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)

2018

OMB No. 1545-1150

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Internal Revenue Service GG to www.irs.gov/Pormasue2 for instructions and the latest information.						
			ar year, or tax year beginning	, 2018, and ending		, 20
B (Check if a	pplicable:	C Name of organization 2		D Employer id	entification number
	Address o	hange	POSADA GUADALUPE		(00288520
	Name cha	auĝa	Number and street (or P.O. box. If mail is not delivered to street address)	Room/suite	E Telephone n	umbar
=	initial rolu		PO BOX 5712		21	0-218-2882
7=	Amended	m/ternylnated	City or town, state or province, country, and ZIP or foreign postal code	~~	F Group Exe	mption
=	Applicatio		SAN ANTONIO, TX 78201	しろ	Number I	· · · · · · · · · · · · · · · · · · ·
		ting Method:	✓ Cash Accrual Other (specify) ►	н	Check ▶ 🗍	if the organization is not
	Nebsite	-				ach Schedule B
			eck only one) — ☐ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 494	17(a)(1) or 527		0-EZ, or 990-PF).
_				Other		
			7b to line 9 to determine gross receipts. If gross receipts are \$200		assets	- ,
			\$500,000 or more, file Form 990 instead of Form 990-EZ		> e	
	art I		e, Expenses, and Changes in Net Assets or Fund-	Ralaneas (see the	instructions	for Part I)
	ลาเ		the organization used Schedule O to respond to any qu			sior raitiy aa
	1 4			search this rists to do no		62 104
24 13	1		ons, gifts, grants, and similar amounts received	ထ္ကု		53,196
?		_		8 NOV 22 2	019 : (2)	
7.	3		ip dues and assessments	M	33 3	
ť	4	Investmen	1	SOUTH		
	5a		ount from sale of assets other than inventory	39 JULIV.		
	D		or other basis and sales expenses			
	C	•	ss) from sale of assets other than inventory (Subtract line 5	b from line 5a)	5c	·
)	6	_	nd fundraising events:			
<u></u>	a	\$15,000) .	ome from gaming (attach Schedule G if greater than	1 6a		
	b		me from fundraising events (not including \$	of contribution	is E	
ノモ	ł		alsing events reported on line 1) (attach Schedule G if the	1)	- -	
			ch gross income and contributions exceeds \$15,000)	6b		
	C		t expenses from gaming and fundraising events	6c		
	d		e or (loss) from gaming and fundraising events (add lines	s 6a and 6b and sul		
	ł	line 6c) .			· · 6d	
	7a		s of inventory, less returns and allowances	7a		
	b		of goods sold	7b		
3	C	-	it or (loss) from sales of inventory (Subtract line 7b from line	e7a)	· · 7c	
	8		nue (describe in Schedule O) , .		8	· · · · · · · · · · · · · · · · · · ·
<u> </u>	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<u> </u>	. ▶ 9	53,196
, 1	10		d similar amounts paid (list in Schedule O)		10	
•	11	Benefits pa	aid to or for members		. 11	
9	12		ther compensation, and employee benefits 🌃 🗼		12	
Expenses	13		al fees and other payments to independent contractors 🔯		13	9,307
<u>\$</u>	14		y, rent, utilities, and maintenance		14	38,849
ũ	15	• •	ublications, postage, and shipping		15	
	16		enses (describe in Schedule O) 🚾		16	
:	17		enses. Add lines 10 through 16		. ▶ 17	48,156
9	18	Excess or	(deficit) for the year (Subtract line 17 from line 9)		18	5,040
7 5	19		or fund balances at beginning of year (from line 27, colu			
Ž		end-of-yea	ar figure reported on prior year's return}		19	238,788
Net Assets	20	Other char	nges in net assets or fund balances (explain in Schedule O)		20	
Z	21_	Net assets	or fund balances at end of year. Combine lines 18 through	20	. > 21	243,828
For	Paper	work Reduct	tion Act Notice, see the separate instructions.	Cat. No. 10642I		Form 990-EZ (2015)

