

Department Name (if different from the organization's name):

Department Address (street, city, state, and ZIP code):

Department Telephone Number (include area code):

Department Fax Number:

Part I

Name of the organization:

Mission statement (required for all organizations):

Organization's EIN:

Federal tax classification (check one):

501(c)(3) Charitable

501(c)(29) Religious

501(c)(25) Scientific, technological, or similar

501(c)(27) Amateur sports

501(c)(28) Amateur athletic or Olympic

501(c)(26) Other

501(c)(6) Other

501(c)(4) Other

501(c)(2) Other

501(c)(1) Other

501(c)(7) Other

501(c)(8) Other

501(c)(9) Other

501(c)(10) Other

501(c)(11) Other

501(c)(12) Other

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501(c)(15) Other

501(c)(16) Other

501(c)(17) Other

501(c)(18) Other

501(c)(19) Other

501(c)(20) Other

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501(c)(48) Other

501(c)(49) Other

501(c)(50) Other

501(c)(51) Other

501(c)(52) Other

501(c)(53) Other

501(c)(54) Other

Part II

Total revenue:

Total expenses:

Total assets:

Total liabilities:

Total net assets:

Total net liabilities:

Total net assets or liabilities:

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Part III	Section 513(b)(1) - (5)	Section 513(b)(6)	Section 513(b)(7)	Section 513(b)(8)	Section 513(b)(9)	Section 513(b)(10)	Section 513(b)(11)	Section 513(b)(12)	Section 513(b)(13)	Section 513(b)(14)	Section 513(b)(15)	Section 513(b)(16)	Section 513(b)(17)	Section 513(b)(18)	Section 513(b)(19)	Section 513(b)(20)	Section 513(b)(21)	Section 513(b)(22)	Section 513(b)(23)	Section 513(b)(24)	Section 513(b)(25)	Section 513(b)(26)	Section 513(b)(27)	Section 513(b)(28)	Section 513(b)(29)	Section 513(b)(30)	Section 513(b)(31)	Section 513(b)(32)	Section 513(b)(33)	Section 513(b)(34)	Section 513(b)(35)	Section 513(b)(36)	Section 513(b)(37)	Section 513(b)(38)	Section 513(b)(39)	Section 513(b)(40)	Section 513(b)(41)	Section 513(b)(42)	Section 513(b)(43)	Section 513(b)(44)	Section 513(b)(45)	Section 513(b)(46)	Section 513(b)(47)	Section 513(b)(48)	Section 513(b)(49)	Section 513(b)(50)	Section 513(b)(51)	Section 513(b)(52)	Section 513(b)(53)	Section 513(b)(54)	Section 513(b)(55)	Section 513(b)(56)	Section 513(b)(57)	Section 513(b)(58)	Section 513(b)(59)	Section 513(b)(60)	Section 513(b)(61)	Section 513(b)(62)	Section 513(b)(63)	Section 513(b)(64)	Section 513(b)(65)	Section 513(b)(66)	Section 513(b)(67)	Section 513(b)(68)	Section 513(b)(69)	Section 513(b)(70)	Section 513(b)(71)	Section 513(b)(72)	Section 513(b)(73)	Section 513(b)(74)	Section 513(b)(75)	Section 513(b)(76)	Section 513(b)(77)	Section 513(b)(78)	Section 513(b)(79)	Section 513(b)(80)	Section 513(b)(81)	Section 513(b)(82)	Section 513(b)(83)	Section 513(b)(84)	Section 513(b)(85)	Section 513(b)(86)	Section 513(b)(87)	Section 513(b)(88)	Section 513(b)(89)	Section 513(b)(90)	Section 513(b)(91)	Section 513(b)(92)	Section 513(b)(93)	Section 513(b)(94)	Section 513(b)(95)	Section 513(b)(96)	Section 513(b)(97)	Section 513(b)(98)	Section 513(b)(99)	Section 513(b)(100)			
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Part IV	Section 514(a)(1)	Section 514(a)(2)	Section 514(a)(3)	Section 514(a)(4)	Section 514(a)(5)	Section 514(a)(6)	Section 514(a)(7)	Section 514(a)(8)	Section 514(a)(9)	Section 514(a)(10)	Section 514(a)(11)	Section 514(a)(12)	Section 514(a)(13)	Section 514(a)(14)	Section 514(a)(15)	Section 514(a)(16)	Section 514(a)(17)	Section 514(a)(18)	Section 514(a)(19)	Section 514(a)(20)	Section 514(a)(21)	Section 514(a)(22)	Section 514(a)(23)	Section 514(a)(24)	Section 514(a)(25)	Section 514(a)(26)	Section 514(a)(27)	Section 514(a)(28)	Section 514(a)(29)	Section 514(a)(30)	Section 514(a)(31)	Section 514(a)(32)	Section 514(a)(33)	Section 514(a)(34)	Section 514(a)(35)	Section 514(a)(36)	Section 514(a)(37)	Section 514(a)(38)	Section 514(a)(39)	Section 514(a)(40)	Section 514(a)(41)	Section 514(a)(42)	Section 514(a)(43)	Section 514(a)(44)	Section 514(a)(45)	Section 514(a)(46)	Section 514(a)(47)	Section 514(a)(48)	Section 514(a)(49)	Section 514(a)(50)	Section 514(a)(51)	Section 514(a)(52)	Section 514(a)(53)	Section 514(a)(54)	Section 514(a)(55)	Section 514(a)(56)	Section 514(a)(57)	Section 514(a)(58)	Section 514(a)(59)	Section 514(a)(60)	Section 514(a)(61)	Section 514(a)(62)	Section 514(a)(63)	Section 514(a)(64)	Section 514(a)(65)	Section 514(a)(66)	Section 514(a)(67)	Section 514(a)(68)	Section 514(a)(69)	Section 514(a)(70)	Section 514(a)(71)	Section 514(a)(72)	Section 514(a)(73)	Section 514(a)(74)	Section 514(a)(75)	Section 514(a)(76)	Section 514(a)(77)	Section 514(a)(78)	Section 514(a)(79)	Section 514(a)(80)	Section 514(a)(81)	Section 514(a)(82)	Section 514(a)(83)	Section 514(a)(84)	Section 514(a)(85)	Section 514(a)(86)	Section 514(a)(87)	Section 514(a)(88)	Section 514(a)(89)	Section 514(a)(90)	Section 514(a)(91)	Section 514(a)(92)	Section 514(a)(93)	Section 514(a)(94)	Section 514(a)(95)	Section 514(a)(96)	Section 514(a)(97)	Section 514(a)(98)	Section 514(a)(99)	Section 514(a)(100)
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Part V

Part VI

Part VII

Part VIII

Part IX

Part B. Statement of Program Service Accomplishments

Check whether the donor's response is only in part on this page. (a)

1. **State the program's objectives and**
the ways in which the organization achieved or advanced the accomplishment
of the program in fiscal year ended _____, _____, and _____.

2. **State the program's objectives and the ways in which the organization achieved or advanced the accomplishment of the program in fiscal year ended _____.** Yes No

3. **State the program's objectives and the ways in which the organization achieved or advanced the accomplishment of the program in fiscal year ended _____.** Yes No

4. **Describe the organization's program or programs during the year if the program's objectives, as measured against the organization's stated purposes, are not to be met for one or more of the following reasons: the organization and service area do not support such goals.**

5. For _____ (year) _____ (1041-SS) (organization) (Form) _____ (2010)
Describe the organization's program or programs during the year if the program's objectives, as measured against the organization's stated purposes, are not to be met for one or more of the following reasons: the organization and service area do not support such goals.

6. For _____ (year) _____ (1041-SS) (organization) (Form) _____ (2010)
Describe the organization's program or programs during the year if the program's objectives, as measured against the organization's stated purposes, are not to be met for one or more of the following reasons: the organization and service area do not support such goals.

7. For _____ (year) _____ (1041-SS) (organization) (Form) _____ (2010)
Describe the organization's program or programs during the year if the program's objectives, as measured against the organization's stated purposes, are not to be met for one or more of the following reasons: the organization and service area do not support such goals.

