

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

20**20**

Open to Public ▶ Do not enter social security numbers on this form, as it may be made public. Inspection Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990EZ for instructions and the latest information. 2020, and ending 9-30-20 For the 2020 calendar year, or tax year beginning , 20 C Name of organization 2 D Employer identification number 2 Address change Room/suite Initial return 104-721-3885 Final return/terminated F Group Exemption Amended return 2 Number ► 🔞 Application pending H Check ▶ ☐ If the organization is not G Accounting Method Accruai required to attach Schedule B J Tax-exempt status (check only one) - X 501(c)(3) 501(c) ((Form 990, 990-EZ, or 990-PF) ◀ (insert no) 4947(a)(1) or K Form of organization Corporation Trust Association Other L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I. Contributions, gifts, grants, and similar amounts received Program service revenue including government fees and contracts 2 3 Membership dues and assessments 3 4 4 Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a) 5c R Gaming and fundraising events: Gross income from gaming (attach Schedule G if greater than Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 6c Less: direct expenses from gaming and fundraising events . . . Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract Gross sales of inventory, less returns and allowances . . . 7a 7a Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) 7c 8 8 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 Grants and similar amounts paid (list in Schedule O) . . 10 11 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 2 12 Professional fees and other payments to independent contractors ? 13 13 14 15 15 16 16 17 Total expenses. Add lines 10 through 16 17 18 18 Excess or (deficit) for the year (subtract line 17 from line 9) Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 Other changes in net assets or fund balances (explain in Schedule O) 20 20

For Paperwork Reduction Act Notice, see the separate instructions.

Net assets or fund balances at end of year. Combine lines 18 through 20 Cat. No 10642I

Form 990-EZ (2020)

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					(A) Beginning of year	(B) E	nd of year
22	Cash, savings, and in	vestments			6	22	d
23	Land and buildings.				T	23	
24	Other assets (describe	e in Schedule O) .				24	:
25	Total assets				d	25	NA
26						26	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
27			olumn (B) must agree with			27	<u>}</u>
Part			complishments (see th		Part III)	 -	Y
	Check if the org	janization used Scho	edule O to respond to a	ny question in this l	Part III 🗍	Ex	penses
Vhat	is the organization's pri	mary exempt purpos	ie?				for section
مود	ribe the organization's	orogram senuce acco	omplishments for each o	f its three largest or	rogram convices	1 ''''	and 501(c)(4) ons, optional fo
s m	leasured by expenses	In a clear and conc	ise manner, describe the	services provided	the number of	others)	, -p
	ons benefited, and other			s services provided	, the number of	·	
28							
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31	<u>`</u>	(describe in Schedul	le O)			Joa	
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Part	· · · · · · · · · · · · · · · · · · ·			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in thi	s Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No_
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the	55		
35a	change on Schedule O. See instructions	34		<u>~</u>
b	activities (such as those reported on lines 2, 6a, and 7a, among others)? If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35a 35b		1
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were			
L	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Y
ъ 39	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b Section 501(c)(7) organizations. Enter:	-		
а	Initiation fees and capital contributions included on line 9	}		
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4915 ▶ ; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	- 40b	~	ً. س
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			_
ď	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	-	V
41	List the states with which a copy of this return is filed > Georgia			
42a	The organization's books are in care of > 3630 Calumet Road Telephone no. > 401 Located at > Decade Ga 30034 ZIP + 4 > 1	t :33	⊒! ~?	2.8.1
b	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)?	42b	Yes	No
	If "Yes," enter the name of the foreign country ▶	1.22		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country	42c		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	· ·	.	> □
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No V
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		<u>ا</u>
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	+	1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ. See instructions	45b	<u> </u>	1