Fo	rm 990	D-EZ (2018)							Page 2
7° [Part		ce Sheets (see th						
_		Check	If the organization	used Schedule	O to respond to a	ny question in this		<u> </u>	<u> </u>
							(A) Beginning of year		(B) End of year
_		-	s, and investments				90,970	22	96,010
2			ildings				147,818	23	147,818
_			(describe in Sched	•				24	
2			3 .				238,788	25	243,828
			ies (describe in Sch	•				26	
			or fund balances (li				238,788	27	243,828
e P	'art l		nent of Program S						_
-			if the organization		O to respond to a	ny question in this	Part III 🗆	/D	Expenses
W	'hat is	the organiza	ation's primary exen	npt purpose?					rired for section (3) and 501(c)(4)
as	mea	asured by ex	ization's program so openses. In a clear and other relevant in	and concise m	anner, describe the	f its three largest pe services provide	program services, d, the number of	organ	izations; optional for i.)
2 2	28								
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				***************************************	# F = 4 = 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		
	7 (G	Frants \$) It this amount	includes foreign gra	ints, check here .	▶ 🗖	28a	
2	:9 _								
						, , , , , , , , , , , , , , , , , , ,	<i></i>	l i	
	(G	Frants \$) If this amount	includes foreign gra	ints, check here .	▶ 🗇	29a	
3	ю —								
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			h	**************************************		
		v	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· • • • • • • • • • • • • • • • • • • •		***********	**************		
	(G	Grants \$) If this amount	includes foreign gra	ints, check here .	▶ 🗀	30a	
. 3	n Ō	ther program	services (describe	in Schedule O)					
	(G	arants \$) If this amount	includes foreign gra	ints, check here	<u>. ▶ □</u>	31a	
_3	12 To		n service expenses					32	
Р	art l'		Officers, Directors, T					nstruc	tions for Part IV)
_		Check	if the organization	used Schedule	O to respond to a			<u> </u>	<u> 0</u>
		?	(a) Name and title		(b) Average hours per week devoted to position	(c) Reportable 2: compensation (Forms W-2/1099-MIS) (if not paid, enter -0-	contributions to employ benefit plans, and	ot	stimated amount of her compensation
			***************************************	- 1020 75 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8					
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	D-EZ (2018)	\mathcal{I}	<u> </u>		age 3
Part	Other Information (Note the Schedule A and personal benefit contract statement requirer instructions for Part V.) Check if the organization used Schedule O to respond to any question in the contract statement requirer instructions for Part V.)	nents	in th	е	
	instructions for Part 4.) Creek if the organization used Schedule O to respond to any question	n triis		v Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provided the	ie a	\Box	163	140
••	detailed description of each activity in Schedule O	•	33		~
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformation of the amended documents if they reflect a change to the organization's name. Otherwise, explain change on Schedule O. See instructions				
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from busin		34		-1/
	activitles (such as those reported on lines 2, 6a, and 7a, among others)?		35a		~
c p	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedul Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) not	ice,	35b		/
36	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net as:		35c		
	during the year? If "Yes," complete applicable parts of Schedule N , , , , , .	•	36		/
37 <i>a</i>	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a				
	Did the organization file Form 1120-POL for this year?		37b	•	7
38 <i>a</i>	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or vany such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	/ere			
ь	If "Yes." complete Schedule L, Part II and enter the total amount involved	•	38a	مطنعم	
39	Section 501(c)(7) organizations. Enter:				
A	Initiation fees and capital contributions included on line 9			-	
þ	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 4912 ▶; section 4955 ▶				
þ	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part	/ear	40ь		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed				
	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization				
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax she transaction? If "Yes," complete Form 8886-T	iter	40e		<u>/</u>
41 420	List the states with which a copy of this return is filed >				
42 ø	The organization's books are in care of ► Telephone no. ► Located at ► ZIP + 4 ►				
Þ	At any time during the calendar year, did the organization have an interest in or a signature or other authority of a financial account in a foreign country (such as a bank account, securities account, or other financial account) If "Yes," enter the name of the foreign country		42b	Yes	No V
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank Financial Accounts (FBAR).	and			
C	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		~
13	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	· ·	ا .	No No
14a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must completed instead of Form 990-EZ	be	449	Yes	7
Þ	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must completed instead of Form 990-EZ	•	44b		\ \
d	Did the organization receive any payments for indoor tanning services during the year?		44c 44d		7
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		45a		~
þ	Did the organization receive any payment from or engage in any transaction with a controlled entity within meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead	d of			
	Form 990-EZ. See instructions	•	45b		/