8. **State the program's objectives and the ways in which the organization achieved or advanced the accomplishment of the program in fiscal year ended _____.** Yes No

Part VII. Overview of Supplemental Information

	Yes	No
26a. Did the organization spend over \$5,000 on lobbying in 2015? <i>(See instructions.)</i>	20	1
b. If "Yes" on line 26a, did the organization spend a substantial amount of resources in the course of	20	
26b. Did the organization spend less than \$5,000 in 2015 on lobbying or other activities to influence legislation or	20	1
26c. Did the organization spend less than \$5,000 in 2015 on lobbying or other activities to influence legislation or	20	1
26d. Did the organization spend less than \$5,000 in 2015 on lobbying or other activities to influence legislation or	20	1
26e. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26f. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26g. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26h. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26i. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26j. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26k. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26l. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26m. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26n. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26o. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26p. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26q. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26r. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26s. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1
26t. Did the organization have any expenditures in 2015 for lobbying or other activities to influence legislation or	20	1

Part III. Governance, Management, and Self-Dealing For information on changes to this section, see the instructions to this form. For information on the requirements for organizations, see the instructions to this form.

Section A. Governing Body and Management

	Yes	No
1a. Did the organization carry out its purposes and activities for the year?	<input type="checkbox"/>	<input type="checkbox"/>
1b. Did the organization carry out its purposes and activities for the year in a way that is consistent with its governing instrument?	<input type="checkbox"/>	<input type="checkbox"/>
2. Did the organization have a governing instrument, including a trust instrument, that allowed the organization to carry out its purposes and activities?	<input type="checkbox"/>	<input type="checkbox"/>
3. Did the governing instrument contain the requirements for the organization to carry out its purposes and activities?	<input type="checkbox"/>	<input type="checkbox"/>
4. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
5. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
6. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
7. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
8. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
9. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
10. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
11. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
12. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
13. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
14. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
15. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
16. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
17. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
18. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
19. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>
20. Did the governing instrument contain any self-dealing provisions for the year?	<input type="checkbox"/>	<input type="checkbox"/>

Section B. Officers, Directors, and Key Personnel For information on changes to this section, see the instructions to this form.

	Yes	No
21. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
22. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
23. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
24. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
25. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
26. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
27. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
28. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
29. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
30. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
31. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
32. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
33. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
34. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
35. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
36. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
37. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
38. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
39. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>
40. Did the organization have a list of officers, directors, or trustees?	<input type="checkbox"/>	<input type="checkbox"/>

Section C. Self-Dealing

41. Did the organization have a policy prohibiting self-dealing? Yes No

42. Did the organization have a policy prohibiting self-dealing? Yes No

43. Did the organization have a policy prohibiting self-dealing? Yes No

44. Did the organization have a policy prohibiting self-dealing? Yes No

45. Did the organization have a policy prohibiting self-dealing? Yes No

46. Did the organization have a policy prohibiting self-dealing? Yes No

47. Did the organization have a policy prohibiting self-dealing? Yes No

48. Did the organization have a policy prohibiting self-dealing? Yes No

49. Did the organization have a policy prohibiting self-dealing? Yes No

50. Did the organization have a policy prohibiting self-dealing? Yes No

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

Section 501(c)(3) organizations are required to report on this section if they have any of the following individuals or entities:

- Any of its officers, directors, trustees, key employees, or highest compensated employees, regardless of amount of compensation.
- Any of its independent contractors who received more than \$5,000 in compensation for services provided to the organization.
- Any of its independent contractors who received more than \$5,000 in compensation for services provided to the organization.
- Any of its independent contractors who received more than \$5,000 in compensation for services provided to the organization.
- Any of its independent contractors who received more than \$5,000 in compensation for services provided to the organization.

Enter on the following table the compensation received by each individual or entity listed above. Report the compensation for each individual or entity in the appropriate column. Do not include compensation for services provided to the organization as an independent contractor.

Check this box if none of the compensation is reported in any of the appropriate columns and no amount of fees, benefits or honoraria.

(A) Name and title	(B) Amount of salary or fee for services provided to the organization	(C) Amount of other compensation received from the organization					(D) Reportable amount for reporting purpose	(E) Reportable amount for reporting purpose	(F) Reportable amount for reporting purpose	(G) Reportable amount for reporting purpose	(H) Reportable amount for reporting purpose
		(1) Travel expenses	(2) Housing allowance	(3) Auto allowance	(4) Life insurance	(5) Other					
(1) NAME AND TITLE	1,000										
(2) NAME AND TITLE	1,000										
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Part VII Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations	Part VIII Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations	Part IX Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations					Part X Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations		
		Part XI Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations	Part XII Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations	Part XIII Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations	Part XIV Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations	Part XV Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations			
120 All other property	121								
122 Total	123								
124 Total	125								
126 Total	127								
128 Total	129								
130 Total	131								
132 Total	133								
134 Total	135								
136 Total	137								
138 Total	139								
140 Total	141								
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190 Total	191								
192 Total	193								
194 Total	195								
196 Total	197								
198 Total	199								
200 Total	201								

- a. Section 501(c)(29) organizations that receive proceeds from disposal of capital assets (other than property used in the ordinary course of the organization)
- b. Property administered by the organization for the benefit of a dependent or other individual (other than property held in trust for the benefit of a dependent or other individual)
- c. Property administered by the organization for the benefit of a dependent or other individual (other than property held in trust for the benefit of a dependent or other individual)

Part VIII, Subpart 1 (continued)

Part VIII Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations	Part IX Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations	Part X Section 501(c)(29) Charities, Religious, Fraternal, and Business Organizations and Federal Governmental Corporations

Part VII - Statement of Revenue

Part I - Property Tax Revenue & Transfers to Other Funds & Other Tax

		2010	2011	2012	2013
		Actual	Proposed	Proposed	Proposed
Continuing Fund Balance	1. Transfer-in				
	2. Retained				
	3. Transferred-in				
	4. Transferred-out				
	5. Transferred-in				
	6. Transferred-out				
	7. Other transfers (all part of one transfer-in or transfer-out)				
	8. Total transfers				
	9. Total Available Tax				
	10. Total Available Tax				
Property Tax	1. General Fund				
	2. Special Tax				
	3. Transfers				
	4. Other				
	5. Total Available Tax				
	6. Transfers to Other Funds				
	7. Transfers from Other Funds				
	8. Total				
	9. Total Available Tax				
	10. Total Available Tax				
Other Revenue	1. Interest on investments				
	2. Dividends				
	3. Other				
	4. Total				
	5. Total Available Tax				
	6. Total Available Tax				
	7. Total Available Tax				
	8. Total Available Tax				
	9. Total Available Tax				
	10. Total Available Tax				
Miscellaneous Revenue	1. Interest on investments				
	2. Dividends				
	3. Other				
	4. Total				
	5. Total Available Tax				
	6. Total Available Tax				
	7. Total Available Tax				
	8. Total Available Tax				
	9. Total Available Tax				
	10. Total Available Tax				

Part B: Statement of Financial Position

Notes to financial statements are required for all components of the financial statements. All items representing the same category are

classified in the same category as shown in the following structure:

Assets and liabilities shown in the 2023/2024 financial statements	2023/2024	2022/2023	2021/2022	2020/2021
1. Current assets				
1.1 Cash and cash equivalents				
1.2 Debtors				
1.3 Prepaid expenses				
1.4 Other current assets				
1.5 Total current assets	100,000	100,000	100,000	100,000
2. Non-current assets				
2.1 Property, plant and equipment				
2.2 Intangible assets				
2.3 Other non-current assets				
2.4 Total non-current assets	100,000	100,000	100,000	100,000
3. Total assets	200,000	200,000	200,000	200,000
4. Current liabilities				
4.1 Creditors				
4.2 Other current liabilities				
4.3 Total current liabilities	100,000	100,000	100,000	100,000
5. Non-current liabilities				
5.1 Other non-current liabilities				
5.2 Total non-current liabilities	100,000	100,000	100,000	100,000
6. Total liabilities	200,000	200,000	200,000	200,000
7. Total equity	0	0	0	0
8. Total equity and liabilities	200,000	200,000	200,000	200,000

Part II Balance Sheet

Check the appropriate boxes to indicate whether the S-corp is a:

