## Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047 2020

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ 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.

Open to Public Inspection

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Α	For the	2020 calendar ye	ear, or tax year beginn	ing	10-	-01 , <b>2020</b> , a	and endi	ng	0	9-30 , 20 21
В	Check if a	applicable:	C Name of organization MOUNTAIN CIRCUIT CASA, INC D Employee							
	Address c	change	Doing business as							20-1194112
	Name cha	ange	Number and street (or P.O. box if mail is not delivered to street address)  Room/suite							hone number
	Initial retu	-	11 N SAGE ST							(706) 886-1098
一		rn/terminated		rince, country, and ZIP or fore	ign postal code				<b>G</b> Gros	s receipts
$\overline{\Box}$	Amended	2200 000 000 000 000 000 000 000	TOCCOA, GA 305		.g., p				s	490,183
$\overline{}$		n pending	F Name and address of prin					H(a) is this a	amun return	for subordinates? Yes X No
	фриодио	n penang	Trans and address or pri	ioipai omoor.				H(b) Are all		
	Tavasvann	pt status: X 501(	(c)(3) 501(c) (	) ◀ (insert no.)	1947(a)(1) or	527				st. See instructions
	Tax-exemp	N/A	(0)(3) 301(0) (	) (insertino.)	1947(a)(1) 01	327		H(c) Group		
			poration Trust Ass	ociation Other		L Year of formation	on: 200			
-	Form of organization: Corporation Trust Association Other L Year of formation: 2004 M State of legal domicile: GA  art I Summary									
			he organization's mission	n or most significant as	rtivities: TO	DDOUTDE C	CDEEN	TO MOAT	MED A	ND SUPERVISED
	1 .		-						NED A	ND SOPERVISED
Activities & Governance		COMMUNITY	OLUNTEERS TO B	E ADVOCATES FOR	R CHILDREN	IN THE CO	URI SI	SIEM		
nar										
Ver	2	Chack this hav	if the organization	discontinued its approx	ione or disposed a	of more than 25	0/ of ite	not accets		
တ္			members of the govern			of more than 25	70 OI IIS I	ici asscis.	. 3	10
∞ర								~11	4	12
ties			endent voting members				- TE	D /.	5	12
Ž			ndividuals employed in			@ ((	$\mathcal{I}$	U		66_
Act			olunteers (estimate if n				9		6	
	1		usiness revenue from P						7a	0
	b	Net unrelated bus	siness taxable income f	rom Form 990-1, Part I,	line 11				.   7b	0
								Prior Year		Current Year
Ф	1		d grants (Part VIII, line 1		• • • • • • • •			414	,750	455,855
'n			revenue (Part VIII, line)							0
Revenue			estment income (Part VIII, column (A), lines 3, 4, and 7d)							2,113
ď		,	, ,			22,458				
			dd lines 8 through 11 (m						,211	480,426
			ar amounts paid (Part IX				• —	1	,035	780
			r for members (Part IX,				•			0
S			empensation, employee					352	,521	320,622
Expenses			Iraising fees (Part IX, co				•			0
cbe			expenses (Part IX, colu			927	3 3		0° 19	
ш			(Part IX, column (A), line	300			•		,720	52,718
		to be the second of the second	Add lines 13-17 (must e		A), line 25)		·		,276	374,120
		Revenue less exp	penses. Subtract line 1	8 from line 12		<del></del>	•	7	,935	106,306
Net Assets or	2						Begin	ning of Curre		End of Year
sets	20	Total assets (Part	N Maria Pro Company						,261	356,402
t A	21	Total liabilities (Pa							,155	991
			d balances. Subtract lin	ne 21 from line 20			·	249	,106	355,411
	rt II	Signature I						1 11 2	C 11 1-	
			hat I have examined this return on of preparer (other than office				r my knowie	eage and belie	T, It IS	, ,
				no M	11/1	7				1/19/2020
Sig	n		MITCHELL	Whose 4/	(where				Da	111/2000
-		Signature of o							Da	te) /
Her	re			CUTIVE DIRECTOR	R					
		Type or print r		Dear Andreise		To-/-				DTIN
D-:	<b>ا</b>	Print/Type preparer		Preparer's signature		Date		Check	X if	PTIN
Pai		JACK GREEN		Just 1. The	e y	01-19-20		self-em	ployed	P00151501
	parer		JACK GRE		-U		Fi	m's EIN		
USE	Only	Firm's address	ро вох 3		-		PI	none no.		
			TOCCOA G						706-	886-7143
May	the IRS	discuss this return	n with the preparer sho	wn above? (see instruc	tions)					X Yes No

O) MOUNTAIN CIRCUIT CASA, INC Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		1	
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		X
3	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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	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	_		
7	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		**
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			Х
O	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
J	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	9		x
10	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	10		х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	х	
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	11b		X
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	11c		X
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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	120		
L	Schedule D, Parts XI and XII	12a	Х	
D	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	12b		37
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	-		- 11
-	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	14b		х
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	15		Х
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	16		X
17	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	17		X
18	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	18	Х	
19	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	19		<u>X</u>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	NO
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
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		х
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			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	256		
26	If "Yes," complete Schedule L, Part I	25b		X
20	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		x
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		х
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):			1994
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-200002888		
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
C	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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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			
• •	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,	34		
35a	or IV, and Part V, line 1	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	33a		X
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			Λ_
	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
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	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			Ш
	$\mathbf{I}=\mathbf{I}$		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	10	v	

Form 990 (2020) MOUNTAIN CIRCUIT CASA, INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		- 4	
	Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			1.0
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	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)?	4a		x
	If "Yes," enter the name of the foreign country	75		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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?	6a		х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
	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?	7a	8 - 3 - 3 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5	х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		х
	If "Yes," indicate the number of Forms 8282 filed during the year		0, 40	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	х	
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • • • • • • • • • • • • •	7h		х
	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?	8		x
	Sponsoring organizations maintaining donor advised funds.	5 5		- T
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		х
	Section 501(c)(7) organizations. Enter:	10.1		
	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	4.3		
	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		15. 1	
	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		MARKET MESSELFAN
	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.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b I	Enter the amount of reserves the organization is required to maintain by the states in which			
1	the organization is licensed to issue qualified health plans		100	
c I	Enter the amount of reserves on hand			Ħ.
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b i	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
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
1	If "Yes," see instructions and file Form 4720, Schedule N.	1		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			

20-1194112

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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	tion 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			7.4
	If there are material differences in voting rights among members of the governing body, or		1.7	
	if the governing body delegated broad authority to an executive committee or similar			4.7
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			4.5
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	4.1		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	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	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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	Х	
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	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	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?		9	
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	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		X
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		18.0	4 5
C	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Georgia			
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.			
	Own website Another's website Upon request 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,			
00	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			

MELISSA MITCHELL (706)886-1098, 11 N SAGE ST, TOCCOA, GA 30577

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Form 990 (2020)

MOUNTAIN CIRCUIT CASA, INC

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

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

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.