Form 99	90-EZ (2020)					1	Page 4
46	Did the organization engage, directly or in to candidates for public office? If "Yes," of	ndirectly, in political complete Schedule C	ampaign activities on	behalf of or I	n opposition	Yes 46	1
Part			`			1.79	
	All section 501(c)(3) organization	s must answer que	estions 47-49b and	52, and com	plete the t	tables for lin	es
	50 and 51.		•				
	Check if the organization used Sci	hedule O to respond	to any question in t	his Part VI	<u> </u>	<u> </u>	
47	D.d.th.					Yes	No
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C. Par			n in effect du	iring the ta	1 1	
48	Is the organization a school as described in					47	
49a	Did the organization make any transfers to					48	
b	If "Yes," was the related organization a se					49a	1
50	Complete this table for the organization's					49b	
	employees) who each received more than	\$100,000 of compet	nsation from the organ	nization If the	re is none	enter "None '	iu key
		-		(d) Health be		CITE NOILE.	
	(a) Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	contributions to	, ,	e) Estimated amo	unt of
		devoted to position	(Forms W-2/1099-MISC)	benefit plans, an compensa		other compensa	tion
				Compense			
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	•	i					
	Total number of other employees paid over	er \$100.000	. •				
51	Complete this table for the organization'			contractors v	vho each re	eceived more	e than
	\$100,000 of compensation from the organ						
	(a) Name and business address of each independ	ient contractor	(b) Type of serv	uce.	(c) C(ompensation	
			(2) (3)				
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d	Total number of other independent contra			▶			
52	Did the organization complete Schedu	ule A? Note: All se	ection 501(c)(3) orga	nizations mu			
			<u> </u>				No
Under p	penalties of perjury, I declare that I have examined this errect, and complete Declaration of preparer (other that	return, including accompar	nying schedules and statement ormation of which preparer l	ents, and to the b	est of my knov e.	vledge and belief	, it is
		. 0 .		<u> </u>	1-7-0		
Sign	Signature of difficer	san y		Date	mark.	·	
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nere	Type or print name and title	00 1K					
	12.17.	Preparer's signature	ΓD	ate		PTIN	
Paid	Print/Type preparer's name	, repaid o digitatore			Check if self-employed		
Prep					EIN >		
Use	Only Firm's name			Phone			
May +	Firm's address he IRS discuss this return with the prepare	r shown above? See	instructions	L F HORE	•	☐ Yes ☐	No
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SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) 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.

OMB No 1545-0047

Open to Public Inspection
Employer identification number

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Pai					l organizations mus				ons.
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1 2					on of churches descr (Attach Schedule E (F				\
3					anization described i				
4		medical research or	raanizatio	opital scivide org	onjunction with a hosp	nital deci	ribed in s	:,(m)(iii). :ection 170/b)/1\(A)	(iii) Entartha
•	ho	ospital's name, city,	and state	a'	onjunicach waar a 1100j	ontai acst	on occurring	ection motol(n)(n)	(m). Linter the
5	☐ Ar	· ·	ated for	the benefit of a	college or university	owned o	or operate	ed by a government	tal unit described in
_				•				*****	
6 7		rederal, state, or loc	ai goveri	nment or govern	mental unit described	ın secti	on 170(b)	(1)(A)(v).	
•	L. ∧:	escribed in section	101111aliy 1 70/51/ 11	(A)(vi) (Complet	tantial part of its sup	port fron	n a gover	nmental unit or fron	n the general public
8					(1)(A)(vi). (Complete I				
9	LJ Ar	agricultural researc	ch organi	zation described	in section 170(b)(1)	(A)(ix) op	erated in	conjunction with a l	and-grant college
	or	university or a non- liversity:	iano-gra	nt college of agr	iculture (see instructio	ons). Ente	er the nam	ne, city, and state of	the college or
10		•	ormalic r	2000 Vac (1) more	than 331/3% of its su				
.0	re	ceipts from activitie:	s related	to its exempt ful	nctions, subject to ce	rtain exc	eptions: a	nd (2) no more than	331/3% of its
	su	ipport from gross in	vestment	: income and unr	related business taxal	ble incon	ne (less se	ection 511 tax) from	businesses
					75. See section 509(a				
11					sively to test for public				
12	∐ Aŗ	organization organ	ized and	operated exclus	ively for the benefit of	f, to perf	orm the fu	inctions of, or to cal	rry out the purposes
					ns described in secti				
_					scribes the type of sup		_		
а	ш				, supervised, or contr				
				• •	regularly appoint or e ete Part IV, Sections			ne directors or trust	ees of the
	_								
b	Ш				ed or controlled in co				
					rganization vested in		e persons	that control or man	age the supported
		•		•	V, Sections A and C.			n	- II
С					ting organization oper ns). You must comp l				ally integrated with,
d					pporting organization				
					nization generally mus				id an attentiveness
		requirement (see i	nstructio	ns). You must c	omplete Part IV, Sec	tions A	and D, an	d Part V.	
е					a written determination				e II, Type III
		functionally integra	ated, or T	ype III non-func	tionally integrated sup	porting	organızatı	on.	,
f		er the number of sup							
g	Prov	vide the following in	formation	about the supp	orted organization(s).				
	(i) Nan	ne of supported organizat	tion	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
					above (see instructions))		ment?	instructions)	instructions)
						Yes	No		
(A)						ļ]		
						 	 		