Form 990	0-EZ (2018)						P	age 4
46	Did the organization engage, directly or to candidates for public office? If "Yes,"	indirectly, in political c	ampaign activities on	behalf of o	or in oppositi	on 46	Yes	No V
Part \	Section 501(c)(3) Organization All section 501(c)(3) organization 50 and 51. Check if the organization used So	ns must answer que			•			es .
	Check if the organization used St	mediale O to respond	no any question in ti	nis Part VI	<u> </u>		Yes	No.
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Pa	activities or have a s	section 501(h) electio		during the t	ax 47	133	<u> </u>
48	12 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							ン
	Did the organization make any transfers					49a		ヹ
50	If "Yes," was the related organization a s Complete this table for the organization's employees) who each received more tha	s five highest compen	sated employees (oth	er than offic	cers, directo			ikey
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Healti contributions benefit plans	n benefits,	(e) Estimate	nd amou	
								<u>.</u>
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4		۱.				
51	Total number of other employees paid or Complete this table for the organization \$100.000 of compensation from the org	n's five highest comp	ensated independent	contractor	s who each	received	more	than
	(a) Name and business address of each indepen	ident contractor	(b) Type of serv	ice	(c)	Compensati	on	
								<u></u>
						·		
52	Total number of other independent control Did the organization complete Sched completed Schedule A	_	ection 501(c)(3) organ	nizations r		a ▶∐ Yes		—— lo
Under pe	enalties of perjury, I declare that I have examined this rect, and complete. Declaration of preparer (other that	return, including accompanion officer) is based on all info	rying schedules and stateme exmation of which preparer h	ents, and to the	e best of my kno	owledge and	belief,	lt 1s
Sign	Signature of officer			. Da	1/15/19	7		<u> </u>
Here	Phillip Giley Type of print name and title	PRSSIDGE	<u>-T</u>					
Paid	Print/Type preparer's name	Preparer's algnature	Da 11	114/19	Check 🗹 self-amploy		146047	/8
Prepa Use (Doly Firm's name PRUDY SERRATA	1010		Fir	m's EIN ▶			
	Firm's address ► 16631 VANCE JACK			Ph	one no.	210-279		<u></u>
may th	e IRS discuss this return with the prepare	a suomi adove, des	mstructions			Yes	<u></u>	10

'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 4847(a)(1) nonexampt charitable trust.

• Attach to Form 990 or Form 990-F7.

► Attach to Form 990 or Form 990-EZ.

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

2018

OMR No. 1545-0047

Open to Public Inspection

Employer identification number

POSADA GUADALUPE 80-0288520 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(I). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state; An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/2% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331a% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). 00) EIN (iii) Type of organization (i) Name of supported organization (Iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes (A) (B) (C) (D) (E)

Total

Schedule A (Form 990 or 990-EZ)	2018
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rait	(Complete only if you checked th	a hox on line	a 5 7 or 8 of	Dart Lor if th	ny(M)(IV) and A omenizatio	r foiled to ou	n)
	Part III. If the organization fails to	auslify und	e 5, 7, 01 6 01 er the tests lis	raiti Urii (i) A waled hele	e organizatio lease comole	m laneu lo qu sta Part III \	amy urider
Section	on A. Public Support	quality und	<u> </u>	sted below, p	lease comple	ete rait iii.)	
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and		1 1 2 3 3 3	10720.5	<u> </u>	35,25.6	1
	membership fees received. (Do not			1		/	ļ
	include any "unusual grants.")			İ			
2	Tax revenues levied for the	_					
	organization's benefit and either paid		ł	\	ŀ	/	1
	to or expended on its behalf			ļ	L	<u> </u>	
3	The value of services or facilities			1		1	}
	furnished by a governmental unit to the organization without charge		i	1			
4	· · · · · · · · · · · · · · · · · · ·					ļ.—.	
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a governmental unit or publicly						I
	supported organization) included on						1
	line 1 that exceeds 2% of the amount					# 고등 필요합니다 하는 프로필요한	
	shown on line 11, column (f)			l			
6	Public support. Subtract line 5 from line 4	e di same e la composition de la composition del					L
	on B. Total Support	(=) 0044	(h) 004£	(-) 004 <i>C</i>	40.0047	(-) 0040	107.4-1
Celen	dar year (or fiscal year beginning in)	(a) 2014	(b) 20,15	(c) 2016	(d) 2017	(e) 2018	(f) Total
8	Gross income from interest, dividends,		-/-\	 		 	
U	payments received on securities loans,		/ \		Ì		
	rents, royalties, and income from		<u>/</u>	N			
	similar sources		1				
9	Net income from unrelated business						
	activities, whether or not the business				}	Ī	1
44	is regularly carried on			<u> </u>	ļ 		
10	Other Income. Do not include gain or loss from the sale of capital assets			\ \			
	(Explain in Part VI.)		İ	`			1
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities etc.	(see instructi	ons)		. \	12	
13	First five years. If the Form 990 is for the	e organization	n's first, secon	d, third, fourth	, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop her	e	· · · · ·		<u></u>		▶ □
	on C. Computation of Public Support						
14	Public support percentage for 2018 (line 6			• • • • • • • • • • • • • • • • • • • •		14	<u>%</u>
15 16a	Public support percentage from 2017 Sch 331/2% support test—2018. If the organization					15	chack this
,,,,	box and stop here. The organization qual						•
b	331/s% support test - 2017. If the organiz			-			
	this box and stop here. The organization						▶ 🗆
17a	10%-facts-and-circumstances test-20						
	10% or more, and if the organization me						
	Part VI how the organization meets the "I	acts-and-circ	umstances" te	est. The organi	zation qualifies	s as a publicly	supported
	organization		• • .• • •	• • • • •		/	; • • ▶ □
b	10%-facts and-circumstances test—20						
	15 is 10% or more, and if the organization of Explain in Part VI how the organization of						
	supported organization	eca nie iac		a.a.,			s a publicly
18	Private foundation. If the organization did	d not check a	box on line 13	i, 16a, 16b, 17a	a, or 17b, chec	k this box and	
	instructions		<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>		· · · ·	🟲 🗆
	/				Sc	hedule A (Form 9	90 or 990-EZ) 2018