1

		2012		2011	
		Assets	Liabilities	Assets	Liabilities
Assets	1 Cash and cash equivalents	11,000	4	11,000	
	2 Savings and investments not included in other categories	1,000,000	4	1,000,000	
	3 Mutual funds and securities not included in other categories	10,000	4	10,000	
	4 Receivables, net	10,000	4	10,000	
	5 Loans and other receivables that do not fall into other categories, net of provisions and bad debt expense (attach Schedule D if required)	10,000	4	10,000	
	6 Loans and other receivables over the insured period as determined under 2635(b) (attach Form 9889) and nonbank deposits and securities registered in name of S-corp (attach appropriate Schedule D information) (attach Form 9889)				
	7 Real estate interests, net		4		
	8 Investments in real estate		4		
	9 Other interests in real estate	10,000	4	10,000	
	10 Land, buildings, equipment, and other depreciable property (attach Form 4562)				
	11 Other depreciable property (attach Form 4562)				
	12 Total depreciable property (attach Form 4562)	1,000,000	10	1,000,000	
	13 Total assets (Part II, line 12 plus lines 1 through 10)	1,121,000	10	1,121,000	
	Liabilities	14 Accounts payable and accrued expenses		10	
15 Debt (attach Form 9701)			10		
16 Other liabilities			10		
17 Total liabilities (Part II, lines 14 through 16)			10		
18 Other liabilities (attach Form 9701)			10		
19 Total liabilities (Part II, lines 17 and 18)			10		
20 Total liabilities (Part II, lines 14 through 19)			10		
21 Total liabilities (Part II, lines 14 through 19)			10		
22 Total liabilities (Part II, lines 14 through 19)			10		
23 Total liabilities (Part II, lines 14 through 19)			10		
24 Total liabilities (Part II, lines 14 through 19)			10		
25 Total liabilities (Part II, lines 14 through 19)			10		
26 Total liabilities (Part II, lines 14 through 19)			10		
27 Total liabilities (Part II, lines 14 through 19)			10		
Equity	28 Capital stock (attach Form 9701)		10		
	29 Retained earnings (attach Form 9701)		10		
	30 Total equity (Part II, lines 28 and 29)		10		
	31 Total equity (Part II, lines 28 and 29)		10		
	32 Total equity (Part II, lines 28 and 29)		10		
	33 Total equity (Part II, lines 28 and 29)		10		
	34 Total equity (Part II, lines 28 and 29)		10		
	35 Total equity (Part II, lines 28 and 29)		10		
	36 Total equity (Part II, lines 28 and 29)		10		
	37 Total equity (Part II, lines 28 and 29)		10		
	38 Total equity (Part II, lines 28 and 29)		10		
	39 Total equity (Part II, lines 28 and 29)		10		
	40 Total equity (Part II, lines 28 and 29)		10		
	41 Total equity (Part II, lines 28 and 29)		10		

Form 990-B (2012)

Part III **Supplemental Information**

Check if the organization is a corporation or partnership or other entity subject to tax on its income

1. Total revenue from operations (do not include the fee for 2)	4	1,000,000
2. Total expenses (including Part III, 4 through 9a) (do not include the fee for 2)	4	1,000,000
3. Revenue less expenses (do not include the fee for 2)	4	0
4. Net assets or fund balances at beginning of year (do not include Part III, 4a or 5b) (do not include the fee for 2)	4	10,000,000
5. Net assets or fund balances at end of year (do not include Part III, 4a or 5b) (do not include the fee for 2)	4	10,000,000
6. Total assets (do not include the fee for 2)	4	10,000,000
7. Total liabilities (do not include the fee for 2)	4	0
8. Total net assets or fund balances (do not include the fee for 2)	4	10,000,000
9. Total assets less total liabilities (do not include the fee for 2)	4	10,000,000
10. Total assets less total liabilities and net assets or fund balances (do not include the fee for 2)	4	0

Part III **Financial Statements and Reporting**

Check if the organization is a corporation or partnership or other entity subject to tax on its income

	Yes	No
1. Accounting method used is proper for tax purposes <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization prepares financial statements that are prepared on the cash method, check the "Yes" box only if the organization is a small business as defined in Section 1361.		
2. Were the organization's financial statements prepared in accordance with generally accepted accounting principles (GAAP)? If "Yes," were there any items excluded from the financial statements for the year that were required to be included if GAAP were applied consistently throughout the year? <input type="checkbox"/> No <input type="checkbox"/> Yes (describe below) <input type="checkbox"/> Yes (describe any exclusions below)	Yes	No
3. Were the organization's financial statements audited by an independent accountant? If "Yes," were there any items excluded from the financial statements for the year that were required to be included if GAAP were applied consistently throughout the year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (describe below) <input type="checkbox"/> Yes (describe any exclusions below)	Yes	No
4. If "Yes" to the audit, did the organization file a copy of the audited financial statements with the IRS? If the organization prepares its financial statements in accordance with GAAP, check the "Yes" box only if the organization has filed a copy of the audited financial statements with the IRS.	Yes	No
5. If a corporation, were there any items excluded from the organization's return of assets or liabilities or both that were required to be included if GAAP were applied consistently throughout the year? <input type="checkbox"/> No <input type="checkbox"/> Yes (describe below) <input type="checkbox"/> Yes (describe any exclusions below)	Yes	No
6. If "Yes," did the organization undergo the required audit or audits if the organization did not undergo the required audit or audits, were there any items excluded from the organization's return of assets or liabilities or both that were required to be included if GAAP were applied consistently throughout the year? <input type="checkbox"/> No <input type="checkbox"/> Yes (describe below) <input type="checkbox"/> Yes (describe any exclusions below)	Yes	No

Public Charity Status and Public Support

Complete this information if a public charity organization or another exempt organization that is not a private operating foundation.
OMB No. 1545-0047

2015

Department of the Treasury
Internal Revenue Service

Employer's EIN

Name of the organization

Part I Public charity status information

Part I Answer the Public Charity Status questions that apply to you by checking the appropriate box(es).

The organization is not a public charity because it is:

- 1** A self-governing corporation, association, or another entity that is not a charity.
- 2** A corporation or other organization that is not a public charity.
- 3** A trust or a trust-like arrangement that is not a charity.
- 4** A public charity organization owned or controlled by an individual, partnership, trust, estate, or other person.
- 5** A corporation owned by an individual or a trust or controlled or operated by a governmental unit described in section 170(b)(1)(C)(i)(II)(B).
- 6** A trust, other than a trust described in section 170(b)(1)(C)(i)(II)(B).
- 7** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 8** A trust that is not a charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 9** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 10** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 11** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 12** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 13** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 14** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 15** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 16** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 17** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 18** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 19** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).
- 20** An organization that is not a public charity because it is not a public charity as defined in section 170(b)(1)(C)(i)(II)(B).

21 Enter the number of supported organizations:

Supported organization name	501(c)(3)	501(c)(29) or (30) organization described in section 170(b)(1)(C)(i)(II)(B)		501(c)(3) or (4) organization described in section 170(b)(1)(C)(i)(II)(B)		501(c)(28) or (29) organization described in section 170(b)(1)(C)(i)(II)(B)	501(c)(30) organization described in section 170(b)(1)(C)(i)(II)(B)
		Yes	No	Yes	No		

Instructions: Attach this supplemental schedule to Form 1041-1, and file with the organization's Form 1041-1. This supplemental schedule is to be used to report information required by the instructions to Form 1041-1.

Section A: Public Support

Indicate whether the organization:	(a)	(b)	(c)	(d)	(e)	(f)
1. Has public support as defined in Section 170(e)(2)(B)(i) (including the "substantial" test) (Section 170(e)(2)(B)(i)(I))						
2. Has public support as defined in Section 170(e)(2)(B)(i) (including the "substantial" test) (Section 170(e)(2)(B)(i)(II))						
3. Has public support as defined in Section 170(e)(2)(B)(i) (including the "substantial" test) (Section 170(e)(2)(B)(i)(III))						
4. Has public support as defined in Section 170(e)(2)(B)(i) (including the "substantial" test) (Section 170(e)(2)(B)(i)(IV))						
5. Has public support as defined in Section 170(e)(2)(B)(i) (including the "substantial" test) (Section 170(e)(2)(B)(i)(V))						
6. Has public support as defined in Section 170(e)(2)(B)(i) (including the "substantial" test) (Section 170(e)(2)(B)(i)(VI))						

