributions under section 4956? b) Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b) Did the sponsoring organization make and stribution to a donor, donor advisor, or related person? 9 b) Did the sponsoring organization make any taxable distributions under section 4956? b) Gross receipts, included on Form 990, Part VIII, line 12 b) Gross receipts, included on Form 990, Part VIII, line 12 c) Gross receipts, included on Form 990, Part VIII, line 12 c) Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 10 Section		organization solicit any contributions that were not tax deductible as charitable contributions?		6a	L	Х
grits were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 If "Yes," did the organization notify the donor of the value of the goods or services provided? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 If "Yes," indicate the number of Forms 8282 filed during the year epured to file Form 8282? 9 If "Yes," indicate the number of Forms 8282 filed during the year epured to file Form 8282? 9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization in the year, pay premiums, directly or indirectly, or a personal benefit contract? 9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 9 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 9 Sponsoring organizations maintaining donor advised funds. Did a door advised fund maintained by the sponsoring organization maintaining donor advised funds. Did a door advised fund maintained by the sponsoring organization maintaining donor advised funds. Did a door advised fund maintained by the sponsoring organization maintaining donor advised funds. 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization included on Part Vill, line 12 10 Did the organization seller and the sponsorial property organizations. Enter 1 Initiation fees and capital any taxable distributions under section 4966? 9 Did the organization seller sources (Do not net amo	b	The state of the s	ons or			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 75 b If 'Yes,' find the organization notify the donor of the value of the goods or services provided? 76 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 76 d If 'Yes,' indicate the number of Forms 8282 filed during the year 87 e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 98 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 199 If the organization received a contribution of oral portent to intellectual property, did the organization file Form 8899 as required? 190 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 190 Septimoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 190 Septimory organization make any taxable distributions under section 4986? 191 Did the sponsoring organization make any taxable distributions under section 4986? 192 Septimory organization make any taxable distributions under section 4986? 193 Septimory organizations. Enter 105 Initiation fees and capital contributions included on Part VIII, line 12 106 Gross receipts, included on Form 990, Part VIII, line 12 107 Section 501(c)(7) organizations. Enter 108 Initiation fees and capital contributions included on Part VIII, line 12 109 If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 110 If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 110 If 'Yes,' enter the amount of reserve				6b		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 75 b If 'Yes,' find the organization notify the donor of the value of the goods or services provided? 76 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 76 d If 'Yes,' indicate the number of Forms 8282 filed during the year 87 e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 98 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 199 If the organization received a contribution of oral portent to intellectual property, did the organization file Form 8899 as required? 190 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 190 Septimoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 190 Septimory organization make any taxable distributions under section 4986? 191 Did the sponsoring organization make any taxable distributions under section 4986? 192 Septimory organization make any taxable distributions under section 4986? 193 Septimory organizations. Enter 105 Initiation fees and capital contributions included on Part VIII, line 12 106 Gross receipts, included on Form 990, Part VIII, line 12 107 Section 501(c)(7) organizations. Enter 108 Initiation fees and capital contributions included on Part VIII, line 12 109 If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 110 If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 110 If 'Yes,' enter the amount of reserve	7				- "	
and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? crequired to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 Gross income from members or shareholders Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 501(c)(2) qualified nonprofit health insurance issuers. If yes, enter the amount of trax-exempt inferest received or accrued during the year 13b	а	The state of the s	goods		<u> </u>	
b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Inhation fees and captial contributions included on Part VIII, line 12 Did Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Coross income from members or shareholders Did section 501(c)(12) organizations. Enter Coross income from members or shareholders If "Yes," enter the amount of tax-exempt interest received or accrued during the year 11b			-	7a		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827 did if Yes, "indicate the number of Forms 8282 filed during the year	b	· · · · · · · · · · · · · · · · · · ·		7b		
required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7	С		as			
d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? The the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization have excess business holdings at any time during the year? Did the sponsoring organization make any taxable distributions under section 4966? Both the sponsoring organization make any taxable distributions under section 4966? Both the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 900, Part VIII, line 12, for public use of club facilities Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 501(c)(12) organizations. Enter a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization incensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is reparazation is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it flied a Form 720 to report these						
Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ff the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? ff the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? ff the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h From the proposition of the proposition o	d	·	7d	2		T.
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12 Gross income from members or shareholders Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 501(c)(12) qualified nonprofit health insurance issuers. Is the organization illing from 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization illing form 990 in lieu of Form 1041? Did the organization is licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it field a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b If "Yes," see instructions and file Form 4720, Schedule N Is the organization and educational institution sub			ontract?	7e		
g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organizations is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves an hand 13b Jib In the organization is licensed to issue qualified health plans c Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves the organization is required to maintain by the states in which the organization is prequired to maintain by the states in w				7f		
h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966 and the sponsoring organization file and t	a			7g		
Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Toss income from members or shareholders Gross income from members or shareholders Gross income from emembers or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand To the organization is licensed to issue qualified health plans Enter the amount of reserves on hand To the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year? If "Yes," see instructions and file Form 4				7h		
sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b Initiation fees and capital contributions included on Part VIII, line 12					<u></u>	
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	•		•	1		
a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	9				نــــــــــــــــــــــــــــــــــــــ	rys
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 B Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts, Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans C Enter the amount of reserves on hand Indication of the organization receive any payments for indoor tanning services during the tax year? It "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O It is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N Section 501(c) (29) organization and educational institution subject to the section 4968 excise tax on net investment income?		•		9a		
10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization ricensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 13c 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational instriction subject to the section 4968 excise tax on net investment income? 18 X				9b		
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 110b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		• • •			ų.	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c Lite "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X		=	10a		,	١.
Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 13b c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	_		10b]:	,	
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a Did the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X				│ √ ˈ	۱ و	٠
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			11a	la.		
against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 13b 13c 13b 13c	_			1,	.**.	1.
Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	_		116	1	- - -	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 13c 14a 14a 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	12a	· ·		12a		
Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X				,		
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 13a 13a 13a 13a 13a 13a 13a 13				٠ [[" _	
Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income?				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 18 X	u			4	- "	v ;
the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 18b 13c 14a X 15 X 15 X	h			' , •		اسا
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 18 X		· · · · · · · · · · · · · · · · · · ·	136		,	
Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		·		٦	ľ `	. *
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 18 X				14a	ļ —	Х
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 "Yes," see instructions and file Form 4720, Schedule N 18 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 18 X	_		de O	\vdash	 	1
excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 15 X 16 X						<u> </u>
If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	13		ration of	15]	X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?				1 1	,	1.
, ;	16		t income?	1		X
		If "Yes," complete Form 4720, Schedule O	Cincomo :	1,	-	