Gifts, grants, deutributions, and membership fees received. (Do not helpide any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity, that is related to the organization's tax-exemipurpose. Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge. Total. Add lines 1 through 5	Part							
Saction A. Públic Support Cleandary var (R Tacal year baginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) 1 Gills, grants coghibutions, and membership fees received for on-fleptical symmetry of the construction of the construction of the construction of the construction of the construction is transcription, or facilities furnished in any activity, that is related to the organization is transcription, or facilities furnished in any activity, that is related to the organization is transcription of the construction is transcription. Or activities and unrelated trade or business higher section 513 4 Tax revenues levided for the organization is transcription in the conganization without charge . 5 The value of services or facilities furnished by a governmental unit to the organization without charge . 6 Total. Add lines 1 through 5 . 7a Amounts included on lines 1, 2, and 3 received from disqualified persons . b Announts included on lines 1, 2, and 3 received from disqualified persons and received from disqualified persons . b Announts included on lines 1, 2, and 3 received from fine 61 in the year of Add lines 7 and 7 b . 8 Public support, (Subtract line 7 from line 6) . 10e Gross income from interest, dividends, persons from interest, dividends, persons from interest, dividends, persons from interest and the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of								under Pai
1 Gits, grants, beightwittens, and memberating tess received. (Do not highcide any unusual grants	Secti		47,437, 110,10	0.0 10.00 00.	ow, pieddo o	ompioto i art	11.1	
received. (Do not Republe sary runusual grafts - 1 Gross receipts from Againstons, merchandises add or services berformed, or facilities furnished in any activity, that is related to the organization's tax-asem/purpose . Gross receipts from activity that related to the organization's benefit and elithing had are not an unrelated trade or business wider section 513 Tax received brown discussified persons or facilities furnished by a governmental unit to the organization without charge . Total. Add lines 1 through 5 . Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 31 or line year c Add lines 7a and 7b . Public support. (Subhact line 7c from lines 6). Section B. Total Support Calendar year (or fiscal year beginning in) P 9 Amounts from line 6 . Gross income from Interest, dividends, payments received on securities losms, rents, rysilles, and income from similar sources . b Unrelated business taxable income fleas section 511 taxes from businesses accluded after June 30, 1975 . c Add lines 10a and 10b . 12 Other income. Do not includig gain or loss from the sale of capital assets (Explain in Part VI) . 13 Total support. (Add lines 9, 10c, 11, and 12). 15 Public support percentage from 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 50 organization, checlythis box and stop here. Section C. Computation of Public Support Percentage 16 Public support percentage from 2017 Scheduke A. Part III, line 17 . 18 Investigation from the percentage from 2017 Scheduke A. Part III, line 17 . 19 Savigation compensation of three strength from the stop of the support percentage from 2017 Scheduke A. Part III, line 17 . 18 Investigation from the percentage from 2017 Scheduke A. Part III, line 17 . 19 Savigation and the support feet and savigation of the check the box on line 14, and line 15 is more than 33/3%, a specific from 2017 Scheduke A. Part III, line 17 . 19 Savigation and the savigatio	Calen		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	/ (1) To
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Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	14	First five years. If the Form 990 is for the	e organization	n's first, secon	id, third, fourth	, or fifth tax ye	ear as a sect	ion 501(c)
Public support percentage for 2018 (line 8, column (f), divided by line 13. column (f))	Section	on C. Computation of Public Suppor	t Percenten	 e	<u> </u>	• • • • •	···/··	• • •
Public support percentage from 2017 Schedule A, Part III, line 15					13. column #1\		15	
Investment income percentage for 2018 (line 10c. column (f), divided by line 13, column (f))								
Investment income percentage from 2017 Schedule A, Part III, line 17								$\overline{\zeta}$
19a 33'a% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33'a%, at 17 is not more than 33'a%, check this box and stop here. The organization qualifles as a publicly supported organization b 33'a% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33'a!					-			
17 is not more than 331/2%, check this box and stop here. The organization qualifies as a publicly supported organization b 331/2% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/2!								ngk and i
b 3312% support tests-2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33121	198							
	b	33/5% support tests-2017. If the organiz	zation did not d	check a box on	line 14 or line	19a, and line 10	B is more than	n 331/s % , a
yine 18 is not more than 33'3%, check this box and stop here. The organization qualifies as a publicly supported organization did not check a box on line 14, 19a, or 19b, check this box and see instruction	_							