Section B: Total Support

Indicate whether the organization:	(a)	(b)	(c)	(d)	(e)	(f)
1. Has total support as defined in Section 170(e)(2)(B)(ii)(I)						
2. Has total support as defined in Section 170(e)(2)(B)(ii)(II)						
3. Has total support as defined in Section 170(e)(2)(B)(ii)(III)						
4. Has total support as defined in Section 170(e)(2)(B)(ii)(IV)						
5. Has total support as defined in Section 170(e)(2)(B)(ii)(V)						
6. Has total support as defined in Section 170(e)(2)(B)(ii)(VI)						
7. Has total support as defined in Section 170(e)(2)(B)(ii)(VII)						
8. Has total support as defined in Section 170(e)(2)(B)(ii)(VIII)						
9. Has total support as defined in Section 170(e)(2)(B)(ii)(IX)						
10. Has total support as defined in Section 170(e)(2)(B)(ii)(X)						
11. Has total support as defined in Section 170(e)(2)(B)(ii)(XI)						
12. Has total support as defined in Section 170(e)(2)(B)(ii)(XII)						
13. Has total support as defined in Section 170(e)(2)(B)(ii)(XIII)						
14. Has total support as defined in Section 170(e)(2)(B)(ii)(XIV)						
15. Has total support as defined in Section 170(e)(2)(B)(ii)(XV)						
16. Has total support as defined in Section 170(e)(2)(B)(ii)(XVI)						
17. Has total support as defined in Section 170(e)(2)(B)(ii)(XVII)						
18. Has total support as defined in Section 170(e)(2)(B)(ii)(XVIII)						
19. Has total support as defined in Section 170(e)(2)(B)(ii)(XIX)						
20. Has total support as defined in Section 170(e)(2)(B)(ii)(XX)						

Section C: Comparison of Public Support Percentage

21. Public support percentage for the year ending 12/31/2024 (Section 170(e)(2)(B)(i)(I))	(a)	(b)
22. Public support percentage for the year ending 12/31/2023	(a)	(b)
23. If the organization is a public charity, the 12/31/2024 public support percentage (Section 170(e)(2)(B)(i)(I))	(a)	(b)
24. If the organization is a public charity, the 12/31/2023 public support percentage (Section 170(e)(2)(B)(i)(I))	(a)	(b)
25. If the organization is a public charity, the 12/31/2024 public support percentage (Section 170(e)(2)(B)(i)(II))	(a)	(b)
26. If the organization is a public charity, the 12/31/2023 public support percentage (Section 170(e)(2)(B)(i)(II))	(a)	(b)
27. If the organization is a public charity, the 12/31/2024 public support percentage (Section 170(e)(2)(B)(i)(III))	(a)	(b)
28. If the organization is a public charity, the 12/31/2023 public support percentage (Section 170(e)(2)(B)(i)(III))	(a)	(b)
29. If the organization is a public charity, the 12/31/2024 public support percentage (Section 170(e)(2)(B)(i)(IV))	(a)	(b)
30. If the organization is a public charity, the 12/31/2023 public support percentage (Section 170(e)(2)(B)(i)(IV))	(a)	(b)
31. If the organization is a public charity, the 12/31/2024 public support percentage (Section 170(e)(2)(B)(i)(V))	(a)	(b)
32. If the organization is a public charity, the 12/31/2023 public support percentage (Section 170(e)(2)(B)(i)(V))	(a)	(b)
33. If the organization is a public charity, the 12/31/2024 public support percentage (Section 170(e)(2)(B)(i)(VI))	(a)	(b)
34. If the organization is a public charity, the 12/31/2023 public support percentage (Section 170(e)(2)(B)(i)(VI))	(a)	(b)

Part III Support Schedule for Organizations Described in Section 501(c)(29)

Provide the following information for each of the applicable federal fiscal years for the organization for which you are preparing this return.

Section A. Public Support

Provide an amount for each year for:	2011	2012	2013	2014	2015	Total
1. Gifts, grants, contributions, and membership fees received (Do not deduct any fundraising costs from this total on this line.)	1,128,498	1,124,124	1,128,214	1,125,184	1,125,112	5,631,132
2. Gross receipts from operations, including sales of inventory, capital assets, and real estate, less expenses directly related to the operations (including depreciation and amortization)	24,712	24,712	24,712	24,712	24,712	1,235,560
3. Gross receipts and activities that are not a substantial part of the organization's activities						
4. Tax-exempt bond proceeds the organization received and after subtracting a capitalized cost basis						
5. The value of services or facilities provided to a governmental entity by the organization under a contract						
6. Total support through 5	1,153,210	1,148,836	1,152,926	1,149,896	1,149,824	5,866,692
7. Amount included on lines 1, 2, and 3 in previous reporting period	128,214	1,124,112	128,214	128,214	128,214	2,637,068
8. Amount of a tax-exempt bond received in the federal income tax return for the year						0
9. Amount of a tax-exempt bond received in the state income tax return for the year						0
10. Public support (sum of lines 6, 7, 8, and 9)	128,214	1,124,112	128,214	128,214	128,214	5,566,692

Section B. Total Support

Provide an amount for each year for:	2011	2012	2013	2014	2015	Total
1. Total support from 10	1,153,210	1,148,836	1,152,926	1,149,896	1,149,824	5,866,692
2. Governmental fees received (including amounts paid to the federal government from other sources)	24,712	24,712	24,712	24,712	24,712	1,235,560
3. Investment income (Do not include tax-exempt bond interest reported on line 10, 11)						
4. Interest on tax-exempt bonds	24,712	24,712	24,712	24,712	24,712	1,235,560
5. Net assets from unrelated business activities included on the Schedule of Unrelated Business Income	0	0	0	0	0	0
6. Other income (including capital gains) reported on the organization's federal income tax return	24,712	24,712	24,712	24,712	24,712	1,235,560
7. Total support (sum of lines 1 through 6)	1,427,344	1,423,072	1,427,350	1,424,320	1,424,248	7,167,672
8. Amount used (1) to pay the federal income tax on the organization's income, less (2) the amount of a refund or a carryover of a refund						0

Section C. Computation of Public Support Percentage

11. Public support percentage for 2015 (line 10, divided by line 7) **100.00%**
 12. 10% requirement (line 10, divided by line 7) **100.00%**

Section D. Computation of Investment Income Percentage

13. Investment income percentage for 2015 (line 3, divided by line 7) **0.00%**
 14. 2% requirement (line 3, divided by line 7) **0.00%**

The 10% support test (line 11) is satisfied because the public support percentage is greater than or equal to 10%. The 2% investment income test (line 14) is satisfied because the investment income percentage is less than or equal to 2%. The organization is a public charity.
 15. If the 10% support test (line 11) is not satisfied, the organization is not a public charity.
 16. If the 2% investment income test (line 14) is not satisfied, the organization is not a public charity.
 17. If both the 10% support test (line 11) and the 2% investment income test (line 14) are not satisfied, the organization is not a public charity.

Section A. Type I Supporting Organizations (continued)

	Yes	No
1. Did the organization exercise significant influence that any of the following persons?		
a. A person who directly or indirectly controls, either alone or together with persons described in (b) and (c), the governing body of the supported organization?		
b. A state officer or director described in (a)?		
c. A 501(c)(3) individual who is a person described in (a) or (b) or a person described in (a)?		

Section B. Type I Supporting Organizations

	Yes	No
1. Did the decedent exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the organization's governing body is described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
2. Did the decedent exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		

Section C. Type II Supporting Organizations

	Yes	No
1. Was a majority of the organization's directors or officers during the year and also a majority of the decedent's trustees or members of the organization (supported organization) of the "Decedent's Will" form (the decedent's federal EIN number is entered in the "Decedent's Will" form) and a majority of the decedent's trustees or members of the organization (supported organization)?		

Section D. All Type II Supporting Organizations

	Yes	No
1. Did the organization exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
2. Was any of the organization's directors, officers, or trustees either a decedent or a person to be supported by the organization or described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or a person to be supported by the organization or described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
3. Did the decedent exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		

Section E. Type III Functionally Integrated Supporting Organizations

	Yes	No
1. Does the organization exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
2. <input type="checkbox"/> The organization exercises, or attempts to exercise, any of the powers described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
3. <input type="checkbox"/> The organization is the parent of each of the supported organizations. Complete part 2, using the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
4. <input type="checkbox"/> The organization exercised a governing body of the supported organization (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
5. Section F. Section 501(c)(29) Organizations		
6. Did the organization exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
7. Did the organization exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
8. Did the organization exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		
9. Did the organization exercise, or attempt to exercise, any of the powers described in (a) through (c) in the will of the decedent or in any other instrument, if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form) or if the decedent had any other power described in (a) through (c) of the "Decedent's Will" form (the supported organization's federal EIN number is entered in the "Decedent's Will" form)?		