Form 990 (2019) HOKE COUNTY PARTNERSHIP FOR 56-1898931 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O 11 Enter the number of voting members included on line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a The governing body? X 8b **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 X 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements?

Se	ction C. Disclosure
17	List the states with which a copy of this Form 990 is required to be filed ▶ NC
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply \square Own website \square Another's website \square Upon request \square Other (explain on Schedule O)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and
	financial statements available to the public during the tax year
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶
N	4ARIE LILLY 351 WAGONER DRIVE, STE. 200
F	FAYETTEVILLE NC 28303 9

910-867-9700

FAYETTEVILLE

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above

(A) Name and title	(B) Average hours per week (list any	bo	o not i x, unle icer a	Pos check ess pe	rson ı	s both	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1) JEAN SQUIER										
	40.00									
EXECUTIVE DIRECTOR	0.00		L	X	<u> </u>			53,079	0	5,500
(2) TAMMY BREWER		1								
	0.20									
BOARD MEMBER	0.00	X			<u> </u>	<u> </u>		0	0	0
(3) PATRICIA BUNN		1								
	0.20									
BOARD MEMBER	0.00	X						0	0	0
(4) BRIAN DANIELS										
	0.20									
CHAIR	0.00	X	<u> </u>	X				0	0	0
(5) ANGELA DEMBINSK		1								
	0.20									
ASSISTANT SECRETARY	0.00	X		X				0	0	0
(6) SCOTT EDWARDS										
	0.20	1								
TREASURER	0.00	X		X				0	0	0
(7) JESSE GIBSON										
,	0.20	İ					ĺ			
ASSISTANT TREASURER	0.00	X		X				0	0	0
(8) CAROL GREER		į								
	0.20									
BOARD MEMBER	0.00	X						0	0	0
(9) PERIKA HARDAWAY			ł	ļ						
	0.20	İ		1						
BOARD MEMBER	0.00	X			$ldsymbol{ld}}}}}}$	$ldsymbol{f eta}$		0	0	0
(10) MICHELLE HEARON				_						
	0.20									
SECRETARY	0.00	Х		Х				0	0	0
(11) MARY HOLLINGSWOF										
	0.20						l			
BOARD MEMBER	0.00	X						0	0	0

Part VIII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	Employees (continued)	
. (A) - Name and title	(B) Average hours per week (list any	bo	x, unle	ss pe	ition more rson i	than o s both r/truste	an 80)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(12) REVEREND VANO BOARD MEMBER	E MCDONA 0.20 0.00	ALI X)					0	0	0
(13) TWANA MCKNIGH		Х		Х				0	0	0
(14) SHIRLEY SMITH	0.20									0
(15) MARY ANN TIME	0.20	X						0	0	
	0.00 GHT 0.20	X						0	0	0
VICE CHAIR	0.00	X		Х				0	0	0
1b Subtotal c Total from continuation shee d Total (add lines 1b and 1c)	ets to Part VII, \$	Secti	on A	\			▶ ▶	53,079 53,079		5,500 5,500
Total number of individuals (in reportable compensation from	•		_	thos	e list	ted a	bov		\$100,000 of	Yes No
 Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization and related organization listed on line 1 for services rendered to the organization. 	complete Schede 1a, is the sum nizations greater a receive or acceptanization? If "Y	dule of re than	J for porta \$15 comp	suci able 0,00 ensa	on indicom	lividu pens f "Ye i fron	ial satio s," n ai	on and other compensation complete Schedule J for suc	from the ch	3 X 4 X 5 X
Complete this table for your fix compensation from the organic	ve highest compo zation Report co							ndar year ending with or with	in the organization's tax ye	
HOKE COUNTY SCHOOLS RAEFORD		2		76			Ŀ	LEY STREET SVC. PROVIDER	(B) ion of services	Compensation
HOKE COUNTY COOPERAT		SIC 2				W.		PROSPECT STREET SVC. PROVIDER		-== -119,007
2 Total number of independent of received more than \$100,000								ose listed above) who	-	