Check this box if neither the organization nor any relate	d organizatio	n comp	ens	ated	any	currer	nt of	ficer, director, or tru	stee.	
(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos eck m s per	son is	an both stern employee		(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) MELISSA MITCHELL EXECUTIVE DIRECTOR	40.00				x	х		60,497	0	0
(2) MISSY HATCHETT CHAIRMAN	5.00			х				0	0	0
(3) SAM JOHNSON	5.00			х				0	0	0
(4)										
(5)										
<u>(6)</u>										
<u>(7)</u>										
(8)										
<u>(9)</u>										
(10)										
(11)										
<u>(12)</u>										
(13)										
<u>(14)</u>										

Section A. Officers, Directors, Trustees	, Key Employ	ees, ar	na Hi	igne	St	ompe	nsa	ted Employees (CO	ritiriaea)	
(A) Name and title	(B) Average hours per week	officer and a director/trustee)						(D)  Reportable compensation from the	(E)  Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
<u>(15)</u>										
<u>(16)</u>										
(17)									WALLES TO SHOW THE STATE OF THE	
(18)										
(19)										
(20)										
(21)										
(22)								Ð		
(23)										
(24)										
(25)										
1b Subtotal							. 🕨			
<ul> <li>Total from continuation sheets to Part VII, Sec</li> </ul>	tion A .						. 🕨			
d Total (add lines 1b and 1c)							. >	60,497	0	0
2 Total number of individuals (including but not limit reportable compensation from the organization	ed to those list	ed abo	ve) v	who	rece	eived m	nore	than \$100,000 of		0
- ropolitable componential organization										Yes No
3 Did the organization list any former officer, director			e, or							
employee on line 1a? If "Yes," complete Schedule										3 X
4 For any individual listed on line 1a, is the sum of organization and related organizations greater than	\$150,000? If "	Yes," c	omp	lete .	Sche	edule J	for .	such		The second secon
<ul><li>individual</li></ul>										4 X
for services rendered to the organization? If "Yes,"			_			_				5 X
Section B. Independent Contractors										
1 Complete this table for your five highest compens										
compensation from the organization. Report com	pensation for t	ne cale	ndar	yea	r en	ding w	ith o		ation's tax year.	(C)
(A) Name and business addr	ess							(B)  Description of service	es	Compensation
								3		
2 Total number of independent contractors (including received more than \$100,000 of compensation from the contractors).	_		ose l		d abo	ove) w	ho			<b>计数数数</b>

Page 9

Statement of Revenue

		Check if Schedule O cor	ntains a res	ponse or no	te to any line in this	Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .		. 1a		T LALLE	が長りは異な		学生 伊生 情性 医
"	b	Membership dues				PLEASE	<b>会选业场</b>		Adda Cha
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events				Maria da	Pathan		PENTS OF ES
Gre						to Complete	上京 的复数		
fs, Aπ	d	Related organizations .					Pala Mari		SHOUTH &
ia G	е	Government grants (contri		<u>1e</u>	353,620			<b>自己生</b> 点的	E Bas Has
ns,	f	All other contributions, gifts	s, grants,				Charlet at an	等情感激光度	SPA BANKS
er S		and similar amounts not in	cluded abo	ve 1f	102,235		A. 新热块 30	History and the	TRATELET
ig #	g	Noncash contributions incl	uded in			<b>计算数数</b>	表示意识的图象		
ont		lines 1a-1f		1g	\$		Dia Mila	Part of the second	<b>《数文》</b> (1)
a C	h	Total. Add lines 1a-1f				455,855		Part at	
					Business Code			THEFTER	444744
4)	2a								
<u>)č</u>	b								
ne ne	c								
n S									
ra e	d								
Program Service Revenue	е								
P	I	All other program service re	venue .	* * * * *					
	g	Total. Add lines 2a-2f .							
	3	Investment income (including	ng dividends	s, interest, a	nd	27			
		other similar amounts) .				2,113	2,113		
	4	Income from investment of t	tax-exempt	bond proce	eds · · · ▶				
	5	Royalties							
		1000		(i) Real	(ii) Personal	1.11 化拉克多尔	<b>计算机的重要</b>		(主)(注 5周 至)
	6a	Gross rents	6a			MINISTER TO	医医囊隔皮孔		
		Less: rental expenses	6b			1140111	LEWMER	BURLERIE	
		Rental income or (loss)	6c						
		Net rental income or (loss)					a de la composición		
		, , ,							
	7a	Gross amount from	(i) S	Securities	(ii) Other	<b>于是生化和价值</b>	日本出版 Art		TEDE LIE
		sales of assets					SPEED FOR LINE		重新建筑社会
		other than inventory	7a			LIFT TAKES			
	b	Less: cost or other basis					3 4 4 5 F.A	<b>多</b> 体并让用以	自在身份工作运
Revenue		and sales expenses	7b			7 4 5 7 7 1	医电影性 顶体		
ver	С	Gain or (loss)	7c			加。長月基份因			
Re	d	Net gain or (loss)							
er		Gross income from fundrais				e service it is			BARRE.
Other		events (not including \$							
•		of contributions reported on							
		1c). See Part IV, line 18		8a	32,215	<b>对</b> 自由重要的	es profesion		
	h	Less: direct expenses				HE THEFT W			
		Commence of the comment of the comme		_	57.5.	00 450		E-W-072 (CE) 10 (CE) 2 (CE)	00.450
		Net income or (loss) from fu		vents .		22,458			22,458
	9a	Gross income from gaming							
		activities, See Part IV, line 1				Desemble	有性性性更更		
		Less: direct expenses .							
	С	Net income or (loss) from ga	aming activ	ities					
	10a	Gross sales of inventory, les	SS						
		returns and allowances .		10a		<b>计通道模拟性</b>	A A MEETING		
	b	Less: cost of goods sold		10b			15.2 (4.25)		27 4 2 7 4
		Net income or (loss) from sa							
					Business Code				
S	11a								
nor	b			)					
Miscellanous Revenue									
Sce	Q C	All other revenue							
Ē									
		Total. Add lines 11a-11d						100 ( ) The late of the late o	
	12	Total revenue. See instruction	ons			480,426	2,113	0	22,458