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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?
- c 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 filling organization's supported organizations? If "Yes," provide detail in Part VI.
- 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).
- 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- 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.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - 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.)

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Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			110
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	14.7		1.
	below, the governing body of a supported organization?	118		
ь	A family member of a person described in (a) above?	11b	 	┼
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	 	┼─
Section	on B. Type I Supporting Organizations	1116	<u> </u>	Ь
			Van	No
· 1	Did the directors, trustees, or membership of one or more supported organizations have the power to	(1111)	108	140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			j
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		i	
2	Did the argentation energie for the benefit of any symposical accordance when they are	1		
~	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,			
	supervised, or controlled the supporting organization.			
Canti		<u></u>		<u> </u>
Secu	on C. Type II Supporting Organizations			
		7 - 1	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	1		
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1	
	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			
	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		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's			li .
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.			
Saction	on E. Type III Functionally Integrated Supporting Organizations	3		<u>.</u>
				
1_	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s).
a	The organization satisfied the Activities Test. Complete line 2 below.			
þ	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	800 in		
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	10		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		10.2	<u>.</u>
	those supported organizations and explain how these activities directly furthered their exempt purposes,		F 7	ļ ,
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			e e
		1.0		
8	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2-		
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	61.		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1	<u> </u>

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Schedule A	(Form 99	Q or 990-E	:Z) 2018

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.	tru izat	st on Nov. 20, 1970 (expla ions must complete Section	in in Part VI). See ons A through E.
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or	Г		
collection of gross income or for management, conservation, or		<u>'</u>	
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	F]
instructions for short tax year or assets held for part of year):			1
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	!		
factors (explain in detail in Part VI):			
2 Acquisition Indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see Instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	7		
7 Recoveries of prior-year distributions	8		
8 Minimum Asset Amount (add line 7 to line 6) Section C-Distributable Amount	10		Current Year
	,		
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	<u></u>	
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		<u> </u>
5 Income tax imposed in prior year	5	تسالف والمسالم	<u></u>
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	ly in	tegrated Type III supportin	g organization (see

Part	Type III Non-Functionally Integrated 509(a)	Supporting Organi	zations (continued)	
Section D—Distributions			Current Year	
1_	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers ex organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt pur	poses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to white (provide details in Part VI). See instructions.	ch the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E-Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
_ 1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
ь	From 2014			
C	From 2015			
d	From 2016		<u> </u>	
	From 2017		<u>Elizab</u>	
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
	Carryover from 2013 not applied (see Instructions)			
i_	Remainder. Subtract lines 3g. 3h, and 3i from 3f.	<u></u>		
4	Distributions for 2018 from Section D, line 7:			
<u>a</u>	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.	ا المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية		
8	Breakdown of line 7:	55		La con
8	Excess from 2014			
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017		ن آب د د د د د د د د د د د د د د د د د د	
	Excess from 2018		50 3	

Schedule A (Form 990 or 990-EZ) 2018			
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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