Total And limits 2	[Pa	π ν	Check if	ent of Revenue Schedule O cont	ains a	a response or note	to any line in this	s Part VIII		
2							(A)	(B) Related or exempt	Unrelated	Revenue excluded from tax under
2	st s	1a	Federated camp	algns	1a					
2	irar oun	b	•	_	1b					
2	S, G	С			1c		•			;
2	Sift ar /	d	-		1d			• •		,
2	s, (е			1e	783,808				
2	tion r Si	f	All other contributions,	gifts, grants,						
2	the state		and similar amounts no	t included above	1f	16,668				
2	dor	g	Noncash contributions	included in lines 1a-1f	1g	\$			1	
1, 879 1, 879 1, 875 1, 193 1	Co	h	Total. Add lines	1a–1f		•	800,476			
Description Description						Business Code		<u> </u>		
All other program service revenue q Total. Add lines 2=2f	e	2a	MOBILE PRE	-SCHOOL						1,879
All other program service revenue q Total. Add lines 2=2f	e Žį	b	RESOURCE T	EACHER			1,193			1,193
All other program service revenue	n Se	С								
All other program service revenue	grar Rev	d								
All other program service revenue	Pro	е								
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents b Liss rental expesses 6b C Rental ric or (loss) 7a Gross amount from siècle of sates other than reventiony 7a (i) Securities Cann or (loss) 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other base and sales seps 7 b Liss soct or other 9 a Gross income from fundraising events 9 a Sep Part IV, line 18 9 a Sep Part IV, line 18 9 a Sep Part IV, line 19 9 b Less direct expenses 9 b Less core or (loss) from gaming activates 9 a Sep Part IV, line 19 9 b Less core or (loss) from gaming activates 10a Gross sales of inventory, less returns and allowances 10a Less cost of goods sold 10a Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10c Net income or (loss) from sales of inventory 10 a Gross sales of inventory 10 a Gross sales of inventory 10 a Gross sales of inventory 10 a Gross sales of sales 10 a Gross ancome from fundraising events 10 a Gross ancome from fundraising events 10 a Gross ancome from fundraising events 10 a Gross ancome fr		f								
other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents b Less rental expenses c Rental in come or (loss) 6a Gross amount from pasked dasets other than inventory to grain or (loss) b Less cost or other bases and sales exps to d Net regain or (loss) 7a Carn or (loss) 7b Less cost or other bases and sales exps d A Net grain or (loss) 8a Gross income from fundraising events (not including \$ of contributions resported on line 1 c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities b Less cost of goods sold c Net income or (loss) from sales of inventory 10a Gross asles of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 10a Gross asles of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 10a Gross alles of inventory 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10b Less cost of goods sold 10c Net income or (loss) from sales of inventory 10c Less cost of goods sold 10c Net income or (loss) from sales of inventory 10c Less cost of goods sold 10c Net income or (loss) from sales of inventory 10c Less cost of goods sold 10c Net income or (loss) from sales of inventory 10c Less cost of goods sold 10c Net income or (loss) from sales of inventory 10c Less cost of goods sold 10c Net income or (loss) from sales of inventory 10c Less cost of goods sold 10c Net income or (loss) from sales of inventory 10c Less cost of goods sold 10c Net income or (loss) from sales of inventory 10c Less cost of goods sold 10c Less cost of goods s	_	g					3,072			<u> </u>
Income from investment of tax-exempt bond proceeds		3			s, inte	rest, and				
So Royalties Comparison Co										
6a Gross rents b Less rental expenses c Rental inc or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other ham inventory b Less cost or other base and sales exps and sales exps for Gain or (loss) 7b C Gain or (loss) 7c U Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities for income or (loss) from gaming activities for income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory All a SALES TAX REFUND Date of Closs of Inventory Date of Closs of Inventory Date of Closs of Inventory Date of Closs of Inventory Date of Closs of Inventory Date of Closs of Inventory Date of Closs of Inventory Date of Closs of Inventory Date of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Inventory Date of Closs of Closs of Closs of Inventory Date of Closs of C				estment of tax-exemp	bond	proceeds				
Ga Gross rentals Ga Bb Bess rental expenses Gc Common		5	Royalties	(i) Bool		(u) Porsonal	,			ř i
b Less rental expenses c Rental m.cor (closs) d Net rental income or (closs) Ta Gross amount from sales of assets or other hair mentiony to be see od or other hair mentiony be sand asset says Tb Less cost or other base and asset says Tb C G am or (loss) Tc C d Net gain or (loss) Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities b Less cort of goods soid c Net income or (loss) from sales of inventory To a dil a SALES TAX REFUND b C All other revenue c Total. Add lines 11a-11d All other revenue c Total. Add lines 11a-11d		٠-	O			(II) Personal	·			
The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of assets of assets of assets of the state of the state of assets of the state of the state of assets of the state of the state of the state of assets of the state										
d Net rental income or (loss) 7a Gloss amount flom a good of a seets other than inventory b Less cost or other basis and sales exps c Gain or (loss) 7a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 19 b Less direct expenses c Net income or (loss) 8a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) 11a SALES TAX REFUND 8business Code c Total. Add lines 11a-11d 1 c Total. Add lines 11a-11d			•							
The select of section of the section			, , ,							<u>'</u>
sales of assels on the man mentary Ta										
b Less cost or other basis and sales exps C Gain or (loss) C Gain or (loss) A Net gain or (loss) Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses C Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 9 b Less direct expenses 9 b Less direct expenses 9 c Net income or (loss) from gaming activities See Part IV, line 19 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 10a Gross sales of inventory less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code 2,393 2,393 4 Il other revenue e Total. Add lines 11a-11d				·		(", 0				
(not including \$ of contributions reported on line 1c) See Part IV, line 18 8	е	b	•	10					•	
(not including \$ of contributions reported on line 1c) See Part IV, line 18 8	enu	_		7b					•	· i
(not including \$ of contributions reported on line 1c) See Part IV, line 18 8	Şev	С	• 1							
(not including \$ of contributions reported on line 1c) See Part IV, line 18 8	er F			3)		>				ĺ
(not including \$ of contributions reported on line 1c) See Part IV, line 18 8	Ç,	8a	_							
See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 9a 9a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code 11a SALES TAX REFUND 2,393 2,393 4 All other revenue e Total. Add lines 11a-11d 2,393	Ŭ			-						
b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 9a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 11a SALES TAX REFUND b C d All other revenue e Total. Add lines 11a–11d 2,393			of contributions rep	orted on line 1c)						
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 9a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 11a SALES TAX REFUND b c d All other revenue e Total. Add lines 11a-11d 2,393			See Part IV, line 18	3	8a					
9a Gross income from gaming activities See Part IV, line 19 9b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 10a		b	Less direct expe	enses	8b		^			
See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 10a		С	Net income or (I	oss) from fundraising (events	•				
b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code 11a SALES TAX REFUND b c d All other revenue e Total. Add lines 11a–11d 2,393		9a	Gross income from	gaming activities						
c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code 11a SALES TAX REFUND b c d All other revenue e Total. Add lines 11a-11d 2,393					-				•	,
10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code 2,393 2,393 All other revenue e Total. Add lines 11a–11d 2,393										-
returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory STATE SALES TAX REFUND Business Code					vities	>				
b Less cost of goods sold c Net income or (loss) from sales of inventory Sales tax refund Business Code		10a		•				٠		
C Net income or (loss) from sales of inventory Business Code 2,393 2,393 d All other revenue e Total. Add lines 11a–11d 2,393										
Business Code			_			<u> </u>				
11a SALES TAX REFUND b c d All other revenue e Total. Add lines 11a-11d 2,393 2,393 2,393		С	Net income or (I	oss) from sales of inve	entory	D				
e Total. Add lines 11a–11d ▶ 2,393	Ž.	. د د				= - Business Code	2 202	2 202		
e Total. Add lines 11a–11d ▶ 2,393	ned	11a	SALES TAX	REFUND			∠, 393	∠,393		
e Total. Add lines 11a–11d ▶ 2,393	ella Ven	þ								-
e Total. Add lines 11a–11d ▶ 2,393	Re	د ا	All ather	_			·			
	Σ						2 303	·		
						D		2.393	0	3,072