Part 4: Non-Financially Integrated (NFII) Supporting Organizations

1. Check box if the organization is not a supporting organization (SO) (401) See instructions for the Part 4 instructions if you are reporting operations not covered by this Subpart E.

Section 170(e) Deduction Percentage	is this true	is this true
1. All donated assets are:		
a. Financially integrated with the donee		
b. Direct gifts from the donee		
c. Gifts from the donee		
d. Gifts from the donee		
e. Gifts from the donee		
f. Gifts from the donee		
2. Other income from the donee		
3. Additional information (attach Form 990 if not SO)		

Section 170(e) Deduction Percentage	is this true	is this true
1. Aggregate expenditures of the donee are used for:		
a. Average 100% of the donee's		
b. Average 100% of the donee's		
c. The donee's use of other non-exempt assets		
d. Support for the donee's		
e. Additional information (attach Form 990 if not SO)		
2. Additional information (attach Form 990 if not SO)		
3. Additional information (attach Form 990 if not SO)		
4. Additional information (attach Form 990 if not SO)		
5. Additional information (attach Form 990 if not SO)		
6. Additional information (attach Form 990 if not SO)		
7. Additional information (attach Form 990 if not SO)		
8. Additional information (attach Form 990 if not SO)		

Section 170(e) Deduction Percentage	is this true	is this true
1. Additional information (attach Form 990 if not SO)		
2. Additional information (attach Form 990 if not SO)		
3. Additional information (attach Form 990 if not SO)		
4. Additional information (attach Form 990 if not SO)		
5. Additional information (attach Form 990 if not SO)		
6. Additional information (attach Form 990 if not SO)		
7. Additional information (attach Form 990 if not SO)		
8. Additional information (attach Form 990 if not SO)		

2. Check box if the current use of the organization is a non-financially integrated (NFII) supporting organization (SO) (402)

Part V Type B Non-Functionally Integrated (NFI) Trusting Organizations (continued)

Section 170(e)(2)(B) Distribution	Amount
1. Amount paid to charitable organization to acquire property to be sold	
2. Amount paid to acquire property that directly benefits management or trustees (applicable to trusts of more than one year)	
3. Amount of the expense paid to purchase federal proceeds of research equipment	
4. Amount paid to purchase research equipment	
5. Amount of state and local property tax (to acquire research)	
6. Other distributions described in Part III, line 10	
7. Total annual distributions (Part III, line 10 plus 1 through 6)	
8. Distribution to another charitable organization to allow the recipient to deduct against state or Part III, line 10	
9. Distribution amount to 501(c)(3) donee (line 7 less 8)	
10. Total gross distribution (line 9 plus 8)	

Section 170(e)(2)(B) Distribution Allocation and Accounting	501(c)(3) Donee Distribution	501(c)(3) Independent Provider	501(c)(3) Charitable Recipient Other
1. Distribution amount to 501(c)(3) donee (line 9, 10)			
2. Distribution to 501(c)(3) donee (line 9, 10) less 100% charitable deduction			
3. Total distribution amount (line 9, 10)			
4. _____			
5. _____			
6. _____			
7. Total (line 3 through 6)			
8. Total to 501(c)(3) donee (line 1 plus 2)			
9. Total to 501(c)(3) independent provider			
10. Amount to 501(c)(3) other charitable recipient			
11. Amount to 501(c)(3) donee (line 1 plus 2)			
12. Amount to 501(c)(3) independent provider (line 1 plus 2)			
13. Amount to 501(c)(3) other charitable recipient (line 1 plus 2)			
14. Total (line 11 plus 12 plus 13)			
15. Amount to 501(c)(3) donee (line 1 plus 2) less 100% charitable deduction			
16. Amount to 501(c)(3) independent provider (line 1 plus 2) less 100% charitable deduction			
17. Amount to 501(c)(3) other charitable recipient (line 1 plus 2) less 100% charitable deduction			
18. Amount to 501(c)(3) donee (line 1 plus 2) less 100% charitable deduction (line 15)			
19. Amount to 501(c)(3) independent provider (line 1 plus 2) less 100% charitable deduction (line 16)			
20. Amount to 501(c)(3) other charitable recipient (line 1 plus 2) less 100% charitable deduction (line 17)			
21. Total (line 18 plus 19 plus 20)			
22. _____			
23. _____			
24. Total (line 21 plus 22 plus 23)			
25. Total (line 21)			
26. Total (line 21)			
27. Total (line 21)			

SCHEDULE D
Form 990

Supplemental Financial Statements

TAX YEAR
2015
OMB No. 1545-0047

▶ Complete if the organization answered "No" on Form 990, Part III, Section A, 990-20, 990-21, 990-22, 990-23, 990-24, 990-25, 990-26, 990-27, 990-28, 990-29, 990-30, 990-31, 990-32, 990-33, 990-34, 990-35, 990-36, 990-37, 990-38, 990-39, 990-40, 990-41, 990-42, 990-43, 990-44, 990-45, 990-46, 990-47, 990-48, 990-49, 990-50, 990-51, 990-52, 990-53, 990-54, 990-55, 990-56, 990-57, 990-58, 990-59, 990-60, 990-61, 990-62, 990-63, 990-64, 990-65, 990-66, 990-67, 990-68, 990-69, 990-70, 990-71, 990-72, 990-73, 990-74, 990-75, 990-76, 990-77, 990-78, 990-79, 990-80, 990-81, 990-82, 990-83, 990-84, 990-85, 990-86, 990-87, 990-88, 990-89, 990-90, 990-91, 990-92, 990-93, 990-94, 990-95, 990-96, 990-97, 990-98, 990-99, 990-100.

▶ **Information about Schedule D (Form 990) and Supplemental Financial Statements**
Name of the organization: _____ Supplemental distribution number: _____

Part I Organization Maintaining Assets in Other Similar Funds or Accounts
Organization: _____

	Reported amount	Reported other assets
1 Total assets at end of year		
2 Appropriate value of total assets in closing year		
3 Appropriate value at a date from which value		
4 Appropriate value at date of sale		
5 Do the organization's other purposes and other purposes in which the assets are held exceed the reported amounts, listed in the organization's financial statements?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
6 Do the organization's other purposes, interests, and other activities in which the assets are held exceed the reported amounts, listed in the organization's financial statements?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

Part II Consumer Payments Complete if the organization answered "No" on Form 990, Part III, Section A, 990-20, 990-21, 990-22, 990-23, 990-24, 990-25, 990-26, 990-27, 990-28, 990-29, 990-30, 990-31, 990-32, 990-33, 990-34, 990-35, 990-36, 990-37, 990-38, 990-39, 990-40, 990-41, 990-42, 990-43, 990-44, 990-45, 990-46, 990-47, 990-48, 990-49, 990-50, 990-51, 990-52, 990-53, 990-54, 990-55, 990-56, 990-57, 990-58, 990-59, 990-60, 990-61, 990-62, 990-63, 990-64, 990-65, 990-66, 990-67, 990-68, 990-69, 990-70, 990-71, 990-72, 990-73, 990-74, 990-75, 990-76, 990-77, 990-78, 990-79, 990-80, 990-81, 990-82, 990-83, 990-84, 990-85, 990-86, 990-87, 990-88, 990-89, 990-90, 990-91, 990-92, 990-93, 990-94, 990-95, 990-96, 990-97, 990-98, 990-99, 990-100.

- 1 Reported in consumer payments held by the organization during the year
 - Proceeds of a sale of a real estate property, including a secondary
 - Proceeds of a sale of a real estate property
 - Proceeds of a sale of a real estate property
 - Proceeds of a sale of a real estate property
- 2 Complete this information if the organization had a similar consumer contribution to the total of the reported amount in the last 12 months:

	Reported amount
a Total number of consumer payments	\$
b Total average monthly consumer payments	\$
c Number of consumer payments in a 12-month period	\$
d Number of consumer payments in a 12-month period	\$
- 3 Number of consumer payments received during the year, as determined by the organization, including:
 - a _____
 - b _____
 - c _____
- 4 Do the organization have a written policy regarding the periodic monitoring, auditing, and reporting of consumer payments received?
- 5 Do all consumer payments received, including reporting, auditing, and reporting, conform to the organization's policy?
- 6 Do all consumer payments received, including reporting, auditing, and reporting, conform to the organization's policy?
- 7 Do all consumer payments received, including reporting, auditing, and reporting, conform to the organization's policy?
- 8 Do all consumer payments received, including reporting, auditing, and reporting, conform to the organization's policy?