## Part IX Statement of Functional Expenses

Do not Include amounts reported on fines 6b, 7b, 8b, 9b, and 15b of Part VIII.  Craft and clark assistance to demestic organizations and denseting operaments. See Part IV, ine 21  Crafts and other assistance to demestic includes and other assistance to demestic includes assistance to foreign organizations, foreign proteins. See Part IV ine 12  Table 1 Benefits paid to r for members  Compensation of current offices, directors, trustees, and key employees  Compensation of current offices, directors, trustees, and key employees  Compensation of current offices, directors, trustees, and key employees  Compensation of current offices, directors, trustees, and key employees  Compensation of current offices, directors, trustees, and key employees  Compensation of current offices, directors, trustees, and key employees  Compensation of current offices, directors, trustees, and key employees  Compensation of current offices, directors, trustees, and key employees  Person plane acrusts and contributions (include section 4016(4) and 403(8)) employer contributions (include section 4016(4) and 403(8) employer contributions (incl	360	tion 501(c)(3) and 501(c)(4) organizations must complete all column Check if Schedule O contains a response or note to a				
10	Do				<del>,</del>	
1 Grants and other assistance to domestic organizations and domestic operaments. See Part   V inn ≥ 1 2 Grants and other assistance to domestic individuals. See Part   V inn ≥ 1 3 Grants and other assistance to domestic individuals. See Part   V inn ≥ 1 4 Benefits paid to or for members 4 Demention of current officers, directors, trustees, and key employees 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of current officers, directors, trustees, and key employees 8 Compensation of current officers, directors, trustees, and key employees 9 Compensation accruits and contributions (include section 401(k) and 403(k) employer contributions) 9 Person of paid accruits and contributions (include section 401(k) and 403(k) employer contributions) 9 Cliffer employee benefits 9 Person plant accruats and contributions (include section 401(k) and 403(k) employer contributions) 9 Cliffer employee benefits 10 Payroll taxes 10 P		The state of the s		Program service	Management and	Fundraising
and domestic governments. See Part IV, line 21 Ginath and other assistance to domestic individuals. See Part IV, line 22 Ginath and other assistance to foreign organizations, foreign governments, and tomestic programs and control of the programs of the				expenses	general expenses	expenses
2 Grants and other assistance to donestic individuals See Part IV, line 12 and 16 (and the section of turner differences) and foreign individuals. See Part IV, line 15 and 16 (benefits paid to or for members and wages (benefits paid to or for for for for for for for for for						
Individuals. See Part V, line 22   780	2	New York Control of the Control of t				THE STREET
3 Grants and other assistance to foreign organizations, foreign powerments, and foreign individuals. See Part IV, lines 15 and 16  4 Benefits paid to or for members  5 Compensation of current offices, directors, trustees, and key employees  6 Compensation of current offices, directors, trustees, and key employees  7 Cother asiances and varges  6 Compensation and crustals and contributions (include persons) described in section 496(9(11)) and persons described in section 496(9(11)) and (a)(10) employer contributions)  5 O/438  5 O/448  5 O/4			780	780	il da de	122 J E 27 E 2
organizations, foreign governments, and foreign individuals, See Part IV, line 15 and 16	3		700	700		OTHER CIE
Series		-			<b>并有主要数据分</b> 据	BACOTE E
4. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation for included above, to disqualified persons (as defined under section 4958(n(1)) and persons described in section 4958(n					B	
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 495(f)(1)) and persons described in section 495(f)(1) and 403(f) employer contributions) 7 Other employee benefits 9 Other employee benefits 10 Payrol taxes 18,123 18	4					
trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(n)) and 252,061  Persons plan accruais and contributions (include section 4016) and 403(n) employer contributions)  Other employee benefits  Person plan accruais and contributions (include section 4016) and 403(n) employer contributions)  Other employee benefits  Person services (nonemployees):  a Management  b Legal  C Accounting  C Accounting  C Accounting  C Accounting  C Accounting  Other (in 1915) and 1915 and	5					
6 Compensation not included above, to disqualified persons (as defined under section 4958()(1)) and persons (as defined under section 4958()(1)) and persons described in section 4958()(3)(8)  7 Other salaries and vages  8 Pension plan accruals and contributions (include section 401(k) and 403(t) employer contributions)  9 Other employee benefits  10 Payrol taxes  18,123						
persons (as defined under section 498(0(1)) and persons described in section 498(0(3)(8)	6					
persons described in section 4958(c)(3)(8)						
7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(k) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): a Management b Legal 1 C Accounting 1 C						
Persion plan accruais and contributions (include section 401(k) and 403(b) employer contributions)   50,438	7		252 061	252.061		
section 401(k) and 403(b) employer contributions) 50,438 50,438     10 Payroll taxes	8	<u>-</u>	202/002	2027001		
1   Cher employee benefits   18,123		The state of the s	50.438	50.438		
18,123	9		00/100	507.55		
11   Fees for services (nonemployees);	10	•	18.123	18.123		
a Management	11	Fees for services (nonemployees):				
C Accounting	а					
d Lobbying e Professional fundraising services. See Part IV, line 17 investment management fees  g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)  Advertising and promotion  3 Office expenses	b	Legal				
d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees  g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)  Advertising and promotion  3 Office expenses 4,704 4,704 4,704 5 Royalties 7,132	C	Accounting	2,100		2,100	
f Investment management fees  9 Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)  Advertising and promotion  3 Office expenses	d	Lobbying				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)  12 Advertising and promotion  13 Office expenses  14,704  14 Information technology  15 Royalties  16 Occupancy  17 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  20 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  3 VOLUNTEER RECOGNITION  4 All other expenses  5 Total functional expenses. Add lines 1 through 24e  5 All other expenses. Add lines 1 through 24e  5 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundrainsing solicitation. Check here ▶ ∫ if	е	Professional fundraising services. See Part IV, line 17		自用油 化银色蛋白		
(A) amount, list line 11g expenses on Schedule O.)  24 Advertising and promotion  3 Office expenses  4,704  4,704  4,704  4,704  4,704  16 Occupancy  5 Royalties  6 Occupancy  7,132  7,132  7,132  7,132  8 Payments of travel or entertainment expenses for any federal, state, or local public officials  9 Conferences, conventions, and meetings  10 Interest  11 Payments to affiliates  12 Depreciation, depletion, and amortization  1 Insurance  1 Insurance  1 Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column  (A) amount, list line 24e expenses on Schedule O.)  2 VOLUNTEER RECOGNITION  4 All other expenses  1,566  1,566  1,566  2 Total functional expenses. Add lines 1 through 24e  374,120  335,900  37,293  927  37,132  4,704	f	Investment management fees				
Advertising and promotion	g	Other. (If line 11g amount exceeds 10% of line 25, column				
13 Office expenses		(A) amount, list line 11g expenses on Schedule O.)				
Information technology	12	Advertising and promotion				
15   Royalties	13	Office expenses	4,704		4,704	
16   Occupancy	14	Information technology				
17   Travel   1   1   7,132   7,132       18   Payments of travel or entertainment expenses for any federal, state, or local public officials	15	Royalties				
Payments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings Interest  Payments to affiliates  Depreciation, depletion, and amortization  Insurance  Cother expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column  (A) amount, list line 24e expenses on Schedule O.)  VOLUNTEER RECOGNITION  PRINTING AND PUBLICATION  All other expenses  All other expenses  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here     All other expenses   All othe	16	Occupancy	24,044		24,044	
for any federal, state, or local public officials  Conferences, conventions, and meetings  Interest  Payments to affiliates  Depreciation, depletion, and amortization  Insurance  Cother expenses. Itemize expenses on tovered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column  (A) amount, list line 24e expenses on Schedule O.)  VOLUNTEER RECOGNITION  PRINTING AND PUBLICATION  PRINTING AND PUBLICATION  All other expenses  All other expenses  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here     1,083	17	Travel	7,132	7,132		
19 Conferences, conventions, and meetings  20 Interest	18	Payments of travel or entertainment expenses				
Interest   Payments to affiliates		for any federal, state, or local public officials				
Payments to affiliates	19	Conferences, conventions, and meetings				
Depreciation, depletion, and amortization	20	Interest				
23 Insurance	21	Payments to affiliates				
Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a VOLUNTEER RECOGNITION	22	Depreciation, depletion, and amortization	1,083	1,083		
above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a VOLUNTEER RECOGNITION 4,301 4,301  b PRINTING AND PUBLICATION 416 416  c FUND RAISING 927 927  d 927  d 1,566 1,566  Total functional expenses. Add lines 1 through 24e . 374,120 335,900 37,293 927  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if	23	Insurance	6,445		6,445	
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a VOLUNTEER RECOGNITION  b PRINTING AND PUBLICATION  c FUND RAISING  e All other expenses  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	24		P\$445546	<b>多数数据数据</b> 有数	£4244624	
(A) amount, list line 24e expenses on Schedule O.)  a VOLUNTEER RECOGNITION b PRINTING AND PUBLICATION c FUND RAISING e All other expenses Total functional expenses. Add lines 1 through 24e organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here			TEMPORE AL	- Find # # 18 8 8	POSTAGE	
a VOLUNTEER RECOGNITION b PRINTING AND PUBLICATION c FUND RAISING e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
b PRINTING AND PUBLICATION  c FUND RAISING  e All other expenses  Total functional expenses. Add lines 1 through 24e 374,120 335,900 37,293 927  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here						
EUND RAISING  e All other expenses  Total functional expenses. Add lines 1 through 24e 374,120 335,900 37,293 927  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here  if	а		4,301	4,301		
e All other expenses 1,566 1,566  Total functional expenses. Add lines 1 through 24e 374,120 335,900 37,293 927  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				416	-	
All other expenses 1,566 1,566  Total functional expenses. Add lines 1 through 24e . 374,120 335,900 37,293 927  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if		FUND RAISING	927			927
25 Total functional expenses. Add lines 1 through 24e						
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here     If						
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if			374,120	335,900	37,293	927
from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	20					
		from a combined educational campaign and				
		fundraising solicitation. Check here    following SOP 98-2 (ASC 958-720)    following SOP 98-2 (ASC 95				