Part IX | Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX								
Do n	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)				
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21]				
2	Grants and other assistance to domestic								
	individuals See Part IV, line 22	13,677	13,677		. !				
3	Grants and other assistance to foreign				1				
	organizations, foreign governments, and foreign				ļ				
	individuals See Part IV, lines 15 and 16			4	· [
4	Benefits paid to or for members	-		· · · · · · · · · · · · · · · · · · ·					
5	Compensation of current officers, directors,	55 000	12 056	12 111					
_	trustees, and key employees	55,000	12,856	42,144					
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	138,558	129,516	9,042					
8	Pension plan accruals and contributions (include	130,330	12,510	J, 042					
·	section 401(k) and 403(b) employer contributions)	19,356	13,856	5,500					
9	Other employee benefits	13,917	13,917	37333					
10	Payroll taxes	13,688	9,611	4,077	······································				
11	Fees for services (nonemployees)								
а	Management								
b	Legal								
С	Accounting	1,048		1,048					
d	Lobbying								
е	Professional fundraising services See Part IV, line 17								
f	Investment management fees								
g	Other (If line 11g amount exceeds 10% of line 25, column								
	(A) amount, list line 11g expenses on Schedule O)	2 460		470					
12	Advertising and promotion	3,469	2,990	479					
13	Office expenses	28,268	21,665	6,603					
14	Information technology								
15 16	Royalties	41,184	29,266	11,918					
17	Occupancy Travel	3,273	2,347	926					
	Payments of travel or entertainment expenses	3/2/3	2/31/	320					
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	257	257						
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	· · · · · · · · · · · · · · · · · · ·							
23	Insurance	2,742	1,013	1,729					
24	Other expenses Itemize expenses not covered	• •							
	above (List miscellaneous expenses on line 24e If	· 1			1				
	line 24e amount exceeds 10% of line 25, column				i				
	(A) amount, list line 24e expenses on Schedule O)		410 072						
a	CONTRACTS W/DSPS	419,973	419,973	4 200					
b	REPAIRS & MAINTENANCE	17,490 16,435	13,181 16,435	4,309					
C	OTHER CONTRACT SERVICES SALES TAX EXPENSE	2,431	10,433	2,431					
d	T T	9,033	5,028	4,005					
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	799,799	705,588	94,211	0				
26	Joint costs. Complete this line only if the	133,133	700,000	731444	<u> </u>				
- *	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here								
	following SOP 98-2 (ASC 958-720)								

Balance Sheet

Part X

Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 10,707 19,110 1 Cash-non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 508 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 10c b Less accumulated depreciation 11 Investments—publicly traded securities 11 12 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 215 Total assets. Add lines 1 through 15 (must equal line 33) 16 444 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 444 **,**197 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here ▶ |X| Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 6,849 10,355 Net assets without donor restrictions 27 922 28 6,558 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 10. 771 16,913 32 Total net assets or fund balances 215 19,110 Total liabilities and net assets/fund balances

Form 9	990 (2019) HOKE COUNTY PARTNERSHIP FOR 56-1898931			Р	age 12
Part	· · · · · · · · · · · · · · · · · · ·				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		805,	941
2	Total expenses (must equal Part IX, column (A), line 25)	2		799,	799
3 F	Revenue less expenses Subtract line 2 from line 1	3		6,	142
4 1	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			771
5 1	Net unrealized gains (losses) on investments	5			
6 (Donated services and use of facilities	6			
7 I	nvestment expenses	7			
8 F	Prior period adjustments	8			
9 (Other changes in net assets or fund balances (explain on Schedule O)	9			
10 1	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
3	32, column (B))	10		16,	913
Part	TXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1 /	Accounting method used to prepare the Form 990 $$ $$ $$ $$ $$ $$ $$ $$ $$ $$				1
- 1	f the organization changed its method of accounting from a prior year or checked "Other," explain in			1	
5	Schedule O				
2a \	Were the organization's financial statements compiled or reviewed by an independent accountant?			a	X
1	f "Yes," check a box below to indicate whether the financial statements for the year were compiled or			İ	1 1
r	reviewed on a separate basis, consolidated basis, or both			Ì	
	Separate basis Consolidated basis Both consolidated and separate basis				
b \	Were the organization's financial statements audited by an independent accountant?		21	<u> </u>	X
- 1	f "Yes," check a box below to indicate whether the financial statements for the year were audited on a			-	i
5	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			_	.
c I	f "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
t	he audit, review, or compilation of its financial statements and selection of an independent accountant?		20	2	\bot
1	f the organization changed either its oversight process or selection process during the tax year, explain on				-
5	Schedule O				
3a /	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3	a	X
b I	f "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
<u> </u>	equired audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		31		
			Í	Form 99	0 (2019)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Publication