(B)									
(C)									
				<u> </u>		 			
(D)				}					}
									
(E)							LIGHT TO THE		
Tota	1				是一种,这种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种	(F	4	1	<u> </u>

	e A (Form 990 or 990-EZ) 2020						Page 2
`Part	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organization	n failed to qua	
	Part III. If the organization fails to	o qualify unde	r the tests lis	sted below, pl	ease comple	te Part III.)	
	on A. Public Support	() 20(0	a) 0047				
Calen	dar year (or fiscal year beginning in) Gifts, grants, contributions, and	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
•	membership fees received. (Do not			ĺ			
	include any "unusual grants.")	6	4	4	ь Б	Á	\mathcal{A}
2	Tax revenues levied for the	+	- 	= 4	+	- ' '(t)	
	organization's benefit and either paid to		ً ہـ ا	١ , ا	,	,	
	or expended on its behalf	Φ	Φ	\Box	Ф	Ø	Ф
3	The value of services or facilities				\neg		t
	furnished by a governmental unit to the	4	4	الم	ょ		.
	organization without charge	<u> </u>	<u> </u>	9	<u> </u>	(1)	φ
4	Total. Add lines 1 through 3	The state of the s	CV	D	<u>O</u>	1 - 5 - 4 (5) 5 - 3 - 4 (5)	<u> </u>
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	25.70.00					"
Section	on B. Total Support	100000			and the faste described	With the state of the state of	·
Calen	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	(ф	Ф	Ф	ф	<u></u> Ф
8	Gross income from interest, dividends,	'	(τ		τ	1
	payments received on securities loans,				ļ	,	
	rents, royalties, and income from similar sources	ĺ	ļ			ľ	
9	Net income from unrelated business						
9	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.)				ļ	j	
11	Total support. Add lines 7 through 10			NEW TRANSPORT		200720406	<u></u>
12	Gross receipts from related activities, etc					12	t
13	First 5 years. If the Form 990 is for the						
	organization, check this box and stop he			<u> </u>	<u> </u>	<u> </u>	🕨 🔲
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2020 (line	6, column (f), d	ivided by line	11, column (f))		14	<u>%</u>
15	Public support percentage from 2019 Sci 331/3% support test—2020. If the organ	nedule A, Part	II, line 14 .		[15	
16a	box and stop here. The organization qua	ization did not ilifies as a nubl	icly supported	organization	14 III 14 IS 50	5 73 76 OF THOIE,	•
h	331/3% support test—2019. If the organi	imes as a publ ization did not	check a box o	n line 13 or 16	a and line 15	is 331/3% or me	ore, check
b	this box and stop here . The organization	qualifies as a	oublicly suppo	rted organizati	on		▶ 🗖
170	10%-facts-and-circumstances test—2						
174	10% or more, and if the organization m	neets the facts	-and-circumst	ances test, che	eck this box a	nd stop here.	Explain in
	Part VI how the organization meets the	facts-and-circ	umstances tes	st. The organiz	ation qualifies	as a publicly	supported
	organization						🕨 🗌
· b	10%-facts-and-circumstances test-2	019. If the ora	anization did r	not check a bo	x on line 13, 1	6a, 16b, or 17	a, and line
-	15 is 10% or more, and if the organization	on meets the fa	acts-and-circui	mstances test,	check this bo	x and stop ne	re. Explain
	in Part VI how the organization meets th	e facts-and-cir	cumstances to	est. The organi	zation qualifies	s as a publicly	supported
	organization						> [_]
18	Private foundation. If the organization	did not check	a box on line	e 13, 16a, 16b	, 17a, or 17b,	, check this bo	x and see
	instructions	<u> </u>		<u> </u>	· · · · ·		
					Scl	hedule A (Form 99	0 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

Part	Support Schedule for Organiza	tions Descri	bed in Secti	on 509(a)(2)			
	(Complete only if you checked th	ne box on line	10 of Part I	or if the organ	nization failed	to qualify un	der Part II.
	If the organization fails to qualify	under the tes	sts listed belo	ow, please co	mplete Part I	l.)	
Secti	on A. Public Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees	1		4	1	<i>y</i>	1
2	received (Do not include any "unusual grants.") Gross receipts from admissions, merchandise	(D		Ψ		\bigcirc	
2	sold or services performed, or facilities	•	(i (i	\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	/ 4	Γ
	furnished in any activity that is related to the		-				
3	organization's tax-exempt purpose Gross receipts from activities that are not an					/	
•	unrelated trade or business under section 513			{		[
4	Tax revenues levied for the						
4	organization's benefit and either paid to					ļ	
	or expended on its behalf			,		1	
=	The value of services or facilities				/		
5	furnished by a governmental unit to the					Ì	
	organization without charge				J	J	
6		4	*	/			
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3	Ф	Ψ	/ 4		φ	$-\varphi$
10	received from disqualified persons .			ĺ '	``	•	,
b	Amounts included on lines 2 and 3						
Б	received from other than disqualified				j	j	
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year			}	1	ł	
С	Add lines 7a and 7b		/				
8	Public support. (Subtract line 7c from	E 10 10 10 10 10 10 10 10 10 10 10 10 10	er legge gregori	4,2	أه الإ أم والعتي سن	4	
_	line 6.)				1	ا المقاري الد	
Secti	on B. Total Support		44 44 ,	1	44.1. 48.1		·
	dar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	7 6	6	4	A	8	<u></u>
10a	Gross income from interest, dividends,	7		+	7	7	
	payments received on securities loans, rents,					`.]	
	royalties, and income from similar sources.	Ф	Φ	Ф	ർ	ϕ	ds -
b	Unrelated business taxable income (less	1		1			7
	section 511 taxes) from businesses						
	acquired after June 30, 1975 . /			[[1	
С	Add lines 10a and 10b						······
11	Net income from unrelated business						
	activities not included in line 10b, whether			{		1	
	or not the business is regularly carned on			ļ			
12	Other income. Do not/include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI ₂) ¹						
13	Total support. (Ádd lines 9, 10c, 11,						,
	and 12.)/	Φ		D	\Box		
14	First 5 years. If the Form 990 is for the		s first, second	l, third, fourt h ,	or fifth tax (ye	ar as a section	n 501(c)(3)
	organization, check this box and stop he			<u></u>		<u> </u>	▶ □
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2020 (line 8			13, column (f))		15	%
16_	Public support percentage from 2019 Sch				<u></u>	16	%
	on D. Computation of Investment In			 ,			
17	Investment income percentage for 2020 (line 10c, colun	nn (f), divided t	oy line 13, colu	mn (f))	17	%
18	Investment income percentage from 2019	Schedule A,	Part III, line 17			18	%
19a	331/3% support tests-2020. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2019. If the organiz	zation did not c	heck a box on	line 14 or line 1	19a, and line 16	is more than 3	31/3%, and
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	id not check a	box on line 14	, 19a, or 19b, o	check this box	and see instruc	ctions 🕨 🔲

Part IV	Supporting Organ	
	Simporting Organ	1 7 24: 202
	Subborting Organi	IZALIUNS

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		~.
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
þ	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Party, answer lines 4b and 4c below.	4a		
þ	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? X "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	_ 5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	 9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	_	-
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a	-	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10h	-	

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		建設	
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	19:11	7.75	
L		11a	-	
b	A family member of a person described in line 11a above? A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	11b	भार सहित्र हैं	
C	detail in Part VI.	建盟 11c		THE.
Secti	on B. Type I Supporting Organizations	1110		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		TANK.	14 7 12 15 14 7 15 16 7 16 7 15 16 7 15 16 7 15 16 7 15 16 7 15 16 7 16 16 7 16 16 7 16 1
	more supported prganizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	3. 3.	5.15. 5.15.4	
	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 officers directors, or trustees were allocated among the	4 300		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	0.5.5.8	112N A	29 K 1270
2	Did the organization operate for the benefit of any supported organization other than the supported		CHALL	
	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,	377,730		
	supervised, or controlled the supporting organization.	2	শিব 🕻 📆	134.00
Secti	on C. Type II Supporting Organizations	2		
<u> </u>	on or type in cupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the lax year also a majority of the directors	洗湖		94.5.3
	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			237
	the supported organization(s).	1		<u></u>
Secti	on D. All Type III Supporting Organizations			
		January de	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			是整理
	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?	1334	an a	-A IR SECO
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	14 × 30	-1150	- FT-55-24
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	etain	(43%, 23st
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have	CATA!	7 75 1 C 8	10.00
	a significant voice in the organization's investment policies and in directing the use of the organization's			1200
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			養養
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instruc	ction	s).
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	/000 in	otruo	tional
с 2	Activities Test. Answer lines 2a and 2b below.	1266 111		No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		S 355	/258mg/
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		× 1	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			411
	how the organization was responsive to those supported organizations, and how the organization determined		通常	
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			1.12
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			THE PERSON NAMED IN
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .	3a	- 75. 50.	Yang da St.
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.			计图
	- oras sudooned organizations (al. test. describe in Fart VI the fole diaved by the organization in this fedard.	1 3h		1