Part X Ba

Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	101,594	1	186,024
	2	Savings and temporary cash investments	107,335	2	80,967
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	41,332	4	82,373
	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		10 E	
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other		3 10	
		basis. Complete Part VI of Schedule D 10a 18,496			
	b	Less: accumulated depreciation		10c	7,038
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	250,261	16	356,402
	17	Accounts payable and accrued expenses	1,155	17	991
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director,			
pilli		trustee, key employee, creator or founder, substantial contributor, or 35%		00	
Lia	00	controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	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		0.5	
	26	of Schedule D		25 26	
	20	Organizations that follow FASB ASC 958, check here	1,155	20	991
S		and complete lines 27, 28, 32, and 33.		Bara	
ů	27	Net assets without donor restrictions	249,106	27	255 411
ala	28	Net assets with donor restrictions	249,100	28	355,411
d E		Organizations that do not follow FASB ASC 958, check here		1	
<u>.</u> –		and complete lines 29 through 33.		6.6	
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
188	31	Retained earnings, endowment, accumulated income, or other funds		31	
et A	32	Total net assets or fund balances	249,106	32	355,411
ž	33	Total liabilities and net assets/fund balances	250,261	33	356,402
			230,201		530,402

Form	990	(2020)
OHII	990	120201

MOUNTAIN CIRCUIT CASA, INC

			-		-	-
20	-1	7	94	17	7	2

Page **12** 

Pa	rt XI Reconciliation of Net Assets				
	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		480	,426
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		374	,120
3	Revenue less expenses. Subtract line 2 from line 1	. 3			,306
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4			,106
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			(1)
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10		355	,411
Pa	rt XII 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:  Cash  Accrual  Other			191	1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		4	100	27.0
	Schedule O.		7	18.3	3.5
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:		1		100
	Separate basis Consolidated basis Both consolidated and separate basis				3.0
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			1 4	
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				7
	Schedule O.			\$ SE.	
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?		За		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
FA			For	n 990 /2	2020)

EEA

Form **990** (2020)

#### **SCHEDULE A** (Form 990 or 990-EZ)

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

OMB No. 1545-0047

Employer identification number

2020

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.

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

MOU	NTA	IN CIRCUIT CASA, INC					20-119411	NAME AND ADDRESS OF TAXABLE PARTY OF TAXABLE PARTY.
Pa	rt I	Reason for Public Charity	/ Status. (All or	ganizations must co	omplete	this part.	.) See instructions	
The	orgai	nization is not a private foundation beca	use it is: (For lines	1 through 12, check only of	one box.)			
1		A church, convention of churches, or as	ssociation of churche	es described in section 17	0(b)(1)(A)	(i).		
2		A school described in section 170(b)(1	I)(A)(ii). (Attach Sch	edule E (Form 990 or 990	-EZ).)			
3		A hospital or a cooperative hospital serv	vice organization des	scribed in section 170(b)(	1)(A)(iii).			
4	П	A medical research organization operat	ted in conjunction wit	h a hospital described in s	section 17	0(b)(1)(A)(i	iii). Enter the	
	_	hospital's name, city, and state:	•	**				
5		An organization operated for the benefit	fit of a college or un	iversity owned or operate	d by a gov	ernmental i	unit described in	
		section 170(b)(1)(A)(iv). (Complete Pa		the state of the s	, ,			
6		A federal, state, or local government or		escribed in section 170(b	)(1)(A)(v).			
7	X	An organization that normally receives	_	The state of the s			he general public	
		described in section 170(b)(1)(A)(vi).		3				
8		A community trust described in section		Complete Part II )				
9	Ħ	An agricultural research organization de			in conjunct	ion with a la	and-grant college	
J		or university or a non-land-grant college						
		university:	ge of agriculture (see	e metractione). Enter the r	iame, ony,	una state c	or the deliege of	
10		An organization that normally receives	: (1) more than 33 1	/3% of its support from co	ontribution	s, members	ship fees, and gross	
		receipts from activities related to its ex	empt functions - sul	bject to certain exceptions	s; and (2) r	no more tha	an 33 1/3% of its	
		support from gross investment income	and unrelated busi	ness taxable income (less	s section 5	11 tax) fron	n businesses	
		acquired by the organization after June	30, 1975. See section	on 509(a)(2). (Complete F	Part III.)			
11		An organization organized and operated	d exclusively to test f	or public safety. See secti	ion 509(a)(	(4).		
12		An organization organized and operate	ed exclusively for the	e benefit of, to perform the	e functions	of, or to ca	arry out the purposes	
	_	of one or more publicly supported organ	nizations described in	n section 509(a)(1) or sec	ction 509(a	a)(2). See s	section 509(a)(3).	
		Check the box in lines 12a through 12a	d that describes the	type of supporting organi	zation and	complete I	ines 12e, 12f, and 12g.	et.
	а	Type I. A supporting organization of	perated, supervised	, or controlled by its suppo	rted organ	ization(s), t	ypically by giving	
		the supported organization(s) the	power to regularly a	ppoint or elect a majority	of the direc	ctors or trus	stees of the	
		supporting organization. You must						
	b	Type II. A supporting organization s	•		supported o	organization	n(s), by having	
		control or management of the sup			6.8	_	-	
		organization(s). You must comple						
	С	Type III functionally integrated.			on with, an	d functional	ly integrated with.	
		its supported organization(s) (see in					,	
	d	Type III non-functionally integra		•			rted organization(s)	
	_	that is not functionally integrated.						
		requirement (see instructions). You						
	е	Check this box if the organization	•				ne II Type III	
	•	functionally integrated, or Type III				( ) pc 1, 1 j	pe 11, 13pe 111	
	f	Enter the number of supported organiz						
	g g	Provide the following information about						
		) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of
	(,	, rame or capported organization	(,	(described on lines 1-10	listed in you		support (see	other support (see
				above (see instructions))	docum	nent?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
,-,								
(E)		£ .						
Tota	ı				E E E W	10.00		