Internal Revenue Service

Name of the organization

HOKE COUNTY PARTNERSHIP FOR CHILDREN AND FAMILIES

Employer identification number 56-1898931

Pa	art I	1 Reas	on for Public Charity	Status (All organizations	must co	mplete	this part) See instructio	ns.		
				se it is (For lines 1 through 12, o				·		
1	Ň		•	sociation of churches described			'	1/		
2	П	•	•	A)(ii). (Attach Schedule E (Forn			()	1		
3	П						riii).	1		
4	H	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									
5										
,	ш	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(h)(1)(A)(iv). (Complete Part II.)								
6		section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	X									
'	W	described in section 170(b)(1)(A)(vi). (Complete Part II)								
8	\Box			170(b)(1)(A)(vi). (Complete Part	IE)					
9	Н			scribed in section 170(b)(1)(A)(i		ed in con	unction with a land-grant colle	ne		
	ш			of agriculture (see instructions)				y•		
		university	or a non tana grant conego t	or agriculture (eee metraetterie)			ity, and state of the conege of			
10	\Box	•	ion that normally receives (1) more than 33 1/3% of its supp	ort from	contributi	ons, membership fees, and gro	oss		
	_	_	•	npt functions—subject to certain						
		• •	•	nd unrelated business taxable in	•		•			
			=	0, 1975 See section 509(a)(2) .			•			
11	Ц	•	•	exclusively to test for public safe	•		• • • •			
12	\sqcup	•	•	exclusively for the benefit of, to						
				zations described in section 509						
				hat describes the type of suppor						
	а			erated, supervised, or controlled	-			ng		
		• -		wer to regularly appoint or elect a complete Part IV, Sections A ar		or the ar	rectors or trustees or the			
	b	\neg \cdots	• •	pervised or controlled in connect		ite elinna	ated organization(s), by having			
	U	_		rting organization vested in the s						
			- · · · · · · · · · · · · · · · · · · ·	Part IV, Sections A and C.	amo por	70710 (1101	control of manage the support			
	С	Type III 1	functionally integrated. A s	supporting organization operated				ith,		
				tructions) You must complete						
	d		•	d. A supporting organization ope				• •		
				e organization generally must sa must complete Part IV, Sectior	-		•	ess		
	е	_ `	•	eived a written determination from		•				
	Ç			n-functionally integrated support			s a Type I, Type II, Type III			
	f		nber of supported organizati							
	g	Provide the fo	ollowing information about th	ne supported organization(s)						
(1)	Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of		
		ganization		(described on lines 1–10		ir governing	support (see	other support (see		
				above (see instructions))		nent?	instructions)	instructions)		
					Yes	No				
(A)										
								·		
(B)										
(C)										
(D)	-v31-, 4			And a second section of the section of the section of	-			 ,		
,υ,										
(E)										
(-)										
		-		. نبروع	5	• ;				
F - 4					Ι .					

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	19	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	765,603	746,352	769,997	796,867	80	00,476	3,879,295
2	Tax revenues levied for the 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				1			
4	Total. Add lines 1 through 3	765,603	746,352	769,997	796,867	80	0,476	3,879,295
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				•			3,879,295
	tion B. Total Support					··· ··· · · · · · · · · · · · · · · ·		
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	19	(f) Total
7	Amounts from line 4	765,603	746,352	769,997	796,867	80	0,476	3,879,295
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)	2,987	3,345	4,149	2,560	7 1	3,072	16,113
11	Total support. Add lines 7 through 10					` ;	_	3,895,408
12	Gross receipts from related activities, etc	•					12	2,393
13	First five years. If the Form 990 is for the		, second, third, fou	rth, or fifth tax yea	r as a section 501((c)(3)		. \Box
<u></u>	organization, check this box and stop her					. =		P
	tion C. Computation of Public Su	· ·					144	
14	Public support percentage for 2019 (line 6			ר (ז))			14	99.59%
15	Public support percentage from 2018 Scho			2 and he = 44 - = 0	2 4/20/	and Abin	15	99.16%
16a	33 1/3% support test—2019. If the organ				3 1/3% or more, cr	ieck this		▶ [X]
L	box and stop here. The organization quality	•			5 ic 33 1/20/ ar	re chook		
b	33 1/3% support test—2018. If the organ this box and stop here. The organization of				J 13 JJ 17376 UI MO	ie, check		▶ □
172	10%-facts-and-circumstances test—201	-			a or 16h and line	1 <i>4</i> is		
170	10% or more, and if the organization meet Part VI how the organization meets the "fa	s the "facts-and-ci	cumstances" test,	check this box and	d stop here. Expla	ın ın		
	organization	icts-and-circumstai	ices test The org	anization qualifies	as a publicly supp	ortea		▶ □
ь	10%-facts-and-circumstances test—201	8. If the organization	on did not check a	box on line 13, 16	a. 16b. or 17a. and	line		لیا ۔
_	15 is 10% or more, and if the organization	_						
	Explain in Part VI how the organization me				•	blicly		
	supported organization			o.gameano	42220 do a pu	 ,		▶ □
	Private foundation. If the organization did	not check a box o	on line 13, 16a, 16h	. 17a, or 17b. che	ck this box and see	-	` - == *	ء ا <u>سا</u> م وجدی مناب
	instructions			, ,		_		▶ □