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Or	rga	ni	zation	s	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir instructions. All other Type III non-functionally integrated supporting organization.					
Sect	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	-V	Б	$\overline{}$		
8	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)	\int_{0}^{∞}	6			
7	Other expenses (see instructions)	Π	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	1	8	-1		,
Sect	ion B-Minimum Asset Amount			<i>\</i>	A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	調金が				
a	Average monthly value of securities	1	а			
b	Average monthly cash balances		b			
<u>c</u>			عا		ļ	
<u>d</u>	Total (add lines 1a, 1b, and 1c)	1	d			
е	Discount claimed for blockage or other factors (explain in detail in Part VI).	特殊等	设践			
2	Acquisition indebtedness applicable to non-exempt-use assets	;	2		<u> </u>	
3	Subtract line 2 from line 1d.	_ :	3		4	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount see instructions).		4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)		5			
6	Multiply line 5 by 0.035.		6			<u> </u>
_7	Recoveries of prior-year distributions		7			<u> </u>
8	Minimum Asset Amount (add line 7 to line 6)	;	8	201 1 211 1 22		<u> </u>
Sect	tion C—Distributable Amount					Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)		1			
2	Enter 0.85 of line 1.		2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)		3	到的關		
4	Enter greater of line 2 or line 3.				列於都科的	
5	Income tax imposed in prior year		5_			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		_			
7	emergency temporary reduction (see instructions). Check here if the current year is the organization's first as a non-function.		6	A	ENDING OF SECTION	
	I I I 'hack hara it the current year is the organization's first as a non-functio	าทลแ	IV I	integrati	ea ivoe ili subbort	ing organization

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued	<u>a) </u>	
Secti	on D—Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish			1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	orted		
	organizations, in excess of income from activity			.2	· <u>-</u> · · <u>-</u> -
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	-provide details in Part	VI)	5	
	Other distributions (describe in Part VI). See instructions.	· · · · · · · · · · · · · · · · · · ·		6	
_ 7 8	Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to whice	h the organization is ros	Donewa	7	
•	(provide details in Part VI). See instructions.	in the organization is res	porisive		
9	Distributable amount for 2020 from Section C, line 6			8	
10				9	
-10	Line 8 amount divided by line 9 amount			10	
Secti	on E-Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ıs	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		學的學科學的學學	鄉	
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required—explain in Part VI). See instructions.				
ŝ	Excess distributions carryover, if any to 2020				
а	From 2015			25.3	TANK TENENT TENENT TO THE TENE
b	From 2016			179	
С	From 2017				
d	From 2018	Programme and the same beginning		443	
e	From 2019	是一种人的一种人的一种		ATTEN A	
f	Total of lines 3a through 3e			Ľ.C	
g	Applied to underdistributions of prior years		THE WAS PROPERTY OF THE PROPERTY OF THE PARTY OF THE PART	70	TO THE PERSON OF
h	Applied to 2020 distributable amount	T0 T	WANT TO LINE WELL	100	Charles of a Descent of November of the Co.
<u>;;</u>	Carryover from 2015 not applied (see instructions)	Sould by Atlanta Analysis and Analysis		222	CHARLEST CONTRACTOR
- i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			LE NOT	
4	Distributions for 2020 from	SPACE PROPERTY OF	132240HH (13436H)	PHE	THE STATE OF THE S
•	Section D, line 7:			建设	
a	Applied to underdistributions of prior years		- 71 y indica in in Sir - 1 cal species	20.5-4	
<u>ь</u>	Applied to 2020 distributable amount	A THE WAY TO SEE A SECOND TO S	HOLD TO AN AND THE		C 2 4 12 20 4 20 1 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Remainder. Subtract lines 4a and 4b from line 4.	F SARLY CONTRACTOR AND		73.	
<u>-</u> _	Remaining underdistributions for years prior to 2020, if	AND PROCESSION OF THE PORT		,,,,,,	With the state of
9	any. Subtract lines 3g and 4a from line 2. For result			ĺ	
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h			34 S	١
•	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
-	and 4c.				不可以不可以不可以不可以不可以不可以不可以不可以不可以不可以不可以不可以不可以不
8	Breakdown of line 7:			77 1911	
_ _	Excess from 2016	A TOTAL PROPERTY.	The management of the second		二十二十五十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
<u>b</u>	Excess from 2017				
	Excess from 2018			ř.	被公司是李何点的有限的强烈性
d	Excess from 2019		RANGE EX	i S	是是是一个
e _	Excess from 2020			age.	

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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