Part III Supplemental Monitoring Exclusions of All, Substantial, Temporary, or Other Similar Assets

- 1 This organization reports, in particular under Part III, 990-20, 990-21, 990-22, 990-23, 990-24, 990-25, 990-26, 990-27, 990-28, 990-29, 990-30, 990-31, 990-32, 990-33, 990-34, 990-35, 990-36, 990-37, 990-38, 990-39, 990-40, 990-41, 990-42, 990-43, 990-44, 990-45, 990-46, 990-47, 990-48, 990-49, 990-50, 990-51, 990-52, 990-53, 990-54, 990-55, 990-56, 990-57, 990-58, 990-59, 990-60, 990-61, 990-62, 990-63, 990-64, 990-65, 990-66, 990-67, 990-68, 990-69, 990-70, 990-71, 990-72, 990-73, 990-74, 990-75, 990-76, 990-77, 990-78, 990-79, 990-80, 990-81, 990-82, 990-83, 990-84, 990-85, 990-86, 990-87, 990-88, 990-89, 990-90, 990-91, 990-92, 990-93, 990-94, 990-95, 990-96, 990-97, 990-98, 990-99, 990-100.
- 2 This organization reports, in particular under Part III, 990-20, 990-21, 990-22, 990-23, 990-24, 990-25, 990-26, 990-27, 990-28, 990-29, 990-30, 990-31, 990-32, 990-33, 990-34, 990-35, 990-36, 990-37, 990-38, 990-39, 990-40, 990-41, 990-42, 990-43, 990-44, 990-45, 990-46, 990-47, 990-48, 990-49, 990-50, 990-51, 990-52, 990-53, 990-54, 990-55, 990-56, 990-57, 990-58, 990-59, 990-60, 990-61, 990-62, 990-63, 990-64, 990-65, 990-66, 990-67, 990-68, 990-69, 990-70, 990-71, 990-72, 990-73, 990-74, 990-75, 990-76, 990-77, 990-78, 990-79, 990-80, 990-81, 990-82, 990-83, 990-84, 990-85, 990-86, 990-87, 990-88, 990-89, 990-90, 990-91, 990-92, 990-93, 990-94, 990-95, 990-96, 990-97, 990-98, 990-99, 990-100.
- 3 This organization reports, in particular under Part III, 990-20, 990-21, 990-22, 990-23, 990-24, 990-25, 990-26, 990-27, 990-28, 990-29, 990-30, 990-31, 990-32, 990-33, 990-34, 990-35, 990-36, 990-37, 990-38, 990-39, 990-40, 990-41, 990-42, 990-43, 990-44, 990-45, 990-46, 990-47, 990-48, 990-49, 990-50, 990-51, 990-52, 990-53, 990-54, 990-55, 990-56, 990-57, 990-58, 990-59, 990-60, 990-61, 990-62, 990-63, 990-64, 990-65, 990-66, 990-67, 990-68, 990-69, 990-70, 990-71, 990-72, 990-73, 990-74, 990-75, 990-76, 990-77, 990-78, 990-79, 990-80, 990-81, 990-82, 990-83, 990-84, 990-85, 990-86, 990-87, 990-88, 990-89, 990-90, 990-91, 990-92, 990-93, 990-94, 990-95, 990-96, 990-97, 990-98, 990-99, 990-100.
- 4 This organization reports, in particular under Part III, 990-20, 990-21, 990-22, 990-23, 990-24, 990-25, 990-26, 990-27, 990-28, 990-29, 990-30, 990-31, 990-32, 990-33, 990-34, 990-35, 990-36, 990-37, 990-38, 990-39, 990-40, 990-41, 990-42, 990-43, 990-44, 990-45, 990-46, 990-47, 990-48, 990-49, 990-50, 990-51, 990-52, 990-53, 990-54, 990-55, 990-56, 990-57, 990-58, 990-59, 990-60, 990-61, 990-62, 990-63, 990-64, 990-65, 990-66, 990-67, 990-68, 990-69, 990-70, 990-71, 990-72, 990-73, 990-74, 990-75, 990-76, 990-77, 990-78, 990-79, 990-80, 990-81, 990-82, 990-83, 990-84, 990-85, 990-86, 990-87, 990-88, 990-89, 990-90, 990-91, 990-92, 990-93, 990-94, 990-95, 990-96, 990-97, 990-98, 990-99, 990-100.

- Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Acquisitions**
1. Complete this section if the organization is engaged in collecting, acquiring, or otherwise obtaining, or attempting to obtain, art or other similar acquisitions. If not, enter -0-
2. Public charity Not a charity State or territorial government Federal government
3. Check the box that best describes the organization's collection and explain how they define the organization's collection process in Part III:
4. Only the acquisition of the organization's collection is a primary purpose of all historical treasures, or other similar acquisitions.
5. The acquisition of the collection is a primary purpose of the organization's collection.

- Part IV Income and Custodial Arrangements.** Complete this section if the organization is a public charity or a state or territorial government.
1. The organization is not a public charity or a state or territorial government.
2. The organization is a public charity or a state or territorial government.
3. The organization is a public charity or a state or territorial government.
4. The organization is a public charity or a state or territorial government.
5. The organization is a public charity or a state or territorial government.
6. The organization is a public charity or a state or territorial government.
7. The organization is a public charity or a state or territorial government.
8. The organization is a public charity or a state or territorial government.

Part V Endowment Funds. Complete this section if the organization is a public charity or a state or territorial government.

	2015	2014	2013	2012	2011
1. Beginning of year balance	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
2. Contributions	10,000	10,000	10,000	10,000	10,000
3. Reinvestment earnings, gains, and losses	10,000	10,000	10,000	10,000	10,000
4. Grants or disbursements					
5. Other expenditures for the year					
6. End of year balance	1,120,000	1,120,000	1,120,000	1,120,000	1,120,000

7. The organization is a public charity or a state or territorial government.

8. The organization is a public charity or a state or territorial government.

9. The organization is a public charity or a state or territorial government.

10. The organization is a public charity or a state or territorial government.

Part VI Land, Buildings, and Equipment. Complete this section if the organization is a public charity or a state or territorial government.

Organization's property	2015	2014	2013	2012	2011
1. Land					
2. Buildings					
3. Land improvements					
4. Equipment					
5. Other					

Total. This line is subject to review by the IRS. Do not check this box if you are filing Form 990.

Part VII Investments - Other Securities

Complete this information for each investment that is included on Form 990-B for 2012, but not on Form 990-B for 2011.

Description of investment; include name of issuer, CUSIP number, and other identifying information	Acquired from	Included in Schedule K-1 or Schedule K-2 for 2012
14. Dividend income		
15. Interest/annuity income		
16. Dividends		
17		
18		
19		
20		
21		
22		
23		

Part VIII Investments - Program Related

Complete this information for each investment that is included on Form 990-B for 2012, but not on Form 990-B for 2011.

Description of investment; include name of issuer, CUSIP number, and other identifying information	Acquired from	Included in Schedule K-1 or Schedule K-2 for 2012
24		
25		
26		
27		
28		
29		
30		
31		
32		
33		

Part IX Other Assets

Complete this information for each asset that is included on Form 990-B for 2012, but not on Form 990-B for 2011.

Description of asset; include name of issuer, CUSIP number, and other identifying information	Acquired from	Included in Schedule K-1 or Schedule K-2 for 2012
34. Assets held for sale		0
35. Assets held in trust or similar arrangement		0
36. Cash accounts held in trust or similar arrangement		0
37. All other assets held in trust or similar arrangement		0
38. Securities interest in operating trust		0
39		
40		
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49		
50		

Part X Other Liabilities

Complete this information for each liability that is included on Form 990-B for 2012, but not on Form 990-B for 2011.

Description of liability; include name of issuer, CUSIP number, and other identifying information	Acquired from	Included in Schedule K-1 or Schedule K-2 for 2012
51. Bonds held for sale		
52. Securities interest		0
53. All other liabilities held in trust or similar arrangement		0
54		
55		
56		
57		
58		
59		
60		
61		
62		
63		
64		
65		
66		
67		
68		
69		
70		
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80		

If liability is a secured liability, attach Form 990-B for 2011, if any, and the name of the lender or issuer of the liability. If the liability is a secured liability, attach Form 990-B for 2011, if any, and the name of the lender or issuer of the liability.

Complete this supplemental schedule "X" on Form 990, Part II, and file.

1	Total revenue per audited financial statements						1	\$ 1,000,000
2	Amount included on the financial statements that is not reported							
3	Net included gain/loss on investments	(\$)	100					
4	Revenue excluded on the financial statements	(\$)	100					
5	Revenue included on the return	(\$)	100					
6	Other Schedule A Part VII:							
7	Net included gain/loss	(\$)	100					
8	Subtotal included on Form 990	(\$)	100					
9	Amount included on Form 990, Part III, line 12 for revenue from:							
10	Investment operations included on Form 990, Part III, line 12:	(\$)						
11	Other Schedule A Part VII:	(\$)	100					
12	Additional revenue	(\$)						\$ 100,000
13	Total revenue included on Form 990, Part III, line 12:	(\$)						\$ 100,000

Part XI. Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete this supplemental schedule "XI" on Form 990, Part II, and file.

1	Total expenses per audited financial statements						1	\$ 1,000,000
2	Amount included on the financial statements that is not reported							
3	Direct/indirect expense adjustment	(\$)	100					
4	Other items:	(\$)						
5	Other Schedule A Part VII:	(\$)	100					
6	Additional expense	(\$)						\$ 100,000
7	Subtotal included on Form 990, Part III, line 16:	(\$)	100					\$ 100,000
8	Amount excluded on Form 990, Part III, line 16:							
9	Investment operations excluded on Form 990, Part III, line 16:	(\$)						
10	Other Schedule A Part VII:	(\$)						
11	Additional expense	(\$)						\$ 100,000
12	Total expense included on Form 990, Part III, line 16:	(\$)						\$ 100,000

Part XII. Supplemental Information.

Provide the following supplemental information. Attach any supporting schedules to this page and file Form 990, Part II, and file.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____

1. The first condition is that the user is not logged in and is not logged out.

2. The second condition is that the user is not logged in and is not logged out.

3. The third condition is that the user is not logged in and is not logged out.

4. The fourth condition is that the user is not logged in and is not logged out.

Part 2: List of User Accounts

1. User Name: _____ Password: _____

Part 3: List of User Accounts

1. User Name: _____ Password: _____

Part 4: List of User Accounts

1. User Name: _____ Password: _____

Compensation information

For compensation, benefits, expenses, and reimbursements received by the organization's officers, directors, trustees, and highest compensated individuals (see instructions)

▶ Completed by preparator (attach Form 990) or Form 990, Part III, line 15.
▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions can be found at www.irs.gov/form990.

2015

Department of the Treasury
Internal Revenue Service

Part I Question Regarding Compensation

6. Check the appropriate box(es) if the organization awarded any of the following to or for a compensated officer, director, trustee, or highest compensated individual during the year:
- Increase in officer's role
 - Director's resignation
 - Tax reimbursement and gross-up payments
 - Reversal of a pending lawsuit
 - Issuance of stock or options to purchase stock
 - Participation in a restricted stock plan
 - Health or dental insurance or other benefits
 - Personal services to a family member

7. If any of the boxes in the list are checked, did the organization follow either the compensation committee or independent review process of what the organization believed should be the "reasonable" compensation for the officer?

8. If the organization made a determination not to reimburse or provide a benefit to a compensated officer, director, trustee, or other individual for reimbursement of expenses, reporting the same checked a box "No"

9. Indicate each category of reimbursement the organization used to reimburse the compensated officer, director, trustee, or other individual. Check the appropriate box(es) for each process to reimburse such a compensated officer, director, trustee, or other individual.

- Compensation committee
- Independent compensation committee
- Non-IRS staff of the organization
- Written agreement contract
- Compensation survey or study
- Reported to the Internal Compensation Committee

10. Using the table below, provide information for each officer, director, trustee, or highest compensated individual in column A, the type of compensation in column B, and the amount in column C.

- 11. Director's personal payment or change in compensation
 - 12. Participation in a stock option plan or equity-based compensation arrangement
 - 13. Health care, or other payment from an equity-based compensation arrangement
- If "Yes" to any of the rows, list the process and amount for applicable amounts for each officer in Part III.

14. Indicate if each officer, director, trustee, or highest compensated individual has a 6

15. For persons listed in Part III, Part III, Section A, the type of the organization's or officer's compensation arrangement in each of the rows of

	Yes	No
11. Director's personal payment or change in compensation		
12. Participation in a stock option plan or equity-based compensation arrangement		
13. Health care, or other payment from an equity-based compensation arrangement		
14. Indicate if each officer, director, trustee, or highest compensated individual has a 6		
15. For persons listed in Part III, Part III, Section A, the type of the organization's or officer's compensation arrangement in each of the rows of		
16. The organization		
17. The officer's compensation		
18. For persons listed in Part III, Part III, Section A, the type of the organization's or officer's compensation arrangement in each of the rows of		
19. The organization		
20. The officer's compensation		
21. For persons listed in Part III, Part III, Section A, the type of the organization's or officer's compensation arrangement in each of the rows of		
22. The organization		
23. The officer's compensation		
24. For persons listed in Part III, Part III, Section A, the type of the organization's or officer's compensation arrangement in each of the rows of		
25. The organization		
26. The officer's compensation		
27. For persons listed in Part III, Part III, Section A, the type of the organization's or officer's compensation arrangement in each of the rows of		
28. The organization		
29. The officer's compensation		
30. For persons listed in Part III, Part III, Section A, the type of the organization's or officer's compensation arrangement in each of the rows of		
31. The organization		
32. The officer's compensation		

1. **Project Name:** _____ **Project Number:** _____ **Project Type:** _____
 2. **Project Manager:** _____ **Project Sponsor:** _____
 3. **Project Start Date:** _____ **Project End Date:** _____
 4. **Project Budget:** _____ **Project Status:** _____
 5. **Project Description:** _____
 6. **Project Objectives:** _____
 7. **Project Risks:** _____
 8. **Project Deliverables:** _____
 9. **Project Stakeholders:** _____
 10. **Project Communication Plan:** _____
 11. **Project Reporting Structure:** _____
 12. **Project Approval:** _____
 13. **Project Review:** _____
 14. **Project Closure:** _____

Activity/Task	Activity/Task Description		Activity/Task Duration (Days)	Activity/Task Start Date	Activity/Task End Date	Activity/Task Status	Activity/Task Progress (%)	Activity/Task Resources	Activity/Task Budget (USD)	Activity/Task Risk Level	Activity/Task Notes
	Activity/Task ID	Activity/Task Name									
1.1. Project Initiation	1.1.1	Project Charter Development	5	2023-01-01	2023-01-05	Completed	100%	Project Manager, Business Analyst	\$5,000	Low	Project Charter approved.
1.1. Project Initiation	1.1.2	Stakeholder Identification	5	2023-01-06	2023-01-10	In Progress	75%	Project Manager, Business Analyst	\$5,000	Low	Stakeholder list being finalized.
1.1. Project Initiation	1.1.3	Project Scope Definition	5	2023-01-11	2023-01-15	Not Started	0%	Project Manager, Business Analyst	\$5,000	Low	Scope definition meeting scheduled.
1.1. Project Initiation	1.1.4	Project Risk Assessment	5	2023-01-16	2023-01-20	Not Started	0%	Project Manager, Business Analyst	\$5,000	Low	Risk assessment workshop to be held.
1.1. Project Initiation	1.1.5	Project Communication Plan Development	5	2023-01-21	2023-01-25	Not Started	0%	Project Manager, Business Analyst	\$5,000	Low	Communication plan template to be reviewed.
1.1. Project Initiation	1.1.6	Project Reporting Structure Setup	5	2023-01-26	2023-01-30	Not Started	0%	Project Manager, Business Analyst	\$5,000	Low	Reporting structure to be approved.
1.1. Project Initiation	1.1.7	Project Approval	5	2023-01-31	2023-02-04	Not Started	0%	Project Manager, Business Analyst	\$5,000	Low	Approval meeting to be held.
1.1. Project Initiation	1.1.8	Project Review	5	2023-02-05	2023-02-09	Not Started	0%	Project Manager, Business Analyst	\$5,000	Low	Review meeting to be held.
1.1. Project Initiation	1.1.9	Project Closure	5	2023-02-10	2023-02-14	Not Started	0%	Project Manager, Business Analyst	\$5,000	Low	Closure meeting to be held.
1.1. Project Initiation	1.1.10	Project Archiving	5	2023-02-15	2023-02-19	Not Started	0%	Project Manager, Business Analyst	\$5,000	Low	Archiving process to be initiated.

SCHEDULE L

Transactions With Interested Persons

2015

1. Name of the corporation: _____
 2. Address of the corporation: _____
 3. Name of the officer: _____

Part I - Loans to or from Interested Persons

1. Name of interested person	2. Relationship to the corporation	3. Description of transaction	4. Amount	
			Out	In

5. Total amount of loans to interested persons: _____
 6. Total amount of loans from interested persons: _____

Part II - Loans to or from Non-Interested Persons

1. Name of non-interested person	2. Relationship to the corporation	3. Description of transaction	4. Amount		5. Date	6. Interest rate	7. Total amount		8. Other
			Out	In			Out	In	

Part III - Details of Securities Held by Interested Persons

1. Name of interested person	2. Relationship to the corporation	3. Description of securities	4. Type of securities	5. Amount	
				Out	In

7. Total amount of securities held by interested persons: _____

Part IV Additional Information Regarding Beneficial Owners

Provide the information requested for each beneficial owner of the foreign entity.

Name of Beneficial Owner	Is Beneficial Owner (as defined in Reg. 1.1431-1(b)(1)(ii))?	U.S. Address	SSN or EIN	Date of Birth	
				MM	DD

Part V Supplemental Information

Provide the following information in response to questions in Section 1 and instructions.

Section 1, part 11, item 11. Are there additional owners? _____

(a) Name of owner: _____

(b) Relationship with preparer: _____

(c) Address of owner: _____

Section 1, part 11, item 11. Are there additional owners? _____

(a) Name of the owner: _____

(b) Relationship with preparer: _____

(c) Address of owner: _____

(d) Date of birth: _____

(e) SSN or EIN: _____

(f) U.S. address: _____

(g) Date of birth: _____

(h) SSN or EIN: _____

(i) U.S. address: _____

(j) Date of birth: _____

(k) SSN or EIN: _____

Noncash Contributions

2015

OMB No. 1545-0047

- ▶ Complete this supplement regardless of whether you have any noncash contributions.
- ▶ Attach to Form 990.
- ▶ Information about Form 990 (Part VII) and its instructions is located in separate publications.

Part I Type of property

	(a) Class of property	(b) Number of contributions	(c) Adjusted contribution property value (see instructions)	(d) Adjusted net book value (see instructions)
1	Art collection			
2	Art objects (paintings)			
3	Art objects (sculptures)			
4	Art objects (other)			
5	Books and manuscripts			
6	Collectible items (see instructions)	1		100,000,000,000
7	Coins and stamps			
8	Commodities			
9	Securities (see instructions)	1		1,000,000,000,000
10	Securities (other than listed securities)			
11	Securities (other than listed securities) (see instructions)			
12	Securities (other than listed securities) (see instructions)			
13	Securities (other than listed securities) (see instructions)			
14	Securities (other than listed securities) (see instructions)			
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97	Securities (other than listed securities) (see instructions)			
98	Securities (other than listed securities) (see instructions)			
99	Securities (other than listed securities) (see instructions)			
100	Securities (other than listed securities) (see instructions)			

80. Total of lines 1 through 100 of this supplement should equal the number of contributions reported on the supplemental schedule that is being submitted.

	Yes	No
81. Did you have any noncash contributions that were reported on Form 990-B but not reported on this supplement?		
82. Did you have any noncash contributions that were reported on Form 990-B but not reported on this supplement?		
83. Did you have any noncash contributions that were reported on Form 990-B but not reported on this supplement?		
84. Did you have any noncash contributions that were reported on Form 990-B but not reported on this supplement?		

Supplemental Information: Please provide information regarding your research, including the research question, the research design, the data collection, the analysis, and the results. The information should be provided in a clear and concise manner. The length of the supplemental information should be approximately 1000 words.

SCHEDULE O
Other Schedule O

Supplemental Information to Form 990 or 990-EZ

Provide a more complete description of the activity in
Line 22 of Form 990 or Form 990-EZ or provide any additional information.
▶ Attach to Form 990 or 990-EZ

Tax year

2015

Department
Number

Organization name

Address

City or town

▶ Attach to Form 990 or 990-EZ

Employer identification number

(EIN)

Line 22, 2015 (2), 2015 (3), 2015 (4), 2015 (5)

2015 (6), 2015 (7), 2015 (8), 2015 (9), 2015 (10)

2015 (11)

2015 (12), 2015 (13), 2015 (14), 2015 (15)

2015 (16), 2015 (17), 2015 (18)

A part of the year you do not fit into any other box is the

2015 (19), 2015 (20), 2015 (21), 2015 (22), 2015 (23)

2015 (24), 2015 (25), 2015 (26), 2015 (27), 2015 (28)

2015 (29), 2015 (30), 2015 (31), 2015 (32)

2015 (33), 2015 (34), 2015 (35), 2015 (36)

2015 (37), 2015 (38), 2015 (39), 2015 (40)

2015 (41), 2015 (42), 2015 (43), 2015 (44)

2015 (45), 2015 (46), 2015 (47), 2015 (48)

2015 (49), 2015 (50), 2015 (51), 2015 (52)

2015 (53), 2015 (54), 2015 (55), 2015 (56)

2015 (57), 2015 (58), 2015 (59), 2015 (60)

2015 (61), 2015 (62), 2015 (63), 2015 (64)

2015 (65), 2015 (66), 2015 (67), 2015 (68)

2015 (69), 2015 (70), 2015 (71), 2015 (72)

2015 (73), 2015 (74), 2015 (75), 2015 (76)

THE DECEDENT HAS THE FOLLOWING POWER OF ATTORNEY:

RESIDING AT: _____

1. _____

RESIDING AT: _____

2. _____

RESIDING AT: _____

3. _____

RESIDING AT: _____

4. _____

RESIDING AT: _____

5. _____

RESIDING AT: _____

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RESIDING AT: _____

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RESIDING AT: _____

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RESIDING AT: _____

9. _____

RESIDING AT: _____

10. _____

RESIDING AT: _____

11. _____

RESIDING AT: _____

12. _____

RESIDING AT: _____

13. _____

RESIDING AT: _____

14. _____

RESIDING AT: _____

Financial Statement Period: _____

STAFF AND BOARD MEMBERS ARE LISTED AS FOLLOWS:

STAFF MEMBERS: _____

BOARD MEMBERS: _____

FOR THE YEAR ENDING _____

STATE OF TEXAS IN UNINCORPORATED FORM _____

STATE OF TEXAS IN INCORPORATED FORM _____

FORM NO. 2000-01-0001 (10-1-10) _____

FORM NO. 2000-01-0001

THE STATE COMPTROLLER OF PUBLIC ACCOUNTS HAS REVIEWED THE STATE OF _____

ACCOUNTS IN ACCORDANCE WITH THE PROVISIONS OF THE STATE OF _____

AND APPROVED THE ACCOUNTS, RECEIPTS AND EXPENDITURES OF _____

THE STATE OF TEXAS FOR THE YEAR ENDING _____

AS SET FORTH IN THE STATE OF TEXAS _____

IN THE STATE OF TEXAS FOR THE YEAR ENDING _____

AS SET FORTH IN THE STATE OF TEXAS _____

AND APPROVED THE ACCOUNTS, RECEIPTS AND EXPENDITURES OF _____

THE STATE OF TEXAS FOR THE YEAR ENDING _____

AS SET FORTH IN THE STATE OF TEXAS _____

AND APPROVED THE ACCOUNTS, RECEIPTS AND EXPENDITURES OF _____

THE STATE OF TEXAS FOR THE YEAR ENDING _____

AS SET FORTH IN THE STATE OF TEXAS _____

AND APPROVED THE ACCOUNTS, RECEIPTS AND EXPENDITURES OF _____

THE STATE OF TEXAS FOR THE YEAR ENDING _____

AS SET FORTH IN THE STATE OF TEXAS _____