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

(Complete only if yo	ou checked the bo	x on line 10 of Part	I or if the organization	failed to qualify	under Part II
			elow please complete		

Sec	tion A. Public Support	4457 44					
Caler	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	√(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 furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	ļ					
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 persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b			/			
8	Public support. (Subtract line 7c from line 6)		,2	·	, :	3, 1	
	tion B. Total Support			ı	1	,	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royallies, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	•	t, second, third, fo	urth, or fifth tax ye	ar as a section 501	(c)(3)	▶ □
Sec	tion C. Computation of Public Su		tage				
15	Public support percentage for 2019 (line 8,	. • • • • • • • • • • • • • • • • • • •		nn (f))		15	%
16	Public support percentage from 2018 Sche					16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2019 (li	ne 10c, column (f)	, divided by line 1:	3, column (f))		17	%
18	Investment income percentage from 2018					18	- %=
19a	33 1/3% support tests—2019. If the organ						. \square
b	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2018. If the organ						▶ ⊔
-	line 18 is not more than 33 1/3%, check th						▶ □
20	Private foundation. If the organization did	i not check a box o	on line 14, 19a, or	19b, check this bo	ox and see instructi	ons	▶ □

Page 4

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)

Sect	ion A	A. All	Support	ing Organ	izations
------	-------	--------	---------	-----------	----------

- Are all of the organization's supported organizations listed by name in the organization's governing 1 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
- 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)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (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 Part VI when and how the 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 Part VI what controls the organization put in place to ensure such use
- 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
- 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
- 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
- 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)
- 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?
- 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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)
- 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)
- 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.
- 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.
- 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - 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)

		Yes	No
	2		
	3a		
		<u> </u>	
	-	• .	, ,
	4b	n ·	. 1
		r For	
	4c		است
	•		
			<u></u>
	5a		
	5b 5c		
	*	;	
	6		
	7		
	8		
]
	9a		
	9b		
j	9c		•
	10a		
	10b]
(Fo	orm 99	0 or 990-	EZ) 2019

Sched.	ule A (Form 990 or 990-EZ) 2019 HONE COUNTY PARTIMENSITY FOR 50-16963	<u>, , , , , , , , , , , , , , , , , , , </u>		Page 5
Pai	rt IV Supporting Organizations (continued)			T
44	the the constant of the contribution from any of the following persons?		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly controls either alone or together with persons described in (b) and (c)			, '
a	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		<u> </u>
h	A family member of a person described in (a) above?	11b		
c	and the second s	11c		
	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		* *	i
	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		BA	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			.
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		,	.
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			·
Coot	supervised, or controlled the supporting organization	2		
Sect	ion C. Type II Supporting Organizations		V	l Na
	Many a many that the appropriate of discrete as twistens divine the tay year also a majority of the discrete	Γ	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		
Sect	ion D. All Type III Supporting Organizations		·	l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	,	; <u>.</u>	
	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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		1	• • -
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			<u>-</u>
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		ļ
3	By reason of the relationship described in (2), did the organization's supported organizations have a		4 .	# t
	significant voice in the organization's investment policies and in directing the use of the organization's	i	, . 	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		ئــــــــــــــــــــــــــــــــــــــ	
Saat	supported organizations played in this regard	3		l
	tion E. Type III Functionally-Integrated Supporting Organizations			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction The organization satisfied the Activities Test Complete line 2 below	3)		
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 instru	uctions)		
•		,		
2	Activities Test Answer (a) and (b) below.	ļ	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			j
	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		· .	<u> </u>
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		- 1	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	ا بر	_ 、	
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а		<u></u>		
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b				<u>-</u>
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard	3b	i	ı

Carried He William Good Co. Co. Co. Co. Co. Co. Co. Co. Co. Co.	0 2 1	00 2030	7 7 0 1
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	<u>Organizat</u>	ions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust of	n Nov 20, 1	970 (explain in Part VI)	See
instructions. All other Type III non-functionally integrated supporting organizations	must comp	lete Sections A through t	
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	<u>.</u>	
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)	ľ		
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,			<u> </u>
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	1	
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	<u> </u>	
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 integral	ated Type III	supporting organization	(see

Schedule A (Form 990 or 990-EZ) 2019

instructions)

Part	V Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpos	ses		ŧ
2	Amounts paid to perform activity that directly furthers exempt purposes	of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations		
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	<u> </u>	<u> </u>	
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization	ition is responsive		
	(provide details in Part VI) See instructions	•		
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Zino o amount distance of mo o amount	(i)	(ii)	(ıii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required-explain in Part VI) See			
	instructions	,		
3	Excess distributions carryover, if any, to 2019			· · · · · · · · · · · · · · · · · · ·
a	From 2014		· · . · · · · · · · · · · · · · · ·	
b	From 2015			
С	From 2016	-		· · · · · · · · · · · · · · · · · · ·
d	From 2017			•
е	From 2018	1		4
f	Total of lines 3a through e			1
g	Applied to underdistributions of prior years			İ
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f		•	į.
4	Distributions for 2019 from			
	Section D, line 7 \$			-
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			· -
5	Remaining underdistributions for years prior to 2019, if			
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2019 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2020. Add lines 3			
•	and 4c			!
8	Breakdown of line 7			
	Excess from 2015	***************************************		
	Excess from 2016			-
	Excess from 2017			
	Excess from 2018		, •	· · · · · · · · · · · · · · · · · · ·
	Excess from 2019]

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)