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.)

	ction A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						-
	membership fees received. (Do not						
	include any "unusual grants.")	318,646	345,642	352,023	402,811	455,855	1,874,977
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						
4	Total. Add lines 1 through 3	318,646	345,642	352,023	402,811	455,855	1,874,977
5	The portion of total contributions by	四五次掛日日		<b>丁隆美女儿</b>			
	each person (other than a			at the Man	罗斯 医多种	111111	
	governmental unit or publicly			2 1 2 2 3 3	<b>表现标题</b>	9 0 0 8 5 5 N	
	supported organization) included on		<b>BAMARI</b>	144235	F ###1		
	line 1 that exceeds 2% of the amount		337741		7.6 # # 6 F	######	
	shown on line 11, column (f)			44441	EAR BAR	SHI SEE	
	Public support. Subtract line 5 from line 4		13 1 1 1 1 1 1 1 1 1				1,874,977
	ction B. Total Support						
	endar year (or fiscal year beginning in) ▶	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	318,646	345,642	352,023	402,811	455,855	1,874,977
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from		1				
_	similar sources	901	932	1,753	1,461	2,113	7,160
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						
44	(Explain in Part VI.)			and the second s			
	Total support. Add lines 7 through 10	4 64 5 6 4 6	202125			40	1,882,137
	Gross receipts from related activities, etc. (se					12	
13	First five years. If the Form 990 is for the organization, should this have and other have						. П
Sac	organization, check this box and stop here ction C. Computation of Public Suppor	t Porcentage					▶□
	Public support percentage for 2020 (line 6, co			olumn (fl)		14	99.62 %
	Public support percentage from 2019 Schedu					15	
							99.65 %
	6a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b							
	b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a	7a 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is						
	10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in						
	Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported						
	organization						
b	10%-facts-and-circumstances test - 2019.						
	15 is 10% or more, and if the organization mee						
	in Part VI how the organization meets the fac						ed
	organization						
18	Private foundation. If the organization did not						_
	instructions						▶ □

Schedule A (Form 990 or 990-EZ) 2020 MOUNTAIN CIRCUIT CASA, INC

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

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

Calendar year (or fiscal year beginning in)   (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020    Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise furnished in any activity that is related to the organization's tax-exempt purpose .  Gross receipts from admissions than a rend an unrelated trade or business under section 513 .  Tax revenues levied for the organization's tax-exempt purpose .  Gross receipts from admissions 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 .  The value of services or facilities furnished by a governmental unit to the organization without charge .  The value of services or facilities furnished by a governmental unit to the organization without charge .  The value of services or facilities furnished by a governmental unit to the organization without charge .  The value of services or facilities furnished by a governmental unit to the organization without charge .  The value of services or facilities furnished by a governmental unit to the organization without charge .  The value of services or facilities furnished by a governmental unit to the organization of the amount on line 3 for the year of Add lines 1 amount on line 3 for the year of Add lines 1 amount on line 13 for the year of Add lines 1 amount on line 13 for the year of Add lines 1 amount of the year of Add lines 1 amount of Add lines 1 amount of Add lines 1 amount on line 1 amount on li	Sec	ction A. Public Support	,		on, produce c		,	
1 Gifts, grants, contributions, and membership fees received. (On on 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 tra-exempt purpose. 3 Gross receipts from activities that are not an unnelated trade or business under section 513. 4 Tax revenues levice 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 . 7a Amounts included on lines 1, 2, and 3 received from disqualified persons . b 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 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year charged the year of \$5,000 or 1% of the year charged the year of \$5,000 or 1% of the year charged the year of \$5,000 or 1% of the year charged the year of \$5,000 or 1% of the year charged the year of \$5,000 or 1% of the year charg			(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
received. (Do not include any "unusual grants.")  Gross receipts from admissions, mechandise sold or services performed, of facilities furnished in any activity that is related to the organization's tax-exempt purpose  Gross receipts from activities that are not an unrelated trade or business under section 513  1 Tax revenues levied for free 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'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  7 A Amounts included on lines 2 and 3 received from other than disqualified persons  A mounts 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 of Add lines 7 and 7b  8 Public support. (Subtract line 7c from line 6  9 Amounts from line 6  10a Gross income from interest dividends, payments received on securities loans, rents, royalties, and income from similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities 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 Syears. If the Form 980 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section D. Computation of Public Support Percentage  15 Public support percentage from 2019 Schedule A, Part III, line 17  16 Public support percentage from 2019 Schedule A, Part III, line 17  17 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Total more than 33 173%, check this box and sto					(0)	()	(5)	(-)
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		0.00						
turnished 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 leviced 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 though 5  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 c Add lines 7a and 7b  8 Public support, (Subtract line 7c from line 6.)  8 Public support, (Subtract line 7c from line 6.)  9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, reyables, and income from similar sources  b Unrelated business taxable income (less section 51 taxes) from businesses acquired after June 30, 1975  c Add lines 70 and 10b  11 Net income from unrelated businesses activities not included in line 10b, whether or not the business is requisity carried on 10s from the sale of capital assets (Explain in Part VI.)  13 Total support, (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2019 Schedule A, Part III, line 15  16 Public support percentage from 2019 Schedule A, Part III, line 17  17 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19 a 33 1/3% support tests - 2020. If the organization did not check the box on line 14 or line 19a, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	2	Gross receipts from admissions, merchandise						
organization's fax-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  7a Amounts included on lines 1, 2, and 3 received from disqualified persons  b Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1½ of the amount on line 13 for the year c Add lines 7 and 7b  Public support, (Subtract line 7c from line 6)  10a Gross income from interest, dividends, payments received on securities loans, rents, royaties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c 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 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage 15 Public support percentage from 2019 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage 16 Public support percentage from 2019 Schedule A, Part III, line 17 Investment income percentage from 2019 Schedule A, Part III, line 17 Investment income percentage from 2019 Schedule A, Part III, line 17 Investment income percentage from 2019 Schedule A, Part III, line 17 Investment income percentage from 2019 Schedule A, Part III, line 17 Investment income percentage from 2019 Schedule A, Part III, line 17 Investment income percentage from 2019 Schedule A, Part III, line 17 Investm								
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 .  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons .  8 Amounts included on lines 1 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 c Add lines 7a and 7b .  8 Public support. (Subtract line 7c from line 6) .  9 Amounts from line 6 .  10a Gross income from interest, dividends, payments received on scurlies leans, rents, royaltes, and income from similar sources .  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .  10 Add lines 10 and 10 b .  11 Net income from unrelated business activities not included en line 10 b, 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 Syears. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) .  15 Public support percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization lid not or theck the box on line 14 or line 19a, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly s								
4 Tax revenues levide 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  7 A 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  c Add lines 7a and 7b.  8 Public support. (Subtract line 7c from line 6).  10a Gross income from interest, dividends, payments received on securifies loans, rents, royaltes, and income from similar sources  b Urrelated business taxable income (less section 511 taxes) from businesses 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 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section D. Computation of Public Support Percentage  15 Public support percentage from 2019 Schedule A, Part III, line 15  8 Section D. Computation of Investment Income Percentage  16 Investment income percentage from 2019 Schedule A, Part III, line 15  17 Investment income percentage from 2019 Schedule A, Part III, line 15  18 Investment income percentage from 2019 Schedule A, Part III, line 15  19 Ja 33 178's support tests - 2020. If the organization did not check the box on line 14, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization line 10 to not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization and line 16 is more than 33 1/3% to the box on line 14 or line 19a, and line 16 is more than 33 1/3% check this box and st	3							
organization's benefit and either paid to or expended on its behalf		unrelated trade or business under section 513 .						
or expended on its behalf	4	Tax revenues levied for the						
5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5		organization's benefit and either paid to						
furnished by a governmental unit to the organization without charge		or expended on its behalf						
organization without charge 6 Total. Add lines 1 through 5 7 Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from other than 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 c Add lines 7a and 7b  8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) > 9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c 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 120 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 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2019 Schedule A, Part III, line 15  16 Public support percentage from 2019 Schedule A, Part III, line 17  17 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19 33 1/3% support tests - 2020. (line those hose on line 14, and line 16 is more than 33 1/3%, support tests - 2020. (line those hose on line 14, and line 16 is more than 33 line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization did not check the box on line 14, and line 16 is more than 33 line 18 is not more than 33 1/3% suppor	5	The value of services or facilities						
6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons		furnished by a governmental unit to the						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons		organization without charge	1					
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 c Add lines 7a and 7b		-						
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 c Add lines 7a and 7b  Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Amounts from line 6  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Amounts from line 6  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Amounts from line 6  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Amounts from line 6  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Amounts from line 6  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Calendar year (or fiscal year beginning in) > (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  Calendar year (or fiscal ye	7a	Amounts included on lines 1, 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 c Add lines 7a and 7b		received from disqualified persons						
persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b	b	Amounts included on lines 2 and 3						
or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020  9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c 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 loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  17 Investment income percentage from 2019 Schedule A, Part III, line 15 18 Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17 18 Investment income percentage from 2019 Schedule A, Part III, line 17		received from other than disqualified						
c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6.)		persons that exceed the greater of \$5,000						
8 Public support. (Subtract line 7c from line 6.)		•						
Section B. Total Support  Calendar year (or fiscal year beginning in)   9 Amounts from line 6								
Section B. Total Support  Calendar year (or fiscal year beginning in)   Amounts from line 6	8		4. 经负债额额	SEALER	HE STEEL	7 ± 175 11	\$ \$4.44T	
Calendar year (or fiscal year beginning in)   Amounts from line 6	_	line 6.)	1 5 6 1 5 4	1235644		15 3 5 6 6	A A G T. E.	
9 Amounts from line 6								
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
payments received on securities loans, rents, royalties, and income from similar sources								
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2019 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2019 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19 3 31/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as	10a							
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acquired after June 30, 1975	D	10.						
c 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 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2019 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, an 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this bo	_							
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12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
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Section C. Computation of Public Support Percentage  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))								
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	20	Private foundation. If the organization did no	t check a box o	n line 14, 19a, o	or 19b, check t	his box and see	e instructions	▶ 🗍

## Part IV

**Supporting Organizations** 

(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. Al	Supporting	<b>Organizations</b>
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- 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.
- 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 lines 3b and 3c 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 lines 4b and 4c 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 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).
- 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 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).
- 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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	Yes	No
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3a	ād.	ii s
3b	d d	11
3c	Ē.	1
4a		1
4b		
4c		
5a		
5b 5c		
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9a		7
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10a		
10b	* *	
(Form 990 c	r 990-F	2) 2020

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	6.5	45.5	
	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and	1.5	1.3	3.5
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	19 2	3.4	
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or	1.5.2	3.4	
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,	1 8 8		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	135.0	4.3	
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	1 1		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported 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	72.5		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	4.4		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	t fi		
	supervised, or controlled the supporting organization.	2	and the second second	en e
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		13	
	or management of the supporting organization was vested in the same persons that controlled or managed		5.5	
	the supported organization(s).	1	attion makes	one litterature
Sec	tion 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 1		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	4.1		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	夏季	14:	
	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		200 Ju	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	4.4	5 12	
	the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have	2	2.8945.33	
	a significant voice in the organization's investment policies and in directing the use of the organization's	10.05		
	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.	3		
Sec	tion 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 instru	uctions	<b>;)</b> .	
а	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
b				
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	e instru	ctions	).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	2.2		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		7.1	
	how the organization was responsive to those supported organizations, and how the organization determined	1 1 4		
	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,	120		
	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 1	
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		7	
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
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 <b>Part VI</b> the role played by the organization in this regard	3b	Modellin Today	

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations					
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See					
	instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
Sec	ction A - Adjusted Net Income		(A) Prior Year	(B) Current Year		
	A - Adjustica Not moonic		(71) 1 1101 1001	(optional)		
_1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
	Add lines 1 through 3.	4				
	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection					
	of gross income or for management, conservation, or maintenance of					
	property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sec	tion B - Minimum Asset Amount		(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):		(首位) [ [ ] [ ] [ ]			
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors	4 - 40 3 - 40				
	(explain in detail in <b>Part VI</b> ):			TERRITOR		
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
	Subtract line 2 from line 1d.	3				
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				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sec	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	他是最近成为自身是			
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	有性的原理學會學是多			
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	integr	ated Type III supporting	organization		
-	(see instructions).	3				

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Se	ction D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exer			1		
2	Amounts paid to perform activity that directly furthers exempt	t purposes of supported		П		
	organizations, in excess of income from activity			2		
3	7 terrimidate experiede para le accomplish exempt purpose	s of supported organizat	ions	3		
4	Amounts paid to acquire exempt-use assets			4		
5	produced by produced produced produced	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	interest in the second of the second o			7		
8	Distributions to attentive supported organizations to which the	e organization is respons	ive			
	(provide details in Part VI). See instructions.			8		
9	Distributable difficult for 2020 from Section 6, fine 6			9		
10	Line 8 amount divided by line 9 amount			10		
Sec	ction E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	าร	(iii) Distributable Amount for 2020	
1	Distributable amount for 2020 from Section C, line 6			115		
2	Underdistributions, if any, for years prior to 2020				医线管畸胎性 基础工作	
	(reasonable cause required - explain in Part VI). See					
	instructions.					
	Excess distributions carryover, if any, to 2020		五 <b>李</b> 俊 (1 - 4 )		10000000000000000000000000000000000000	
	From 2015				William State of the State of t	
b	From 2016		手套团件工具工具具			
C	From 2017		<b>使适用使证</b> 自	3.0		
d	From 2018	Herman and a				
	From 2019		1973年出版 1973年		A SECTION OF SECTION O	
f	Total of lines 3a through 3e		2 5 B ( ) 4 B ( )		Janes Barres	
	Applied to underdistributions of prior years					
	Applied to 2020 distributable amount					
i	Carryover from 2015 not applied (see instructions)		<b>设备销售金额</b> 。	14		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		Bara Hall Co.		THE RESERVE TO SERVE	
4	Distributions for 2020 from	ration of the state of the stat				
	Section D, line 7: \$	THE STEAMST		ā,		
a	Applied to underdistributions of prior years				FREEDRICH SEI	
b	Applied to 2020 distributable amount		的复数引着主题从			
C	Remainder. Subtract lines 4a and 4b from line 4.		(事件通言) 含分			
5	Remaining underdistributions for years prior to 2020, if				医多种病病 医多子病 是	
	any. Subtract lines 3g and 4a from line 2. For result					
	greater than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2020. Subtract lines 3h	<b>通过的过去式与开始</b> 。	# BELLATE			
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.	<b>医有型工程用具直接</b> 其				
7	Excess distributions carryover to 2021. Add lines 3j		\$4-200 OF 1		The said the said	
	and 4c.					
8	Breakdown of line 7:					
a	Excess from 2016					
b	Excess from 2017	26年11万年2月16日	#ITE TO THE	I .		
	Excess from 2018	A S 医含量量 基本 医 各个	医乳基质 医多种毒性			
d	Excess from 2019	Bartana Barshau				

e Excess from 2020

Part VI	Supplemental Information. Provide the explanations required by Part II, line 1	IO: Part II line 17a or 17b: Part			
I all VI	Supplemental information. Provide the explanations required by Part II, line 1	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 in	etructions )			
	intes 2, 0, and 0.7430 complete this part for any additional information. (See if	isti detions.)			
-					
***					
20.00					
		7.5 - 1.00			

### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name	of the organization		Employer identification number
MOU	NTAIN CIRCUIT CASA, INC		20-1194112
Pa	rt I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or Accou	ınts.
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ing that the assets held in donor advised	
	funds are the organization's property, subject to the organization	's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advis	sors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements.		
	Complete if the organization answered "Yes" on		
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or education of land for public use)	_	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified of	conservation contribution in the form of a cons	servation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	retail deledge reconstruction and a second		
С	Number of conservation easements on a certified historic structu		2c
d	Number of conservation easements included in (c) acquired after		
3	Number of conservation easements modified, transferred, release	sed, extinguished, or terminated by the organ	lization during the
	tax year		
4	Number of states where property subject to conservation easem		
5	Does the organization have a written policy regarding the period		
_	violations, and enforcement of the conservation easements it ho		
6	Staff and volunteer hours devoted to monitoring, inspecting, han	dling of violations, and enforcing conservation	n easements during the year
_	A second to the	folial-times and anti-nine and anti-nine	
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, and enforcing conservation eas	sements during the year
0	▶ \$ Does each conservation easement reported on line 2(d) above s	esting the requirements of acetion 170/h)/4)/	B)/i)
8		•	
9	In Part XIII, describe how the organization reports conservation	agraments in its revenue and expense states	
3	balance sheet, and include, if applicable, the text of the footnote		
	organization's accounting for conservation easements.	to the organization's infancial statements tha	t describes the
Pa	rt III Organizations Maintaining Collections	of Art. Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" o		
1a	If the organization elected, as permitted under FASB ASC 958, r		ance sheet works
	of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtherar	nce of public
	service, provide, in Part XIII the text of the footnote to its financia		
b	If the organization elected, as permitted under FASB ASC 958, to	o report in its revenue statement and balance	sheet works of
	art, historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance	e of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		▶\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasu	res, or other similar assets for financial gain,	provide the
	following amounts required to be reported under FASB ASC 958	relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

	dule D (Form 990) 2020 MOUNTAIN CIRCU							20-119		Pag	
Pa	rt III Organizations Maintaining	Collec	ctions of	Art, His	torical T	reasures,	or Oth	er Similar As	sets (co	ntinued	1)
3	Using the organization's acquisition, accession	, and ot	her records,	check any	of the follow	ving that ma	ke signific	ant use of its			
	collection items (check all that apply):										
а	Public exhibition			d	Loan	or exchange	programs	<b>S</b>			
b	Scholarly research			е	Other						
C	Preservation for future generations										
4	Provide a description of the organization's colle	ctions a	ind explain h	ow they fu	rther the ord	anization's	exempt pu	rpose in Part			
	XIII.				and the en						
5	During the year, did the organization solicit or re	eceive d	lonations of	art historio	al treasures	or other sir	milar				
	assets to be sold to raise funds rather than to b					and the same of the same of the same			. 🗌 Ye	s D	No
Pa	rt IV   Escrow and Custodial Arrar										
	Complete if the organization a			on Form	n 990. Pa	art IV. line	9. or re	ported an am	ount on	Form	
	990, Part X, line 21.					,	,				
1a	Is the organization an agent, trustee, custodian	or othe	r intermedia	v for contr	ibutions or o	other assets	not				
				-					🗆 Ye	s 🗆	No
b	If "Yes," explain the arrangement in Part XIII and									о <sub>П</sub> .	•••
-	in 100, explain the arrangement in 1 arrivin arr	a comp	icte trie rollo	wing table.				Δr	mount		
С	Beginning balance						. 1c		Hount		
d											
e	Distributions during the year			1 100 1 101 100 100 100	10. 0. 0. 0. 0.						
f											
									Пу	П.	
2a	Did the organization include an amount on Form						1.5			s    l	Vo
	If "Yes," explain the arrangement in Part XIII. Cl	песк пе	re if the expi	anation na	s been prov	ided on Part	XIII			· ⊔	
ı a	Complete if the organization a	newo	red "Voc"	on Forn	000 D	art IV/ line	10				
	Complete il the organization a					T					
10	Parinning of ware balance	(a) C	urrent year	(b) Pi	rior year	(c) Two year	rs back	(d) Three years back	(e) Fou	r years bac	k
1a	Beginning of year balance			-					_		
b	Contributions			-							
С	Net investment earnings, gains, and										
	losses										
d											
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the current	t year ei	nd balance (	line 1g, col	umn (a)) he	eld as:					
a	Board designated or quasi-endowment		%								
b	Permanent endowment • %	b									
C	Term endowment ▶ %										
	The percentages on lines 2a, 2b, and 2c should	equal 1	100%.								
3a	Are there endowment funds not in the possession	on of the	e organizatio	n that are	held and ad	ministered fo	or the				
	organization by:									Yes	No
	(i) Unrelated organizations								. 3a(i)		
	(ii) Related organizations								. 3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ns listed	d as required	on Sched	ule R?				. 3b		
4	Describe in Part XIII the intended uses of the or										
Pai	rt VI Land, Buildings, and Equipn										
	Complete if the organization a		red "Yes"	on Form	1990, Pa	rt IV, line	11a. Se	e Form 990, I	Part X, li	ne 10.	
	Description of property		(a) Cost or oth			other basis		Accumulated	(d) Boo		
			(investme			other)		preciation	1-7 200		
1a	Land						AUT :				
b	Buildings	.									
С	Leasehold improvements	.	-	-		6,651		6,651			
d	Equipment					11,845				7 03	۵
_		_				11,845		4,807		7,03	0

7,038

Schedule D (Form 9		CASA, INC			20-	1194112	Page 3
Part VII	Investments - Other Securities.		000 B	. 15 7 12 - 4.41	0 5	000 D 1V	l' 40
	Complete if the organization answered	"Yes" on For	m 990, Par	t IV, line 111	o. See Form	990, Part X,	line 12.
	(a) Description of security or category (including name of security)		(b) Book va	alue		c) Method of valuation r end-of-year market va	
1) Financial d	erivatives						
	ld equity interests						
3) Other							
(A)							
(B)							
(C)							
(D)							
(E)							
(F)							
(G)							
(H)							
Part VIII	Investments - Program Related.	1157-11	000 B	N / 12 - 44 -	0 - 5	000 BIV	
	Complete if the organization answered	Yes on For	n 990, Pan	IV, line 110	s. See Form	990, Part X, I	ine 13.
	(a) Description of investment		(b) Book va	lue	1.5/1.	) Method of valuation end-of-year market va	
(1)							
(2)							
(3)							
(4)		v.					
(5)							
(6)							
(7)							
(8)							
(9)							
	(b) must equal Form 990, Part X, col. (B) line 13.)			11	州 美国组织		4.17-5-5
Part IX	Other Assets.						
	Complete if the organization answered	"Yes" on Forr	n 990, Part	IV, line 11c	l. See Form	990, Part X, I	ine 15.
	(a) Desc	cription				( <b>b</b> ) Boo	k value
(1)							
(2)							
(3)							
(4)							
(5)							
(6)		G.					
(7)							
(8)							
(9)							
					▶		
Part X	Other Liabilities.						
	Complete if the organization answered line 25.	"Yes" on Forr	n 990, Part	IV, line 11e	or 11f. See	Form 990, Pa	art X,
	(a) Description of liability	(b) Book va	alue				
(1) Federal in							

1.	(a) Description of liability	(b) Book value	The state of the s
(1) Federa	I income taxes		
(2)			
(3)			
(4)			ALL COMPANY THE RESIDENCE TO THE PARTY OF TH
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.) . >		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII 20-1194112

Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retur	n.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	4	100 100
2	Total revenue, gains, and other support per audited financial statements	1	490,183
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1	
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)         2d         9,757	2	
е	Add lines 2a through 2d	2e	9,757
3	Subtract line 2e from line 1	3	480,426
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	47.00	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	3 1	
C	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	480,426
Pa	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	turn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	383,877
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	50.	
b	Prior year adjustments		
C	Other losses	127	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	9,757
3	Subtract line 2e from line 1	3	374,120
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	6.4	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1 1	
b	Other (Describe in Part XIII.)		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	374,120
Pai	t XIII Supplemental Information.		
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part I	K, line	
2; Pa	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
01.	Other revenues not included on Form 990 (Part XI, line 2d)		
cos	OF FUND RAISING		

Schedule D (Form 990) 2020 MOUNTAIN CIRCUIT CASA, INC  Part XIII Supplemental Information (continued)	20-1194112	Page
Supplemental information (continued)		
02. Other expenses not included on Form 990 (Part XII, line 2d)		
COST OF FUND RAISING		

### SCHEDULE G (Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Employer identification number Name of the organization MOUNTAIN CIRCUIT CASA, INC 20-1194112 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants f Solicitation of government grants Internet and email solicitations Phone solicitations g Special fundraising events d | In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	ndraiser have or control of butions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
					±00	And the second s
					*****	
al				s or has been notified	it is exempt from	
	ALE					
						****
						197 (a.e. a.e. 1975 (a.e. 1975 (a

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		gross receipts greater than	φο,σσο.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			GOLF TOURNEY	(august 6 mg)		col. (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	27,862		4,353	32,215
Ä	2	Less: Contributions				
	3	Gross income (line 1 minus				
		line 2)	27,862		4,353	32,215
	4	Cash prizes				
	5	Noncash prizes	361			
ses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direct	8	Entertainment				
	9	Other direct expenses	9,757			9,757
		B				
	10	Direct expense summary. Add lines				9,757
	11	Net income summary. Subtract line 1		"		22,458
Pa	rt II		<del>-</del>	es" on Form 990, Part IV	, line 19, or reported mol	re than
		\$15,000 on Form 990-EZ,	line ba.			
o l			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(4) 290	bingo/progressive bingo	(e) carer garring	col. (a) through col. (c))
Sev						
	1	Gross revenue				
S	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	□ No	□ No	☐ No	A STATE OF THE PROPERTY.
	7	Direct expense summary. Add lines 2	2 through 5 in column (d)			
	8	Net gaming income summary. Subtra	act line 7 from line 1, columr	n (d)	▶	
	_					
9		ter the state(s) in which the organization				О. О.
а		he organization licensed to conduct ga	aming activities in each of th	ese states?		Yes   No
b	If "I	No," explain:				
	-					
10a b		ere any of the organization's gaming lic Yes," explain:				Yes No
D	.11					

## **SCHEDULE 0**

(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.

OMB No. 1545-0047

**Open to Public** Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

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

MOUNTAIN CIRCUIT CASA, INC	20-1194112
01. Form 990 governing body review (Part VI, line 11)	
NO REVIEW WAS CONDUCTED OR WILL BE CONDUCTED	
02. Conflict of interest policy compliance (Part VI, line 12c)	
DIRECTORS AND OFFICERS ARE INTERVIEWED UPON NOMINATION CONCERNING ANY C	ONFLICTS OF
INTEREST. THE BOARD IS REMINDED AT LEAST ANNUALLY ABOUT POTENTIAL CONF	LICTS AND CHANGES
IN THEIR STATUS	
03. CEO, executive director, top management comp (Part VI, line 15a)	
THE FINANCE COMMITTEE THAT IS MADE UP OF VOLUNTEERS REVIEWS COMPENSATIO	N OF THE KEY
EMPLOYEE AND MAKE RECOMMENDATIONS TO THE BOARD ANNUALLY	
04. Other officer or key employee compensation (Part VI, line 15b	
THE EXECUTIVE DIRECTOR WHO IS ALSO THE KEY EMPLOYEE IS THE ONLY OFFICER	THAT RECEIVES
COMPENSATION	
05. Governing documents, etc, available to public (Part VI, line 19)	
DOCUMENTS AVALIABLE TO THE PUBLIC UPON REQUEST	