PART II, LINE 10 - OTHER INCOME DETAIL

RESOURCE TEACHER/TRAINING/OTHER

5,015

MOBILE PRE-SCHOOL

\$ 11,098

SCHEDULE I (Form 990)

Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

2019

OMB No 1545-0047

► Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

HOKE COUNTY PARTNERSHIP FOR

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

2 Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, (h) Purpose of grant or assistance X Yes 56-1898931 noncash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) General Information on Grants and Assistance (b) EIN Enter total number of other organizations listed in the line 1 table CHILDREN AND FAMILIES the selection criteria used to award the grants or assistance? (a) Name and address of organization or government Part Part II 6 £ 2 ල **₹** 9 9 8 6

Schedule I (Form 990) (2019)

For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA Page 2

56-1898931

Schedule I (Form 990) (2019) HOKE COUNTY PARTNERSHIP FOR

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

Part III

	Fari III can be duplicated II additional space is needed	orial space is needed				
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, FMV, appraisal, other)
1 PROFE	1 PROFESSIONAL DEVELOPMENT	o.	7,704			
2 MOBIL	2 MOBILE PRE-K/LITERACY ETC	71	1,104	4,869	FMV	BOOKS
က	=					
4						
2	_ a					
ဖ						
7						
2 10	Susalomontal Information Drough the information required in Dort II and III column (h) and any other additional information	ando the information re	Coult I trod or bostillo	Dad III column (h)	" length be rether yet bee	oformation

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Part IV

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS ı \sim PART I, LINE THE PARTNERSHIP FOLLOWS ESTABLISHED CRITERIA, POLICIES AND PROCEDURES FOR

EACH PROGRAM HAS SPECIFIC THE AWARDING AND MONITORING OF GRANT FUNDS. ELIGIBILITY REQUIREMENTS, PAYMENT METHODS, AND FINANCIAL AND PROGRAMMATIC

MONITORING POLICIES. THE PARTNERSHIP IS ALSO SUBJECT TO MONITORING BY THE

NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC., AND IS REQUIRED TO MAINTAIN

SPECIFIC DOCUMENTATION RELATED TO GRANTS AND OTHER ASSISTANCE.

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

► Go to www irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open To Public

Repartment of the Treasury Internal Revenue Service Name of the organization

HOKE COUNTY PARTNERSHIP FOR

Employer identification number

	CHILDREN AND FAMILIE	s						56-1	18989	31				
Part I	Excess Benefit Transactions	(section 501	(c)(3), section (501(c)(4)), and 501(c)(29)	organizations onl	ly)					
	Complete if the organization answere	d "Yes" on Fo	rm 990, Part IV	', line	25	a or 25b, o	r Form	990-EZ, Part V,	line 4	0b				
1	(a) Name of disqualified person	(b) Relation	onship between disqu	ualifie	d per	son and		(c) Description of tra	aneacho			(d)	Correc	ted?
<u> </u>	(a) Name of disqualmed person		organization	1				(c) Description of the	ai isactio			Yes		No
(1)												↓		
(2)	,											↓	\dashv	
(3)												—	\dashv	
(4)												—		
(5)												₩	+	
(6)														
	e amount of tax incurred by the organiza	ition manager	rs or disqualifie	d pe	rson	is during th	e year		•					
	ection 4958 e amount of tax, if any, on line 2, above	roumburged h	ov the eranger	hon						' —				
3 Enter th	e amount of tax, if any, on line 2, above	reimburseu i	by the organization	lion					1	· —				
Dead II I		4-15												
Part II	Loans to and/or From Interes			417	l	20 5	000	Dad N4 has 20						
	Complete if the organization answere				iine	36a or For	m 990	, Part IV, line 26,	or ii ti	ne				
	organization reported an amount on F (a) Name of interested person	(b) Relationship	(c) Purpose of		Loan	(e) Origii	nal	(f) Balance due	l(a) in	default?	l (h) Ar	proved	Ιων	Vritten
	• • • • • • • • • • • • • • • • • • • •	with organization	loan	to or	from	principal ar		,,,====================================	[]		by bo	pard or nittee?		ement?
					org ? From	1			Yes	No	Yes	No	Yes	No
				10	FION	1			1.03	"	103	"	103	+**
(1)														
77				t	\vdash							\vdash	\vdash	†
(2)														
												<u> </u>		1
(3)										ļ		1	İ	
137	1					<u> </u>								
(4)														
(5)												<u></u>		
(6)				L										
(7)				Ļ.,				•	ļ	ļ	ļ	↓	<u> </u>	↓
									-		ĺ		l	1
_(8)				<u> </u>					<u> </u>		<u> </u>	 -	<u> </u>	
						}						1		
(9)				_	<u> </u>				-			├		↓
44.5														
(10)			<u> </u>	L	<u> </u>	<u> </u>		L	╂	l	ļ	Щ	├	
Total Part III	Grants or Assistance Benefi	ting Interes	stad Parsor				\$		<u> </u>	_	<u> </u>			
[Fait III]	Complete if the organization answere				27									
		Y						(4) T ((-)	<u> </u>			
	(a) Name of interested person	, ,	ship between interes and the organization		(C) A	mount of assist	ance	(d) Type of assistance		(e)	Purpos	e of ass	stance	
(1)					-		+							
(2)			· ····································				-		+					
(3)									+					
(4)					<u> </u>				\dashv					
(5)			·	-	<u> </u>				\top					
(6)									\top					
(7)														
(8)														
					_								-	

(9) (10) Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the	(c) Amount of transaction	(d) Description of transaction	of	hanng org nues?
	organization			Yes	No
(1) HOKE COUNTY COOPERATIVE EXTENSION	BOARD MEMBER	125,221	SERVICE PROVIDER		Х
(2)				[
(3)					
(4)					
(5)					
(6)					
(7)					
(8)			-		
(9)					
(10)					

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions)

SCHEDULE L, PART V - ADDITIONAL INFORMATION

SMART START IS A PUBLIC-PRIVATE INITIATIVE THAT PROVIDES HIGH-QUALITY EARLY CHILDHOOD EDUCATION FUNDING TO ALL NORTH CAROLINA COUNTIES. SMART START FUNDS ARE USED TO IMPROVE THE QUALITY OF CHILD CARE, MAKE CHILD CARE MORE AFFORDABLE AND ACCESSIBLE, PROVIDE ACCESS TO HEALTH SERVICES AND OFFER THE SMART START PROGRAM IS IMPLEMENTED STATEWIDE BY THE FAMILY SUPPORT. NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC. AND LOCAL PARTNERSHIPS THAT SERVE EACH COUNTY. THE COMPOSITION OF LOCAL PARTNERSHIP BOARDS IS MANDATED BY THE STATE OF NORTH CAROLINA AND CONSISTS OF SPECIFIC REPRESENTATIVES FROM THE COMMUNITY TO GUARANTEE REPRESENTATION WHICH MOST BROADLY REFLECTS THE MAKE-UP OF THE LOCAL PARTNERSHIP SERVICE AREA, ESPECIALLY IN AREAS OF BUSINESS/COMMUNITY, SERVICE AND GOVERNMENT. IN CARRYING OUT SMART START PROGRAM ACTIVITIES, LOCAL PARTNERSHIPS MAY ENTER INTO SERVICE PROVIDER CONTRACTS WITH, OR PROVIDE GRANTS TO, ENTITIES WHO ARE REPRESENTED ON THE IN SO DOING, PARTNERSHIPS ARE TO STRICTLY ADHERE TO ESTABLISHED CONFLICT OF INTEREST POLICIES. BOARD MEMBERS ARE TO ACKNOWLEDGE ANY CONFLICTS OF INTEREST AND DECLARE SUCH CONFLICT BEFORE AN AGENDA ITEM IN QUESTION IS DISCUSSED OR VOTED UPON BY THE FULL BOARD.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Department of the Treasury

HOKE COUNTY PARTNERSHIP FOR CHILDREN AND FAMILIES

Employer identification number 56-1898931

OMB No 1545-0047

official contraction

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

FAMILY SUPPORT - APPROXIMATELY 63 INFANT/TODDLER CAR SEATS WERE

PROVIDED TO ELIGIBLE RESIDENTS WHO ATTENDED HEALTH CENTER PROGRAMS

AND DEMONSTRATED PROPER INSTALLATION PROCEDURES. A PARENTING EDUCATION

PROGRAM, CALLED PARENTS AS TEACHERS, ASSISTED PARENTS OF CHILDREN AGES 0-5

IN UNDERSTANDING HOW TO NURTURE THEIR CHILD'S OPTIMAL DEVELOPMENT. 95% OF

THE PARTICIPANTS AGREED THEY WERE MORE CONFIDENT IN WAYS TO RAISE THEIR

CHILDREN BY CHOOSING ACTIVITIES MORE OFTEN TO HELP THEIR CHILDREN LEARN,

USING BETTER WAYS TO HANDLE BEHAVIOR, UNDERSTANDING THE IMPORTANCE OF

REGULAR MEDICAL CHECK-UPS, AND MAKING THEIR HOME SAFER FOR THEIR CHILDREN.

95% ALSO REPORTED INCREASED TIME SPENT ON READING AND PLAYING WITH THEIR

CHILDREN.

PROGRAM SUPPORT - PROGRAM MANAGEMENT ACTIVITIES INCLUDED CONDUCTING ON-SITE FISCAL AND PROGRAMMATIC MONITORING OF ALL FUNDED PROJECTS, AS WELL AS THE ONGOING COORDINATION OF PROJECTS AND ACTIVITIES TO DETERMINE IF SHORT-TERM AND LONG-TERM GOALS ARE BEING ACHIEVED.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A COPY OF FORM 990 WAS PROVIDED TO EACH MEMBER OF THE EXECUTIVE COMMITTEE

FOR REVIEW BEFORE FILING. THE FINAL COPY WAS MADE AVAILABLE FOR REVIEW BY

THE FULL BOARD.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

CONFLICTS OF INTEREST STATEMENTS ARE SIGNED AND NOTARIZED BY BOARD MEMBERS.

WHEN A CONFLICT OF INTEREST IS RELEVANT TO A MATTER REQUIRING ACTION BY

Employer identification number

56-1898931

THE BOARD OF DIRECTORS, THE INTERESTED PERSON(S) SHALL CALL IT TO THE ATTENTION OF THE BOARD AND SAID PERSON(S) SHALL NOT VOTE ON THE MATTER. IN ADDITION, THE PERSON(S) SHALL NOT PARTICIPATE IN THE FINAL DELIBERATION OR DECISION REGARDING THE MATTER UNDER CONSIDERATION.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD CHAIR, UNDER THE ADVISEMENT OF THE EXECUTIVE COMMITTEE, SETS THE

COMPENSATION OF THE EXECUTIVE DIRECTOR OF THE PARTNERSHIP. COMPARATIVE

DATA IS OBTAINED FROM SIMILAR NONPROFIT ORGANIZATIONS, AND THE EXECUTIVE

DIRECTOR'S SALARY RANGE IS ADJUSTED ACCORDINGLY THROUGH BOARD ACTION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS AND POLICIES ARE MADE AVAILABLE FOR INSPECTION AT THE PARTNERSHIP'S OFFICE UPON REQUEST. FINANCIAL STATEMENTS ARE INCLUDED IN THE PARTNERSHIP'S AUDIT REPORTS WHICH MAY BE OBTAINED THROUGH THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC.