Form	990
Form	<b>990</b>

Department of the Treasury

For the 0040 color deriver

Internal Revenue Service

# \*\* PUBLIC DISCLOSURE COPY \*\*

Return of Organization Exempt From Income Tax 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.

an al an alim a



<u>A r</u>	or the	a 2018 calendar year, or tax year beginning and	i enaing		
<b>B</b> C a	heck if pplicabl	c Name of organization		D Employer identified	cation number
	Addre	e NONPROFII CONNECI: NEIWORK, LEARN, GRO	W		
	Name Chang	e Doing business as		43-1	121678
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	E Telephone number		
	Final return	125 E. 31ST STREET	100	816-	888-5600
	termin ated	, , , , , , , , , , , , , , , , , , ,		G Gross receipts \$	1,382,999.
	Amen	RANSAS CITT, MO 04108		H(a) Is this a group re	
	Applic tion	F Name and address of principal officer: DOAMN FEERAM	for subordinates	? Yes X No	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
		empt status: X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. (see instructions)
J۷	Vebsi	te: VWW.NPCONNECT.ORG		H(c) Group exemption	n number 🕨
KF	orm of	organization: 🔀 Corporation 📄 Trust 🦳 Association 📄 Other 🕨	L Year	of formation: 1974 N	State of legal domicile: MO
Pa	art I	Summary			
•	1	Briefly describe the organization's mission or most significant activities: TO P		ASSISTANCE	AND
ů ů		TRAINING TO OTHER NONPROFIT ORGANIZATIONS	5		
rna	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispo	sed of more	than 25% of its net ass	
Governance	3	Number of voting members of the governing body (Part VI, line 1a)			16
Ō	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	16
Activities &	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	<u> </u>
	6	Total number of volunteers (estimate if necessary)	)		
(cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, line 38		7b	0.
				Prior Year	Current Year
¢	8	Contributions and grants (Part VIII, line 1h)		256,134.	354,963.
nué	9	Program service revenue (Part VIII, line 2g)		585,537.	699,877.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		38,545.	52,653.
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-19,495.	-18,511.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		860,721.	1,088,982.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	9,575.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		464,538.	554,880.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
e de	b	Total fundraising expenses (Part IX, column (D), line 25)	57.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		274,206.	386,914.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		738,744.	951,369.
	19	Revenue less expenses. Subtract line 18 from line 12		121,977.	137,613.
or Ces			Be	ginning of Current Year	End of Year
Assets	20	Total assets (Part X, line 16)		1,149,905.	1,403,779.
t As d B	21	Total liabilities (Part X, line 26)		161,179.	372,357.
Fund		Net assets or fund balances. Subtract line 21 from line 20		988,726.	1,031,422.
I Da	1 4.	Signature Block			

Part II Signature Block

T,

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Da	ate							
Here	LUANN FEEHAN, EXECUTIVE DIRECT	lor								
	Type or print name and title									
	Print/Type preparer's name Preparer's sigr	nature Date	Check PTIN							
Paid	RICH A. BILI RICH A.	BILI	self-employed P00310364							
Preparer	Firm's name 🕨 KELLER & OWENS, LLC	Fi	rm's EIN ▶ 48-1195228							
Use Only	Firm's address 10955 LOWELL AVE, STE 8	00								
	OVERLAND PARK, KS 66210	PI	hone no. (913) 338-3500							
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)									
832001 12-3	32001 12-31-18LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2018)									

(Rev. January 2019)

### Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

►	File a	separate	application	for each	return.

► Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identifying n	umber
Type or	Name of exempt organization or other filer, see instru	uctions.		Employe	r identification nu	imber (EIN) or
print					12 1101	C 7 0
File by the					43-1121	
due date fo filing your return. See	r Number, street, and room or suite no. If a P.O. box, s 125 E. 31ST STREET, NO. 100		ions.	Social se	curity number (S	SN)
instruction	City, town or post office, state, and ZIP code. For a fee KANSAS CITY, MO 64108	oreign addi	ress, see instructions.			
Enter th	e Return Code for the return that this application is for (fil	e a separa	te application for each return)			0 1
Applica	tion	Return	Application			Return
ls For		Code	Is For			Code
Form 99	Form 990 or Form 990-EZ		Form 990-T (corporation)			07
Form 99	0-BL	02	Form 1041-A			08
Form 47	20 (individual)	03	Form 4720 (other than individual)			09
Form 99	Form 990-PF		Form 5227			10
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	0-T (trust other than above)	06	Form 8870			12
Telep If the If this box 1 Ir th 2 If 2	the tax year entered in line 1 is for less than 12 months, c	s in the Uni Group Exe and atta <b>NOVE!</b> nanization's , an check rease	Fax No.       ▶         ited States, check this box	If this is fo all memb	r the whole group ers the extension npt organization r	▶ □ b, check this h is for.
	this application is for Forms 990-BL, 990-PF, 990-T, 4720 ny nonrefundable credits. See instructions.	, or 6069, 6	enter the tentative tax, less	3a	\$	0.
b lf	this application is for Forms 990-PF, 990-T, 4720, or 6069	9, enter any	refundable credits and			
	timated tax payments made. Include any prior year over			3b	\$	0.
c Ba	alance due. Subtract line 3b from line 3a. Include your pa	ayment witl	h this form, if required, by			
	ing EFTPS (Electronic Federal Tax Payment System). Se	•		3c	\$	Ο.
instructi				453-EO an		
LHA	For Privacy Act and Paperwork Reduction Act Notice,	, see instru	ICTIONS.		Form 8868	(Rev. 1-2019)

823841 12-19-18

	<pre>f "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X Not f "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and evenue, if any, for each program service reported. Code:</pre>
	NONPROFIT CONNECT LINKS THE NONPROFIT COMMUNITY TO EDUCATION, RESOURCES AND NETWORKING SO ORGANIZATIONS CAN MORE EFFECTIVELY ACHIEVE THEIR MISSIONS.  Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?  I Yes X Not f Yes, 'describe these new services on Schedule 0. Did the organization case conducting, or make significant changes in how it conducts, any program services? Yes X Not f Yes, 'describe these changes on Schedule 0. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and evenue, if any, for each program service reported. Code: () (Expenses 3 27,729. including grants of 4,575.) (Revenue 8 169,499. EDUCATION A. EDUCATIONAL PROGRAMS - PROFESSIONAL DEVELOPMENT PROGRAMS ARE DFFERED TO MEET THE DIVERSE TRAINING NEEDS OF BOARD OF DIRECTORS, EXECUTIVE DIRECTORS, ADVANCED PROFESSIONALS, VOLUNTEER MANAGERS, FUNDRALSERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG PROFESSIONALS. B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY. Code: () (Expenses 184,037. including grants of 5,000.) (Revenue 8 27,385.
	RESOURCES AND NETWORKING SO ORGANIZATIONS CAN MORE EFFECTIVELY ACHIEVE THEIR MISSIONS.  Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?  1 "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X Nu (*Yes," describe these changes on Schedule O. Describe the organizations are required to report the amount of grants and allocations to others, the total expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and evenue, if any, for each program service reported. Code:  () (Expenses \$ 327,729. including grants of \$ 4,575.) (Revenue \$ 169,499. EDUCATION A. EDUCATIONAL PROGRAMS – PROFESSIONAL DEVELOPMENT PROGRAMS ARE DFFERED TO MEET THE DIVERSE TRAINING NEEDS OF BOARD OF DIRECTORS, EXECUTIVE DIRECTORS, ADVANCED PROFESSIONALS, VOLUNTEER MANAGERS, FUNDRAISERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG PROFESSIONALS. B. CONNEXT, FOR EMERGING NONPROFIT LEADERS – PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY.  Code:  () (Expenses \$ 184,037. including grants of \$ 5,000.) (Revenue \$ 27,385. EVENTS
	THEIR MISSIONS.         Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?       Yes X Nu         Pryes, "describe these new services on Schedule 0.       Yes (X Nu         Did the organization cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses.       Yes (X Nu         Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.       Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and evenue, if any, for each program service reported.       327,729. including grants of 4,575.) (revenue \$ 169,499.         Code:       ) (Expenses 3 27,729. including grants of 5 4,575.) (revenue \$ 169,499.       169,499.         EDUCATION       Sector DIVERSE TRAINING NEEDS OF BOARD OF DIRECTORS,       EXECUTIVE DIRECTORS, ADVANCED PROFESSIONALS, VOLUNTEER MANAGERS,         FUNDRAISERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG       PROFESSIONALS.       S.         B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY.       27,385.         Code:       ) (Expenses 184,037. including grants of 5,000.) (Revenue \$ 27,385.       27,385.
	Did the organization undertake any significant program services during the year which were not listed on the
	brior Form 990 or 990-EZ? Yes X Notes in the second stress of the second
	brior Form 990 or 990-EZ? Yes X Notes in the second stress of the second
	f "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	<pre>f "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. Code:</pre>
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. Code:
	revenue, if any, for each program service reported. Code:
	Code:
	A. EDUCATION A. EDUCATIONAL PROGRAMS - PROFESSIONAL DEVELOPMENT PROGRAMS ARE DFFERED TO MEET THE DIVERSE TRAINING NEEDS OF BOARD OF DIRECTORS, EXECUTIVE DIRECTORS, ADVANCED PROFESSIONALS, VOLUNTEER MANAGERS, FUNDRAISERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG PROFESSIONALS. B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY. Code:)(Expenses 184,037. including grants of \$5,000.) (Revenue \$27,385. EVENTS
	A. EDUCATION A. EDUCATIONAL PROGRAMS - PROFESSIONAL DEVELOPMENT PROGRAMS ARE DFFERED TO MEET THE DIVERSE TRAINING NEEDS OF BOARD OF DIRECTORS, EXECUTIVE DIRECTORS, ADVANCED PROFESSIONALS, VOLUNTEER MANAGERS, FUNDRAISERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG PROFESSIONALS. B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY. Code:)(Expenses 184,037. including grants of \$5,000.) (Revenue \$27,385. EVENTS
	DFFERED TO MEET THE DIVERSE TRAINING NEEDS OF BOARD OF DIRECTORS, EXECUTIVE DIRECTORS, ADVANCED PROFESSIONALS, VOLUNTEER MANAGERS, FUNDRAISERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG PROFESSIONALS. B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY.
	EXECUTIVE DIRECTORS, ADVANCED PROFESSIONALS, VOLUNTEER MANAGERS, FUNDRAISERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG PROFESSIONALS. B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY. Code:)(Expenses \$
	EXECUTIVE DIRECTORS, ADVANCED PROFESSIONALS, VOLUNTEER MANAGERS, FUNDRAISERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG PROFESSIONALS. B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY. Code:)(Expenses \$
	FUNDRAISERS, OPERATIONS, COMMUNICATIONS, FUNDERS AND YOUNG PROFESSIONALS. B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY. Code:)(Expenses \$
	B. CONNEXT, FOR EMERGING NONPROFIT LEADERS - PROMOTES THE RECRUITMENT, DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY.
	DEVELOPMENT AND RETENTION OF YOUNG PROFESSIONALS IN THE NONPROFIT SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY.
	SECTOR TO SUPPORT AND ENHANCE A STRONG DYNAMIC NONPROFIT COMMUNITY.
	Code:) (Expenses \$184,037. including grants of \$5,000. ) (Revenue \$27,385. EVENTS
EIAIOIAIAIEIGIBICI	EVENTS
EIAIOIAIAIEIGIBICI	EVENTS
IAIAIEIGIBICI	
IAIEIGIBICI	ONLY FUNDRAISER, NOW IN ITS 35TH YEAR. THE LUNCHEON HONORS THE
EIGIBICI	PHILANTHROPIST, BUSINESS PHILANTHROPIST, VOLUNTEER AND NONPROFIT
GBC	PROFESSIONAL OF THE YEAR, AS WELL AS THOSE EMERGING IN PHILANTHROPY,
B C	EXCELLENCE IN COLLABORATION AND IMPACT. THIS EVENT, HELD EVERY MAY,
C	GATHERS 1,000 MEMBERS OF THE FOR-PURPOSE AND FOR-PROFIT COMMUNITY.
	B. PHILLY AWARDS - THE PHILLY AWARDS RECOGNIZE NONPROFITS AND THEIR
Ē	CREATIVE PARTNERS FOR EXCELLENCE IN MARKETING AND COMMUNICATIONS. THIS
_	EVENT IS HELD ANNUALLY IN THE FALL.
_	
- /-	Code:) (Expenses \$ 163,291. including grants of \$) (Revenue \$ 505,142.
	Code:) (Expenses \$105,291. including grants of \$) (Revenue \$) (
_	A. MEMBERSHIP - WHEN A NONPROFIT JOINS NONPROFIT CONNECT, IT IS
	CONNECTED TO A NETWORK OF 800 MEMBERS THAT SPANS ALL BUDGET SIZES, AND
	ACTIVITY AREAS IN THE METRO. BECAUSE OF OUR EXPANSIVE MEMBERSHIP BASE,
	NONPROFIT CONNECT DRAWS UPON THE EXPERTISE AND KNOWLEDGE OF THIS
	NETWORK TO DEVELOP PROGRAMS AND SERVICES THAT INFORM, PROMOTE, CONNECT
	AND STRENGTHEN INDIVIDUAL NONPROFITS AND THE NONPROFIT SECTOR.
	B. WEBSITE - THE WEBSITE AT WWW.NPCONNECT.ORG IS THE REGION'S
	NONPROFIT CAREER HEADQUARTERS, OFFERING ONE OF THE PREMIER NONPROFIT
	JOB INFORMATION PORTALS ON THE WEB. ON ANY GIVEN DAY, OVER 200 JOB
	OPENINGS ARE POSTED ON JOBLINK, WHICH RECEIVES AN AVERAGE OF 150,000
	PAGE VIEWS PER MONTH. ANOTHER POPULAR PORTAL ON THE WEBSITE IS THE
	Other program services (Describe in Schedule O.)
e To	Expenses \$ including grants of \$ ) (Revenue \$ )
2000 **	Expenses \$ including grants of \$ ) (Revenue \$ )       Total program service expenses > 675,057.
2002 12	Expenses \$ including grants of \$ ) (Revenue \$ ) Total program service expenses • 675,057. Form 990 (201

Form 990 (2		NONPROFIT		NETWORK,	LEARN,	GROW
Part IV	Checklist of R					

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?				Yes	No
2         Is the organization engage in direct particle of contributors?         2         X           3         Did the organization engage in direct particle camplage activities on behalf of or in opposition to candidates for public office? If ''res,' complete Schedule C, Part I         3         X           4         Section 501(b)(3) organizations. Do the organization engage in loobying activities, or have a section 501(b) election in effect of the organization as addred in Revue Proceeder B917 /''res,' complete Schedule C, Part II         4         X           5         Is the organization anisatian any doner advised tunks or any similar funds or accounts for which donors have the eight to provide advise on the distribution or investment of amounts in such funds or accounts for Wes,' complete Schedule D, Part I         6         X           7         X         He organization maintain any doner advised tunks or any complete Schedule D, Part I         6         X           8         X         He organization maintain collections of works of at, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part I         8         X           9         Did the organization maintain collections of works of at, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part V         10         X           10         Did the organization max on anount in Part X, ine 21, for secony or custodial account labelty serves as a custodian for any corrorisis credit courseling, dott management, credit repair, web, 'complete Schedule D, Part V         10	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
<ul> <li>3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public official" if Yes, 'complete Schedule C, Part II</li> <li>4 Section 501(b) organizations. Did the organization ingage in lobbying activities, or have a section 501(b) election in affect during the tax year? If Yes, 'complete Schedule C, Part II</li> <li>5 Lis the organization assection 301(b) organization that rookes membership dues, assessments, or similar amounts as defined in Reverue Procedure 84:197 / Yes, 'complete Schedule C, Part II</li> <li>6 Did the organization maintain any donce advect funds or any similar funds or accounts? If Yes, 'complete Schedule D, Part II</li> <li>7 Did the organization review or those assement, including easignmist to previse as a substantian or any similar desement, breating easients in protein similar assets? If Yes, 'complete Schedule D, Part II</li> <li>8 Did the organization environs and the organization, the assets in temporarily restricted endowments, permanent endowments? If Yes, 'complete Schedule D, Part II</li> <li>9 Did the organization assets and mount in Part X, line 13, for eacourd or caustodial afor amounts not listed In Part X, line 13, for eacourd or caustodial account liability, serve as a substantian calculation and the organization, notic assets in temporarily restricted endowments, permanent endowments? If Yes, 'complete Schedule D, Part II</li> <li>10 Did the organization report an amount for fund, buildings, and equipment in Part X, line 13 Part X, line 14 Part X, line 15 Part X = complete Schedule D, Part X</li> <li>11 Did the organization report an amount for</li></ul>		If "Yes," complete Schedule A	1		
public official of "IrYse," complete Schedule, Q, Part I         3         X           4 Section 501(c)[0] organization. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during that as year? If "Yse," complete Schedule Q. Part II         4         X           5         is the organization a section 501(c)(k), 501(c)(k), or 501(c)(k) organization that receives membership dues, assessments, or similar amountain any choice advised funds or any similar funds or accounts? If "Yse," complete Schedule D, Part II         5         X           6         Did the organization receive or hold a conservation assement, including easements to preserve open space. The environment, historic luid areas, or historic attructures? If "Yse," complete Schedule D, Part II         7         X           8         Did the organization receive or hough a related organization. Including easement, credit repair, or debt negotiation service?         8         X           9         Did the organization receive or hough a related organization. Including account, lability, serve as a custodian for amounts not lised in Part X, ine 21, for sacrow or custodial account lability, serve as a custodian for amounts not lised in Part X, ine 10 the solonowing, debt management, credit repair, or debt negotiation server If "Yes," complete Schedule D, Part V         10         X           10         Did the organization, decouve for mough a related organization. Houge Y mough are stated organization. Houge Y mough are state organization in the part X, line 12 hat is 5% or more of its total assets reported in Part X, line 17 hrss," complete Schedule D, Part X, line 12 hat is 5% or more	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	ļ
4         Section 501(c)(3) organizations. Did the organization angage in lobbying activities, or have a section 501(h) election in effect         4         X           5         Is the organization a section 501(h)(h), 501(k)(h), or 50(k)(h), or 50(k)(h), or 50(k)(h	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year? If Yes," complete Schedule C, Part II         4         X           5         Is the organization a section S(10(4), 50(10(5)) or		public office? If "Yes," complete Schedule C, Part I	3		X
5         Is the organization a sector 501(c)(4), 601(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 80 492 (*****), complete Schedule C, Part II         5         X           Did the organization maintain any doorn advised funds or any similar indis or accounts? If **cs, "complete Schedule D, Part II         6         X           Did the organization maintain any doorn advised funds or any similar indis or accounts? If **cs, "complete Schedule D, Part II         6         X           Did the organization maintain or bid a conservation assemuti, including assemutis to preservo gene space, the environment, historic land areas, or historic structures? If **cs, "complete Schedule D, Part II         7         X           Did the organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodial for amounts not listed in Part X, or provide credit counseling, deth management, credit main, or cetts negation services? If **cs, 'complete Schedule D, Part IV         9         X           Did the organization, directly or through a related organization, hold assets in temporarily restricted andowments, permanent endowments, or quasi-andownents? If *vcs, "complete Schedule D, Part V         10         X           Did the organization report an amount for investments - other securities in Part X, line 12? If *vcs, "complete Schedule D, Part V         111a         X           Did the organization report an amount for investments - other securities in Part X, line 13 that 15 % or more of its total assets reported in Part X, line 167 If *vcs, "complete Schedule D, Par	4				
a millia annountis as defined in Revenue Procedure 89-102 // Yigs, complete Schedule C, Part II         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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to the envanisation maintain collections of vorted or accounts for the response open space. The environment, historical transs, or historical transsures, or other asimilar assets? If Yigs, "complete Schedule D, Part II         7         X           8         Did the organization maintain collections of vorted or afficient transsures, or other asimilar assets? If Yigs, "complete Schedule D, Part II         8         X           9         Did the organization, directly or through a nelled organization, hold assets in temporarily restricted endowments, permanent endowments? If Yings, "complete Schedule D, Part VI         10         X           10         Did the organization, directly or through a nelled organization, hold assets in temporarily restricted endowments, permanent endowments? If Yings, "complete Schedule D, Part VI         10         X           11         If the organization report an amount for lends, buildings, and equipment in Part X, line 107 If Yings, "complete Schedule D, Part VI         11         X           12         Did the organization report an amount for investments - program related in Part X, line 107 If Yings, "complete Schedule D, Part VI         11 <td></td> <td></td> <td>4</td> <td></td> <td><u> </u></td>			4		<u> </u>
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 "Yes," complete Schedule D, Part II       6       X         7       Z       Z       6       X       7       X         8       Did the organization maintain collections of works of art, historical resaures, or other similar assets? If "Yes," complete Schedule D, Part II       7       X         9       Did the organization maintain collections of works of art, historical resaures, or other similar assets? If "Yes," complete Schedule D, Part II       8       X         9       Did the organization, directly of through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V       10       X         9       Did the organization report an amount for live strents - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V       11a       X         10       Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part V       11a       X         11       Did the organization report an amount for other sestments in Part X, line 12 that is 5% or more of its total asset reported in Part X, line 17       I'Yes, "complete Schedule D, Part V       11a       X         11       Did the organization report an amount for investments - program re	5				v
provide advice on the distribution or investment of amounts in such funds or accounts? // "Yes," complete Schedule D, Part I       6       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic inductances <i>I</i> , <i>I'res</i> ," complete Schedule D, Part I       7       X         8       Did the organization report an amount in Part X, line 21, for escrow or custolial account liability, serve as a custolian for amounts not listed in Part X, iror provide credit counseling, debt management, credit repair, or debt negotiation services?       8       X         9       Did the organization report an amount for Part IV.       10       X       10       X         10       Ubt environment, Part N, ine 21, for escrow or custolial account liability, serve as a custolian for amounts? If "Yes," complete Schedule D, Part V.       9       X         10       Ubt the organization directly or through a related organization, hold assets in temporarity restricted endowments, permanent endowments? If "Yes," complete Schedule D, Part V.       10       X         11       If the organization report an amount for investments - order securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X       11a       X         11a       X       11a       X       11a       X         11b       X       11a       X       11a       X         11a <td>•</td> <td></td> <td>5</td> <td></td> <td></td>	•		5		
7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic and areas, or historic structures? (if 'Yes,' complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? // trives,' complete Schedule D, Part II       7       X         9       Did the organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       8       X         10       Did the organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 21, which were the present of the organization services?       9       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI       10       X         11       Did the organization report an amount for investments - other asscurities 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 VI       11       X         11       Did the organization report an amount for other liabilities in Part X, line 25 ht 'Yes,' complete Schedule D, Part X       11       X         11       Did the organization schedic IP / 'Yes,' complete Schedule D, Part X       11       X       11	6				v
the environment, historic land areas, or historic structures? /r 'Yes,' complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? /r 'Yes,' complete Schedule D, Part II       7       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts no listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       8       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? //r 'Yes,' complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? //r 'Yes,' complete Schedule D, Part V       10       X         12       Did the organization report an amount for investments - ordpare leaded in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // 'Yes,' complete Schedule D, Part X       11a       X         13       Did the organization report an amount for investments - ordpare related in Part X, line 16? // 'Yes,' complete Schedule D, Part X       11a       X         14       Did the organization report an amount for investments - ordpare related in Part X, line 16? // 'Yes,' complete Schedule D, Part X       11d       X         15       Did the organization report an amount for investments - ordpare related in Part X, line 16? // 'Yes,' complet	-		6		
8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for line following questions is "Yes," then complete Schedule D, Part V, UII, VIII, X, or X as applicable.       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 121 that is 5% or more of its total assets reported in Part X, line 161 /f 'Yes," complete Schedule D, Part VIII       11a       X         13       Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 161 /f 'Yes," complete Schedule D, Part XIII       11c       X         14       Did the organization report an amount for other assets in Part X, line 257 /f 'Yes," complete Schedule D, Part X       11d       X         12       Did the organization submit as postions under Fihl Ad (ASC 740)? /f 'Yes," complete Schedule D, Part X       11d       X	1		7		x
Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments? If "Yes," complete Schedule D, Part V       9       X         10       Did the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V UII, VII, VII, VI, VX as a spiplicable.       10       X         10       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 167 If "yes," complete Schedule D, Part VIII       111a       X         110       Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "yes," complete Schedule D, Part VIII       11a       X         111       X       Did the organization report an amount for investments for the xy arear include a forthorite that addresses the organization separate or consolidated financial statements for the tax year?       11a       X         111       X       2       X       11a       X       11a       X         112       Did the organization report an amount for inv	0		<b>-</b>		
9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V, VIII, VIII, X, or X as applicable.       11       X         12       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         13       Did the organization report an amount for investments - order as the securities in Part X, line 13? If X is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11a       X         14       Did the organization report an amount for other assets in Part X, line 15? If Yes," complete Schedule D, Part X       11a       X         110       Did the organization report an amount for other assets in Part X, line 15? If Yes," complete Schedule D, Part X       11a       X         111       X       Did the organization submits? If Yes," complete Schedule D, Part X       11d       X         112       X       Did the organization submits? If Yes," complete Schedule D, Part	0		8		x
amounts not listed in Part X, or provide credit counseling, debt management, or debt negotiation services?     y     X       If 'Yes," complete Schedule D, Part IV     10     X       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If ''Yes," complete Schedule D, Part V     10     X       11     If the organization, directly or through a related organization, should assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If ''Yes," complete Schedule D, Part V     10     X       20     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 167 If 'Yes," complete Schedule D, Part VII     11a     X       20     Did the organization report an amount for investments - other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If 'Yes," complete Schedule D, Part VII     11e     X       21     Did the organization report an amount for investments - program related in Part X, line 15% or more of its total assets reported in Part X, line 167 If 'Yes," complete Schedule D, Part VII     11e     X       22     Did the organization separate or consolidated financial statements for the tax year? If 'Yes," complete Schedule D, Part X     11e     X       23     Did the organization asset or post of the organization separate or consolidated, independent audited financial statements for the tax year? If 'Yes," complete Schedule D, Part X I     11e     <	9	,	<b>–</b>		
If "Yes," complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         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 VI       11a       X         c       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 VI       11e       X         c       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 X       11e       X         d       Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X.       11e       X         2       Did the organization orbidated in consolidated financial statements for the tax year?       11f       X         2       Did the organization asset prolyces, or agenese toutide of thurburds that addresses in the organization included in consolidated, independent audited financial statements	Ŭ				
10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI.       10       X         a       Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII.       11a       X         b       Did the organization report an amount for investments - other securities 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 VII.       11a       X         c       Did the organization report an amount for other assets 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 VII.       11d       X         c       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         12a       Did the organization soure of VA to line 12a, then completing Schedule D, Part X       11d       X         12b       Did the organization organization source of VA to line 12a, then completing Schedule D, Part X       11d       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11d       X         12a			9		х
endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X       as applicable.         a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         b) Did the organization report an amount for investments - other securities in Part X, line 12? If "Yes," complete Schedule D, Part VII       11b       X         c) Did the organization report an amount for investments - other securities 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 labilities 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 VII       11d       X         d) Did the organization report an amount for other labilities 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 X       11d       X         120       Did the organization is points and for IM 16 (ASC 1470)       IYes," complete Schedule D, Part X       11d       X         121       Did the organization as about thor other labilities in Part X, line 15% or more of its total assets reported in Part X, line 16% if "Yes," complete Schedule D, Part X       11d       X         122	10				
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VX, or X as applicable.       In the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI         11       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       11a       X         11       Did the organization report an amount for investments - organ 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 VII       11c       X         11       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 VII       11t       X         11       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11t       X         11       Did the organization separate or consolidated financial statements for the tax year?       11t       X         12       Did the organization active assets reported in section 1700%/1/W/Wil?       If "Yes," complete Schedule D, Part X X and XII is optional       11t       X         12       Did the organization answerd "No" to line 12a, ther completing Schedule D, Part X X I and XII is optional       11t       X         13       X			10	x	
as applicable.       a) Id the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         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 XII       11c       X         d) Did the organization report an amount for rother assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         e) Did the organization report an amount for rother assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f) Did the organization report an amount for rother assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11t       X         f) Did the organization report an amount for rother assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11t       X         f) Did the organization report an amount for rother assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11t       X         f) Did the organization is abaility for uncertain tax positions under FIN 48 (KSC 740?) If "Yes," complete Schedule D, Part X       11t       X         f) Did the organization orbid mascent anototicated, independent audited financial statements for the tax	11				
Part VI       11a       X         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? //r '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? //r 'Yes," complete Schedule D, Part VII       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? //r 'Yes," complete Schedule D, Part XI.       11d       X         e       Did the organization report an amount for other liabilities in Part X, line 25? //r 'Yes," complete Schedule D, Part X       11e       X         f       Did the organization's separate or consolidated financial statements for the tax year?       11f       X         f       Vice the organization necluded in consolidated, independent audited financial statements for the tax year?       11f       X         f       Was the organization anstwered 'No' to line 12a, then completing Schedule D, Part X and XII is optional       12b       X         12a       Did the organization anitah an office, employees, or agents outside of the United States?       14a       X         14a       X       Did the organization nave aggregate revenues or expenses of nore than \$10,000 form grantmaking, fundraising, bus					
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? // r*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? // r*yes," complete Schedule D, Part VII       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? // r*yes," complete Schedule D, Part X       11c       X         d       Did the organization report an amount for other assets in Part X, line 25? // r*yes," complete Schedule D, Part X       11d       X         f       Did the organization is bability for uncertain tax positions under FIN 48 (ASC 740)? // r*yes," complete Schedule D, Part X       11t       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       11r *yes," complete Schedule D, Part X // res," complete Schedule C, Part I // res," complete Schedule F, Parts I and IV       12b       X       14a	а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VI       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? // "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? // "Yes," complete Schedule D, Part X       11c       X         e Did the organization report an amount for other liabilities in Part X, line 25? // if "Yes," complete Schedule D, Part X       11e       X         11d       X       11d       X         12a       Did the organization's separate or consolidated financial statements for the tax year include a foothore that addresses the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)?       f" Yes," complete Schedule E       13a       X         14a       X       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garpts or other assistance to or for any foreign organization?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garges pa			11a	Х	
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 XIII       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 X       11c       X         e       Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization obtain separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization askered "No" to line 12a, then completing Schedule D, Part X and XII       12a       X         14a       Did the organization askered "No" to line 12a, then completing Schedule E       13a       X         14a       Did the organization maintain an office, employees, or agenes of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organ	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 VIII       11c       X         d Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X       11d       X         e 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: complete Schedule D, Part X       11e       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       If "Yes," and if the organization answerd "No" to line 12a, then completing Schedule D, Part X and XII       12a       X         b Was the organization answerd "No" to line 12a, then completing Schedule D, Parts XI and XII       12b       X         14a       Did the organization answerd "No" to line 12a, then completing Schedule D, Parts XI and XII       12b       X         14a       Did the organization any service activities outside the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for any foreign organization report more than \$10,000 from grants assistance to or for erigin individuals? If "Yes," complete Schedule G, Part I       11f       X         14a       X       11d       X       12b       X       14a       X <td></td> <td>assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII</td> <td>11b</td> <td>Х</td> <td></td>		assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
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 X       11d       X         e       Did the organization's port an amount for other iabilities 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 separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization assered "No" to line 12a, then completing Schedule D, Parts XI and XII       12a       X         b       Was the organization aschool described in section 170(b(1)(I)(I)(I)(I)(I)(I)(I)(I)(I)(I)(I)(I)(I)	С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
<ul> <li>Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i></li></ul>		assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
e       Did the organization report an amount for other liabilities in Part X, line 25? // f "Yes," complete Schedule D, Part X       11t       X         f       Did the organization report an amount for other liabilities in Part X, line 25? // f "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization s liability for uncertain tax positions under FIN 48 (ASC 740)? // f "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization bain separate, independent audited financial statements for the tax year? // f "Yes," complete Schedule D, Part X and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         13       Is the organization maintain an office, employees, or agents outside of the United States?       13a       X         b       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 report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16a       X         13       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16a       X         14       Did the organization report more than \$15,000 of expenses for professio	d				
f       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization similability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       111       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       111       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       If "Yes," complete Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       If "Yes," complete Schedule D, Parts XI and XII is optional       112a       X         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garns or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       14b       X         17       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part IX, column (A), lines 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II		Part X, line 16? If "Yes," complete Schedule D, Part IX			X
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? /f "Yes," complete Schedule D, Part X       111       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? /f "Yes," complete       12a       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       111       X         13       Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         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 report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign 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 II and IV       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundralsing services 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 II and IV       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundralsing services on Part IX, column (A), line 3, more than \$15,000 of ag			11e	X	
<ul> <li>12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete Schedule D, Parts XI and XII</i></li> <li>b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>and if the organization answered</i> "No" to <i>line 12a</i>, <i>then completing Schedule D, Parts XI and XII is optional</i></li> <li>13 Is the organization aschool described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i></li> <li>14a ZX</li> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization neport on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for or granization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>15 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>16 X</li> <li>17 Did the organization report nore than \$15,000 of grass income and contributions on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 of grass income and contributions on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>19 Did the organization report more than \$15,000 of grass income and contributions on Part VIII, lines to an 8a? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 X</li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>compl</i></li></ul>	f				77
Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization nave aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garants or other assistance to or for or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report a total of more than \$15,000 total of fundraising event gross income and contributions on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       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 II       18       X			11f		
b       Was the organization included in consolidated, independent audited financial statements for the tax year?       Image: the organization included in consolidated, independent audited financial statements for the tax year?       Image: the organization asswered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?       14a       X         b       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 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 II and IV       16       X         17       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 II and IV       16       X         17       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 G, Part III and IV       16       X         17       Did the organization report on than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 an	12a			v	
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       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, 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       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargeate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         17       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 II and IV       16       X         17       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 G, Part II       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organizati			12a		
13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       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, 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       X         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 individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         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 II and IV       16       X         17       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 G, Part II       16       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       17       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       Did the organization operate o	b		104		v
<ul> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>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 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 II and IV</li> <li>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 II and IV</li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, foreign and 110 of the organization report more than \$15,000 of grasts or other assistance to ar for foreign individuals? If "Yes," complete Schedule G, Part I</li> <li>18 Did the organization report more than \$15,000 of grasts income from gaming activities on Part VIII, line 9a? If "Yes," 19 X</li> <li>20a Did the organization appert more than \$5,000 of grasts or other assistance to this return?</li> <li>19 Did the organization aperate one or more hospital facilities? If "Yes," complete Schedule H</li> <li>20a X</li> <li>20b</li> <li>20b</li> <li>20b</li> <li>21 X</li> </ul>	40				
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> 14b       X         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 report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 15       X         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? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> 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? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> 17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 18       X         19       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule H</i> 20a					
<ul> <li>investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000</li> <li>or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>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</li> <li>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 II and IV</li> <li>16 X</li> <li>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</li> <li>17 X</li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"</li> <li>19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H</li> <li>20a X</li> <li>20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</li> <li>21 X</li> </ul>	_		140		
or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         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       X         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 on Part IX, column (A), line 3, 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       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       X       19       X         20a       X       20b       20a       X         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule H       20a       X	5				
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1e and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>20a Did the organization report more than \$5,000 of grants or other assistance to this return?</li> <li>20b</li> <li>21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> </ul>			14b		х
foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         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       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II       17       X         19       Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         16       V       20a       X         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       20a       X	15				
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 ot fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"</li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> <li>21 X</li> </ul>			15		Х
or for foreign individuals? /f "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? /f "Yes," complete Schedule G, Part I       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? /f "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? /f "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? /f "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? /f "Yes," complete Schedule I, Parts I and II       21       X	16				
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"</li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>10 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> <li>20 X</li> </ul>			16		Х
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       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       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       19       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       201       X	17				
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       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21       X			17		Х
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21       X	18				_
complete Schedule G, Part III       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21       X		1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_
b       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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X			19		
21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X	20a				X
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			20b		
	21			.,	
					(00 · c)

832003 12-31-18

 Form 990 (2018)
 NONPROFIT
 CONNECT:
 NETWORK ,
 LEARN ,
 GROW

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
	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			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X 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? If "Yes," complete			v
	Schedule L, Part I	25b		X X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	26		x
27	complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		- 23
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
<b>00</b>	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>	32		x
33	Schedule N, Part II	32		- 23
33	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, or IV, and	- 55		
01	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
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		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		77	
Par	Note. All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	<u> </u>
ו מו	Check if Schedule O contains a response or note to any line in this Part V			
		<u></u>	Yes	No
1я	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 13		103	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
832004	12-31-18	Form	990	(2018)
	4			

#### 10191105 795752 12893

Form	990 (2018) NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-112	1678	Р	age <b>5</b>		
Par	t 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 Statements,					
	filed for the calendar year ending with or within the year covered by this return 2a	9				
b	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)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	Зb				
	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		
b	If "Yes," enter the name of the foreign country: ►					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X		
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	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		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts					
	were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	9 <u>7a</u>	Х			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required					
	to file Form 8282?	7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X X		
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?					
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?					
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	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				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	_				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	_				
11	Section 501(c)(12) organizations. Enter:					
a L	Gross income from members or shareholders 11a	_				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
100	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	120				
		12a				
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.	-				
	Is the organization licensed to issue qualified health plans in more than one state?	13a				
a	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	154				
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
D	organization is licensed to issue qualified health plans					
с	Enter the amount of reserves on hand					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>			<u> </u>		
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		
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x		
	If "Yes," complete Form 4720, Schedule O.					

Form **990** (2018)

832005 12-31-18

Form 990	(2018)
----------	--------

NONPROFIT CONNECT: NETWORK, LEARN, GROW

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

43-1121678 Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 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	1a	16			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16			
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 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	e direc	t supervision			
	of officers, directors, or trustees, or key employees to a management company or other person? $\dots$			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form S	990 wa	as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		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 ap					
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockho	olders, 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		•			
а	The governing body?			<u>8a</u>	Х	
b	Each committee with authority to act on behalf of the governing body?			8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched a	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			<u>10a</u>		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napters	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y beto	re filing the form?	<u>11a</u>	Λ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			10-	х	
12a	Did the organization have a written conflict of interest policy? <i>If</i> " <i>No</i> ," <i>go to line 13</i>			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	- 72	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i>	,		100	х	
13	in Schedule O how this was done Did the organization have a written whistleblower policy?			12c 13	X	
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva					
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ai by ii	ldependent			
а	The organization's CEO, Executive Director, or top management official			15a	х	
h	Other officers or key employees of the organization			15b	X	
	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 arranger	ment v	vith a			
	taxable entity during the year?			16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A if applicable), 990, ar	nd 990	-T (Section 501(c)(3)s	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			• •		
	X Own website Another's website X Upon request Other (explain	n in Sc	hedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con		,	financ	ial	
	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 boo	oks an	d records			
	NONPROFIT CONNECT - 816-888-5600					
	125 E 31ST STREET, SUITE 100, KANSAS CITY, MO 6410	80				_
832006	12-31-18			Form	990	(2018)
	6					

Form 990 (2							Page 7	
Part VII	Compensation of Officers, D	rectors, Trust	ees, Key Emp	loyees, Hig	jhest Cor	npensated		
Employees, and Independent Contractors								
	Check if Schedule O contains a respo	nse or note to any	line in this Part VII					
Section A.	Officers, Directors, Trustees, Key E	mployees, and Hi	ighest Compensa	ted Employee	es			

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)         (B)         (C)         (C)         (D)         (E)         (F)           Name and Title         Average hours per related organizations below         Nome and Title         Average hours per related organizations         (D)         Reportable compensation from related organizations         (E)         (F)           10         Value Person         Total average         (F)         (F)         Reportable compensation from related organizations         (F)           (1)         VALERIE NICHOLSON-MATSON         1.00         X         X         0.         0.         0.           (2)         MACALL STEPHENSON         1.00         X         X         0.         0.         0.           (3)         TAE JACOBSON         1.000         X         X         0.         0.         0.           (3)         TAE JACOBSON         1.000         X         X         0.         0.         0.           (3)         TORDE LUTTERMAN         1.000         X         X         0.         0.         0.           (3)         TAE JACOBSON         1.000         X         X         0.         0.         0.           (3)         TORDE LUTTERMAN         1.000         X         X         0.			T	ΠZα			nper	Joan			
Name and the     Average hours per veek (ist ary hours per veek (ist ary hou	(A)	(B)			_ ((	C)			(D)	(E)	(F)
hours per week (list any hours for related organizations) (1) VALERIE NICHOLSON-WATSON         isour step searce is contain the organization (W2/1099-MISC)         compensation the organization (W2/1099-MISC)         compensation of the organizations (W2/1099-MISC)         amount of other compensation from the organizations           (1) VALERIE NICHOLSON-WATSON         1.00         X         X         0.         0.         0.           (2) MACAEL STEPPENSON         1.00         X         X         X         0.         0.         0.           (3) JAKE JACOBSON         1.00         X         X         X         0.         0.         0.           (4) LESLIE STME         1.00         X         X         X         0.         0.         0.           (6) LUTZE MAN         1.00         X         X         X         0.         0.         0.           (6) LADER BENDER         1.00         X         X         0.         0.         0.           (6) LADER BENDER         1.00         X         X         0.         0.         0.           DOAD MEMBER         1.00         X         X         0.         0.         0.           (10) LENIE GREGOR         1.00         X         0.         0.         0.         0.	Name and Title	Average	(do			Reportable	Reportable	Estimated			
Week (ist ary burs for related organizations line)     Inon the second sec		hours per	box	, unle	ss pei	rson i	is both	n an	compensation		
(1)         VALERIE NICHOLSON WATSON         1.00         X         X         0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.				l	luau		T	lee)			
(1)         VALERIE NICHOLSON WATSON         1.00         X         X         0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			recto							U U	
(1)         VALERIE NICHOLSON WATSON         1.00         X         X         0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			or di	e			ated		, v	(W-2/1099-MISC)	
(1)         VALERIE NICHOLSON WATSON         1.00         X         X         0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			ustee	trust		9	bens		(W-2/1099-MISC)		, e
(1)         VALERIE NICHOLSON WATSON         1.00         X         X         0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		-	ual tr	ional		ploye	t com				
(1)         VALERIE NICHOLSON WATSON         1.00         X         X         0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			divid	stitut	fficer	ey em	ighes	ormer			organizations
PRESIDENT         X         X         X         X         0.         0.         0.           (2) MACAELA STEPHENSON         1.00         X         X         0.         0.         0.           (3) JAKE JACOBSON         1.00         X         X         0.         0.         0.           (4) LESLIE SIMS         1.00         X         X         0.         0.         0.           (4) LESLIE SIMS         1.00         X         X         0.         0.         0.           (4) LESLIE SIMS         1.00         X         X         0.         0.         0.           (5) TONDEE LUTTEMAN         1.00         X         X         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           (7) LINNE BROWN         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           (9) RITA CORTES         1.00         X         0.         0.         0. <td>(1) VALERIE NICHOLSON-WATSON</td> <td>,</td> <td><u> </u></td> <td>=</td> <td>6</td> <td>ž</td> <td>Ξə</td> <td>Ĕ</td> <td></td> <td></td> <td></td>	(1) VALERIE NICHOLSON-WATSON	,	<u> </u>	=	6	ž	Ξə	Ĕ			
(2)         MACAELA STEPHENSON         1.00         X         X         0.         0.         0.           VICE PRESIDENT         X         X         0.         <		1.00	x		x				0.	0.	0.
VICE PRESIDENT         X         X         X         0.         0.         0.           (3) JAKE JACOBSON         1.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           TREASURER         X         X         0.         0.         0.         0.           (5) TONDEE LUTTERMAN         1.00          0.         0.         0.         0.           PAST PRESIDENT         X         X         0.         0.         0.         0.           BOARD MEMBER         1.00          0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0		1.00									
(3) JAKE JACOBSON         1.00         X         X         X         0.         0.         0.           GECERTARY         1.00         X         X         0.         0.         0.         0.           (4) LESLIE SIMS         1.00         X         X         0.         0.         0.         0.           (5) TONDEE LUTTERMAN         1.00         X         X         0.         0.         0.           PAST PRESIDENT         X         X         0.         0.         0.         0.           BOARD MEMBER         1.00         X         0.         0.         0.         0.           BOARD MEMBER         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           IO1 LEWIS GREGORY         1.000         X         <	VICE PRESIDENT		х		x				0.	0.	0.
(4) LESLIE SIMS       1.00       X       X       0.       0.       0.         (5) TONDEE LUTTERMAN       1.00       X       X       0.       0.       0.         (5) TONDEE LUTTERMAN       1.00       X       X       0.       0.       0.         (6) LAURA BERGER       1.00       X       X       0.       0.       0.         (7) LYNNE BROWN       1.00       X       0.       0.       0.       0.         (7) LYNNE BROWN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (9) RITA CORTES       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.       0.         (10) LEWIS GREGORY       1.00       X       0.	(3) JAKE JACOBSON	1.00									
TREASURER         X         X         X         0.         0.         0.           PAST PRESIDENT         X         X         0.         0.         0.         0.           PAST PRESIDENT         X         X         0.         0.         0.         0.           BOARD MEMBER         1.00         X         X         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           BOARD MEMBER         1.00         X         0.         0.         0.         0.           BOARD MEMBER         1.00         X         0.         0.         0.         0.           BOARD MEMBER         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           IO1 LEWIS GREGORY         1.00         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.	SECRETARY		Х		Х				0.	0.	0.
(5) TONDEE LUTTERMAN       1.00       X       X       0.       0.       0.         PAST PRESIDENT       X       X       0.       0.       0.       0.         (6) LAURA BERGER       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         FOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.	(4) LESLIE SIMS	1.00									
PAST PRESIDENT         X         X         X         0.         0.         0.           G6) LAURA BERGER         1.00         X         0.         0.         0.         0.           BOARD MEMBER         1.00         X         0.         0.         0.         0.           (7) LYNNE BROWN         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           BOARD MEMBER         1.00         X         0.         0.         0.         0.           BOARD MEMBER         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         <	TREASURER		Х		Х				0.	0.	0.
(6) LAURA BERGER1.00X0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBER1.00X0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBER1.00X0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.Ill J SHERI JOHNSON1.00X0.0.0.BOARD MEMBERX0.0.0.0.Ill AMY KLIGMAN1.00X0.0.0.BOARD MEMBERX0.0.0.0.Ill AMY KLIGMAN1.00X0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.	(5) TONDEE LUTTERMAN	1.00									
BOARD MEMBER         X         0.         0.         0.         0.           (7) LYNNE BROWN         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           (8) CLIFTON CAMPBELL         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0. <td< td=""><td></td><td></td><td>Х</td><td></td><td>X</td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></td<>			Х		X				0.	0.	0.
(7)LYNNE BROWN1.00X0.0.0.BOARD MEMBERX0.0.0.0.0.BOARD MEMBERX0.0.0.0.0.I13) AMY KLIGMAN1.00X0.0.0.0.BOARD MEMBERX0.0.0.0.0.I14) MARTIN KRAUS1.00X0.0.0.0.BOARD MEMBERX0.0.0.0.0.I15) JAMI SHIPMAN1.00X0.0.0.0.BOARD MEMBERX0.0.0.0.0.I16) PRECIOUS STARGELL CUSHMAN1.00X0.0.0.0.<		1.00									
BOARD MEMBERX0.0.0.(8) CLIFTON CAMPBELL1.00X0.0.0.BOARD MEMBERX0.0.0.0.BOARD MEMBERX0.0.0.0.Ill 3) AMY KLIGMAN1.000.0.0.0.BOARD MEMBERX0.0.0.0.Ill 3) AMY KLIGMAN1.000.0.0.0.BOARD MEMBERX0.0.0.0.Ill 3) AMY SHIPMAN1.000.0.0.0.BOARD MEMBERX0.0.0.0.Ill 4) FREIAN1.000.0.0.0.BOARD MEMBERX0.0.0.0.Ill 4) FREIAN40.000.0.0.0.EXECUTIVE DIRECTORX129,374.0. <t< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>			Х						0.	0.	0.
(8) CLIFTON CAMPBELL1.00BOARD MEMBERX0.(9) RITA CORTES1.00BOARD MEMBERXO.0.BOARD MEMBERX(10) LEWIS GREGORY1.00BOARD MEMBERXO.0.BOARD MEMBERXO.0.BOARD MEMBERXO.0.BOARD MEMBERXO.0.O.0.BOARD MEMBERXO.0.I.100XBOARD MEMBERXO.0.O.0.BOARD MEMBERXO.0.I.2) SHERI JOHNSON1.00BOARD MEMBERXO.0.I.3) AMY KLIGMAN1.00BOARD MEMBERXO.0.I.4) MARTIN KRAUS1.00BOARD MEMBERXO.0.I.5) JAMI SHIPMAN1.00BOARD MEMBERXI.6) PRECIOUS STARGELL CUSHMAN1.00BOARD MEMBERXI.7) LUANN FEEHAN40.00EXECUTIVE DIRECTORXI.29,374.0.I.29,274.	,	1.00									
BOARD MEMBERX0.0.0.(9) RITA CORTES1.00BOARD MEMBERX0.0.0.(10) LEWIS GREGORY1.00X0.0.BOARD MEMBERX0.0.0.(11) JENNIFER INGRAHAM1.000.0.0.BOARD MEMBERX0.0.0.BOARD MEMBERX0.0.0.			Х						0.	0.	0.
(9) RITA CORTES       1.00       X       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.         (10) LEWIS GREGORY       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       1.00       X       0.		1.00									
BOARD MEMBER         X         0         0.			Х						0.	0.	0.
(10) LEWIS GREGORY       1.00       X       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.         (11) JENNIFER INGRAHAM       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (12) SHERI JOHNSON       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (13) AMY KLIGMAN       1.00       X       0. </td <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		1.00									
BOARD MEMBER         X         0.         0.         0.         0.           (11) JENNIFER INGRAHAM         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           (12) SHERI JOHNSON         1.00         0.			Х						0.	0.	0.
(11) JENNIFER INGRAHAM       1.00       X       0.0.0.0.         BOARD MEMBER       1.00       0.0.0.0.       0.0.0.         (12) SHERI JOHNSON       1.00       0.0.0.0.0.       0.0.0.0.         BOARD MEMBER       X       0.0.0.0.0.0.       0.0.0.         (13) AMY KLIGMAN       1.00       0.0.0.0.0.       0.0.0.0.         BOARD MEMBER       X       0.0.0.0.0.0.       0.0.0.         (14) MARTIN KRAUS       1.00       0.0.0.0.0.       0.0.0.         BOARD MEMBER       X       0.0.0.0.0.0.       0.0.0.         (15) JAMI SHIPMAN       1.00       0.0.0.0.0.       0.0.0.         BOARD MEMBER       X       0.0.0.0.0.0.       0.0.0.         (16) PRECIOUS STARGELL CUSHMAN       1.00       0.0.0.0.0.       0.0.0.0.         BOARD MEMBER       X       0.0.0.0.0.0.       0.0.0.0.         (17) LUANN FEEHAN       40.00       X       129,374.0.0.20,257.		1.00									
BOARD MEMBER         X         0.			Х						0.	0.	0.
(12) SHERI JOHNSON       1.00       X       0.       0.       0.         BOARD MEMBER       1.00       X       0.       0.       0.       0.         (13) AMY KLIGMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.       0.         (16) PRECIOUS STARGELL CUSHMAN       1.00       X       0.       0.       0.       0.         (17) LUANN FEEHAN       40.00       X       129,374.       0.       20,257. <td>(11) JENNIFER INGRAHAM</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(11) JENNIFER INGRAHAM	1.00									
BOARD MEMBER         X         0.	BOARD MEMBER		Х						0.	0.	0.
(13) AMY KLIGMAN       1.00       X       0.       0.       0.         BOARD MEMBER       1.00       X       0.       0.       0.       0.         (14) MARTIN KRAUS       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (15) JAMI SHIPMAN       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (16) PRECIOUS STARGELL CUSHMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (16) PRECIOUS STARGELL CUSHMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (17) LUANN FEEHAN       40.00       X       129,374.       0.       20,257.	(12) SHERI JOHNSON	1.00									
BOARD MEMBER       X       0.       0.       0.       0.         (14) MARTIN KRAUS       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (15) JAMI SHIPMAN       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (16) PRECIOUS STARGELL CUSHMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (16) PRECIOUS STARGELL CUSHMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (17) LUANN FEEHAN       40.00       X       129,374.       0.       20,257.	BOARD MEMBER		Х						0.	0.	0.
(14) MARTIN KRAUS       1.00       0       0.       0.       0.         BOARD MEMBER       1.00       X       0.       0.       0.       0.         (15) JAMI SHIPMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (16) PRECIOUS STARGELL CUSHMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (17) LUANN FEEHAN       40.00       X       129,374.       0.       20,257.	(13) AMY KLIGMAN	1.00									
BOARD MEMBER         X         0.	BOARD MEMBER		Х						0.	0.	0.
(15) JAMI SHIPMAN       1.00       0       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.         (16) PRECIOUS STARGELL CUSHMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (17) LUANN FEEHAN       40.00       X       129,374.       0.       20,257.	(14) MARTIN KRAUS	1.00									
BOARD MEMBER         X         0.         20,257.         0.         20,2	BOARD MEMBER		Х						0.	0.	0.
(16) PRECIOUS STARGELL CUSHMAN       1.00       0       0         BOARD MEMBER       X       0.00       0.00         (17) LUANN FEEHAN       40.00       X       129,374.       0.20,257.		1.00									
BOARD MEMBER         X         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         20,257.         0.         0.         20,257.         0.         20,257.         0. </td <td></td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td></td> <td> </td> <td>0.</td> <td>0.</td> <td>0.</td>			Х						0.	0.	0.
(17) LUANN FEEHAN       40.00       X       129,374.       0.       20,257.		1.00									
EXECUTIVE DIRECTOR X 129,374. 0. 20,257.			Х						0.	0.	0.
		40.00	4						100.07		
	EXECUTIVE DIRECTOR				X				129,374.	0.	

832007 12-31-18

Form 990 (2018)

7

		CONNEC	т:	Ν	ΈT	WO	RK	,	LEARN, GROW	43-11	L21	678	Р	age <b>8</b>
Part V	VII Section A. Officers, Directors, Trus		ploy	ees,			ghes	st C	ompensated Employe	es (continued)				
	(A)	(B)			(0				(D)	(E)			(F)	
	Name and title	Average	(do		Pos heck i		l than c	one	Reportable	Reportable			stimate	
		hours per week					s both r/trus		compensation	compensatio		ar	nount	of
		(list any						,	from the	from related organizations			other	tion
		hours for	direct				_		organization	(W-2/1099-MIS		1	pensa rom th	
		related	se or	stee			nsate		(W-2/1099-MISC)		)		anizat	
		organizations	Individual trustee or director	In stitutional trustee		yee	Highest compensated employee					Ĭ	, d relat	
		below	vidual	tutior	Cer	Key employee	loyee	ner				orga	anizati	ons
		line)	Indi	Insti	Officer	Key	High emp	Former						
							-							
1b S	ub-total								129,374		0.	2	0,2	57.
с Т	c Total from continuation sheets to Part VII, Section A								0.	. 0.				
d T	otal (add lines 1b and 1c)								129,374	•	0.	2	0,2	57.
<b>2</b> T	otal number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$10	0,000 of reportable	;			
C	ompensation from the organization													1
													Yes	No
	id the organization list any former officer,	,		,					0	1 5				37
	ne 1a? If "Yes," complete Schedule J for s											3		X
	or any individual listed on line 1a, is the su													v
	nd related organizations greater than \$150											4		X
	hid any person listed on line 1a receive or a											5		x
	endered to the organization? <i>If</i> "Yes," com on <b>B. Independent Contractors</b>	plete Schedule	<u>ə J f</u>	or sl	ich r	bers	on .				<u></u>	5		1
	complete this table for your five highest co	mpensated ind	ene	nder	nt co	ontra	actor	rs th	nat received more than	\$100 000 of comp	ensa	tion fro	om	
	ne organization. Report compensation for t	-									onou		0111	
	(A)	ine ealendar ye		- TGII	<u>ig ii</u>				(B)	Jour		(0	C)	
	Name and business	address	NC	ONE	2				Description of	services	C	ompe	nsatio	n
								$ \rightarrow$						
								-						
		a de caller en la cal				4 Le -			ala ava) volta ava					
	otal number of independent contractors (ir		ot lin	nitec	i to i	thos C		ted	above) who received r	nore than				
\$	100,000 of compensation from the organiz					C	,						000	

Form **990** (2018)

832008 12-31-18

	990 (			NECT: NET	WORK, LEAF	RN, GROW	43-1121	678 Page 9
Par	rt VII	Statement of Revenue	)					
		Check if Schedule O contains	a response	or note to any line		(5)	(2)	
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	( <b>D</b> ) Revenue excluded from tax under sections 512 - 514
S S	1 a	Federated campaigns	1a	20,000.				
ant		Membership dues						
ي ق		Fundraising events		175,110.				
ifts LA		Related organizations						
nila,		Government grants (contributions						
Sir		All other contributions, gifts, grants, a						
her	-	similar amounts not included above		159,853.				
o tri	a	Noncash contributions included in lines 1a-1f	·····					
Contributions, Gifts, Grants and Other Similar Amounts	-	Total. Add lines 1a-1f			354,963.			
				Business Code				
Ð	2 a	MEMBERSHIP DUES		541900	273,108.	273,108.		
, vic	b	JOBLINK		561300	232,035.	232,035.		
Ser		EDUCATIONAL PROGR	AMS	611710	165,149.	165,149.		
		PHILLY AWARDS		611430	27,385.	27,385.		
Program Service Revenue		CONSULTING & TRAI	NING	900099	2,200.	2,200.		
Pro	f	All other program service revenue	)			-		
		Total. Add lines 2a-2f		-	699,877.			
	3	Investment income (including divi						
		other similar amounts)		►	23,719.			23,719.
	4	Income from investment of tax-ex	empt bond p	oroceeds 🕨 🕨				
	5	Royalties		►				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	с	Rental income or (loss)						
			<u></u>	🕨				
	7 a		) Securities	(ii) Other				
		· · ·	52,291.					
	b	Less: cost or other basis	) ) ) ) ) )					
			<u>33,357.</u> 28,934.					
		· / ······	-		28,934.			28,934.
		Net gain or (loss)		······ <b>&gt;</b>	20,954.			20,954.
ne	0 a	Gross income from fundraising evincluding \$ 175,110						
ven		contributions reported on line 1c)						
Re		Part IV, line 18		40,000.				
Other Revenue	h	Less: direct expenses		60,660.				
ð		Net income or (loss) from fundrais			-20,660.			-20,660.
		Gross income from gaming activit	-					
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gaming						
	10 a	Gross sales of inventory, less retu	irns					
		and allowances	a					
	b	Less: cost of goods sold	b	,				
	с	Net income or (loss) from sales of	inventory	►				
Ļ		Miscellaneous Revenue		Business Code				
	11 a	MISCELLANEOUS REV	ENUE	900099	2,149.	2,149.		
	b							ļ
	С							ļ
	d				0 1 1 0			
		Total. Add lines 11a-11d			2,149.	700 000		21 002
	12	Total revenue. See instructions		🕨	1,088,982.	702,026.	0.	
832009	9 12-31-	-18			•			Form <b>990</b> (2018)

#### Form 990 (2018) NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1121678 Page 10 Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

0000	on 501(c)(3) and 501(c)(4) organizations must complete Check if Schedule O contains a respons				
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·		·
	and domestic governments. See Part IV, line 21	9,575.	9,575.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	149,632.	79,295.	56,111.	14,226.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			44.060	
7	Other salaries and wages	302,685.	246,882.	41,263.	14,540.
8	Pension plan accruals and contributions (include	F F11	F 41 C	1 (17	400
	section 401(k) and 403(b) employer contributions)	7,511.	5,416.	1,617.	<u>478.</u> 3,985.
9	Other employee benefits	62,665.	45,190.	13,490.	
10	Payroll taxes	32,387.	23,355.	6,972.	2,060.
11	Fees for services (non-employees):				
a	F				
		10,801.		10 001	
	Accounting	10,001.		10,801.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	4,955.		4,955.	
f	Investment management fees	4,955.		4,955.	
g	Other. (If line 11g amount exceeds 10% of line 25,	91,309.	36,336.	54,973.	
10	column (A) amount, list line 11g expenses on Sch 0.)	5,605.	5,480.	125.	
12 13	Advertising and promotion Office expenses	57,275.	33,694.	23,571.	10.
13 14	Information technology	3,657.	3,200.	457.	<u> </u>
14	Royalties	5,057.	5,200.		
16	Occupancy	32,021.	24,016.	6,404.	1,601.
17	Travel	193.	70.	123.	1,0010
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	107,107.	99,051.	7,720.	336.
20	Interest	99.		99.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,958.	11,968.	3,192.	798.
23	Insurance	6,453.	3,340.	2,890.	223.
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25. column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	MEMBER SERVICES	30,270.	30,270.		
b	BAD DEBT	11,911.	11,781.	130.	
с	MISCELLANEOUS	5,059.	3,857.	1,202.	
d	DUES & SUBSCRIPTIONS	4,241.	2,281.	1,960.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	951,369.	675,057.	238,055.	38,257.
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 following SOP 98-2 (ASC 958-720)				
00001	) 12-31-18				Form <b>990</b> (2018)

10

832010 12-31-18

Form **990** (2018)

Form 990 (2018)

		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	158,896.	1	207,876.
	2	Savings and temporary cash investments	71,130.	2	71,406.
	3	Pledges and grants receivable, net		3	· · · · ·
	4	Accounts receivable, net	4,490.	4	20,861.
	5	Loans and other receivables from current and former officers, directors,	, <u> </u>	-	
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under		Ŭ	
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
6		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	8,200.	9	5,347.
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 165,936.			
	ь	Less: accumulated depreciation 10b 150,994.	26,347.	10c	14,942.
	11	Investments - publicly traded securities	722,360.	11	553,010.
	12	Investments - other securities. See Part IV, line 11	158,482.	12	530,337.
	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 34)	1,149,905.	16	1,403,779.
	17	Accounts payable and accrued expenses	32,861.	17	40,452.
	18	Grants payable		18	
	19	Deferred revenue	128,318.	19	141,905.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ş	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
abi		Complete Part II of Schedule L		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 of			
		Schedule D	0.	25	190,000.
	26	Total liabilities. Add lines 17 through 25	161,179.	26	372,357.
		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
es		complete lines 27 through 29, and lines 33 and 34.	000 500		014 101
anc	27	Unrestricted net assets	909,522.	27	914,171.
Bala	28	Temporarily restricted net assets	70 004	28	39,894.
l pu	29	Permanently restricted net assets	79,204.	29	77,357.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here			
s or		and complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	988,726.	32 33	1,031,422.
-	33 34	Total net assets or fund balances	1,149,905.	33 34	1,403,779.
	34	Total liabilities and net assets/fund balances		54	Form <b>990</b> (2018)
					FUITI 200 (2018)

NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1121678 Page 11 Part X Balance Sheet

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

Form	990 (2018) NONPROFIT CONNECT: NETWORK, LEARN, GROW	43-	1121678	Pag	<sub>ge</sub> 12		
Pa	t 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	1,088	3,98	<u>82.</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		.,36			
3	Revenue less expenses. Subtract line 2 from line 1	3		7,61 8,72			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))						
5	Net unrealized gains (losses) on investments	5	-94	1,91	17.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	1,031	.,42	22.		
Pa	t 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 X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
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 separat	e 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 th						
	review, or compilation of its financial statements and selection of an independent accountant?			Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Aud	lit				
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red aud					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits						

Form **990** (2018)

SCHEDUL	ΕA
---------	----

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

OMB No. 1545-0047

(Form 990 or 990-EZ)			nization is a section 501					2018		
		-	947(a)(1) nonexempt cha					2010		
Department of the Treasury Internal Revenue Service			Attach to Form 990 or F					Open to Public Inspection		
Name of the organizat		Go to www.irs.go	v/Form990 for instruction	ons and tr	ne latest ir	formation.	Employor	identification number		
Name of the organizat				Τ. ΓΆΤ	ON CI			3-1121678		
Part I Reason	NONPROFIT         CONNECT:         NETWORK         LEARN         GROW         43-1121678           Part I         Reason for Public Charity Status         (All organizations must complete this part.) See instructions.         43-1121678									
			(For lines 1 through 12, cl							
	-			•		()(A)(i)				
	A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i)</b> . A school described in <b>section 170(b)(1)(A)(ii)</b> . (Attach Schedule E (Form 990 or 990-EZ).)									
			anization described in se			ii)				
			njunction with a hospital				)(iii). Enter	the hospital's name.		
city, and stat	0		····				<b>//</b>	·····,		
	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
section 170	(b)(1)(A)(iv). (C	Complete Part II.)								
6 🗌 A federal, sta	ate, or local gov	vernment or governi	mental unit described in	section 17	70(b)(1)(A)	(v).				
7 🗌 An organizat	ion that normal	lly receives a substa	antial part of its support fr	om a gove	ernmental	unit or from th	ne general p	oublic described in		
section 170	<b>b)(1)(A)(vi).</b> (C	omplete Part II.)								
8 A community	/ trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
9 An agricultur	al research org	anization described	l in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college		
or university	or a non-land-g	grant college of agric	culture (see instructions).	Enter the	name, city	, and state of	the college	or		
university:										
			e than 33 1/3% of its supp							
			ct to certain exceptions,					-		
			e (less section 511 tax) fro	m busines	sses acqui	rea by the org	janization a	iπer June 30, 1975.		
		mplete Part III.)	sively to test for public sat	foty Soo	coction 5(	0(a)(4)				
	-	-	sively for the benefit of, to	•			rry out the	nurnoses of one or		
0	-	-	ed in section 509(a)(1) o	-			-			
			of supporting organization							
	-	• •	supervised, or controlled		-		-	giving		
the suppor	ted organizatio	on(s) the power to re	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	ipporting		
organizatio	n. You must c	omplete Part IV, S	ections A and B.							
b 🗌 Type II. A	supporting org	anization supervised	d or controlled in connect	ion with it	s supporte	ed organizatio	n(s), by hav	ring		
control or	management o	f the supporting org	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported		
organizatio	on(s). <b>You mus</b>	t complete Part IV,	Sections A and C.							
	-		ng organization operated				ly integrate	d with,		
	-		s). You must complete I							
	-	•	porting organization oper				0	()		
			zation generally must sat				an attentiv	/eness		
			mplete Part IV, Sections							
			written determination from mally integrated supporting			турет, туре	п, туре п			
f Enter the number					ation.					
		about the support								
(i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the organized (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv)	anization listed ing document?	(v) Amount of	fmonetary	(vi) Amount of other		
organizatio	า		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)		
Total										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 13

# Schedule A (Form 990 or 990-EZ) 2018 NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1121678 Page 2 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.)

Calendar year (or fiscal year beginning in) ▶       (a) 2014       (b) 2015       (c) 2016       (d) 2017       (e) 2018         1       Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")       (a) 2014       (b) 2015       (c) 2016       (d) 2017       (e) 2018         2       Tax revenues levied for the organization's benefit and either paid to or expended on its behalf       (a) 2017       (b) 2015       (c) 2016       (d) 2017       (e) 2018         3       The value of services or facilities furnished by a governmental unit to the organization without charge       (a) 2017       (b) 2015       (c) 2016       (d) 2017       (e) 2018         4       Total. Add lines 1 through 3       (c) 2016       (c) 2016       (c) 2017       (e) 2018       (c) 2017       (c) 2018       (c) 2017       (e) 2	(f) Total								
membership fees received. (Do not include any "unusual grants.")   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   5   The person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, units of the second									
include any "unusual grants.")									
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
<ul> <li>ization's benefit and either paid to or expended on its behalf</li> <li>3 The value of services or facilities furnished by a governmental unit to the organization without charge</li> <li>4 Total. Add lines 1 through 3</li> <li>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,</li> </ul>									
or expended on its behalf									
3 The value of services or facilities furnished by a governmental unit to the organization without charge       Image: Constraint of the organization without charge         4 Total. Add lines 1 through 3       Image: Constraint of the organization of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, included on line									
furnished by a governmental unit to the organization without charge									
the organization without charge									
<ul> <li>4 Total. Add lines 1 through 3</li></ul>									
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,									
by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,									
governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,									
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,									
on line 1 that exceeds 2% of the amount shown on line 11,									
amount shown on line 11,									
column (f)									
6 Public support. Subtract line 5 from line 4.									
Section B. Total Support									
Calendar year (or fiscal year beginning in)         (a) 2014         (b) 2015         (c) 2016         (d) 2017         (e) 2018	(f) Total								
7 Amounts from line 4									
8 Gross income from interest,									
dividends, payments received on									
securities loans, rents, royalties,									
and income from similar sources									
9 Net income from unrelated business									
activities, whether or not the									
business is regularly carried on									
10 Other income. Do not include gain									
or loss from the sale of capital									
assets (Explain in Part VI.)									
11 Total support. Add lines 7 through 10									
12 Gross receipts from related activities, etc. (see instructions)									
13 First five 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									
14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))       14	%								
15 Public support percentage from 2017 Schedule A, Part II, line 14 15	%								
16a 33 1/3% support test - 2018. 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 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this bo									
and stop here. The organization qualifies as a publicly supported organization	▶∟								
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or manual statements of the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10\% organization did not check	ore,								
and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organizat	on								
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	or								
	or								
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10%	or								

Schedule A (Form 990 or 990-EZ) 2018

832022 10-11-18

#### Schedule A (Form 990 or 990 EZ) 2018 NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1121678 Page 3 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. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support (c) 2016 (d) 2017 Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (e) 2018 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 264,882 276,741. 281,888. 256,134. 354,963. 1434608. 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 523,675. 571,504. 585,537. 699,877. 2864474. 483,881. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 748,763. 800,416. 853,392. 841,671. 1054840. 4299082. 6 Total. Add lines 1 through 5 ..... 7a Amounts included on lines 1, 2, and 116,200. 21,525. 13,500. 150,000. 12,025. 313,250. 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 0. 150,000. c Add lines 7a and 7b 12,025. 116,200. 21,525. 13,500. 313 250 3985832 Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 748,763. 800,416. 853,392. 4299082. 841,671 1054840. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 5,588. 16,935. 18,730. 23,719. 10,408. 75,380. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 5,588. 10,408. 16,935. 18,730. 23,719. 75,380. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is 1,550. 4.800. 4,800. 4.100. 0. 15,250. regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 4,161. 1,969 38 5 2,149. assets (Explain in Part VI.) 757,870. 815,662. 875,132. 864,501. 1080708. 4393873. 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First five 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 90.71 % Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 15 93.80 Public support percentage from 2017 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 1.72 17 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) % 1.42 18 18 Investment income percentage from 2017 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not ► X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2018 832023 10-11-18

15

10191105 795752 12893

#### Schedule A (Form 990 or 990-EZ) 2018 NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1121678 Page 4 Part IV Supporting Organizations

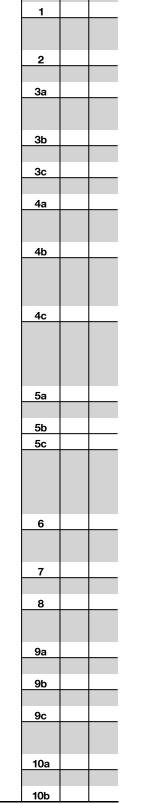
(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

16

832024 10-11-18



Yes No

Schedule A (Form 990 or 990-EZ) 2018

# Schedule A (Form 990 or 990-EZ) 2018 NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1121678 Page 5 Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
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			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
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			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	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 instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insti	uctions)		
2	Activities Test. Answer (a) and (b) 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			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? 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 Part VI the role played by the organization in this regard.	3b		
832025	5 10-11-18 Schedule A (Form 9	90 or 99	0-EZ)	2018

10191105 795752 12893

	dule A (Form 990 or 990-EZ) 2018 NONPROFIT CONNECT: NETW			43-1121678 Page 6
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualifying	-		n Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	omplete S	ections A through E.	1
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
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		
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-functiona	lly integra	ted Type III supporting or	ganization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2018

832026 10-11-18

# Schedule A (Form 990 or 990-EZ) 2018 NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1121678 Page 7

Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	F		
Secti	on D - Distributions			Current Year		
_1	Amounts paid to supported organizations to accomplish exempt purposes					
2	Amounts paid to perform activity that directly furthers exemp					
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S			
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
7	Total annual distributions. Add lines 1 through 6.					
8	Distributions to attentive supported organizations to which the	ne organization is responsive	)			
	(provide details in Part VI). See instructions.					
9	Distributable amount for 2018 from Section C, line 6					
10	Line 8 amount divided by line 9 amount	1	1			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018		
1	Distributable amount for 2018 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2018 (reason-					
	able cause required- explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2018					
a	From 2013					
b	From 2014					
C	From 2015					
d	From 2016					
e	From 2017					
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
h	Applied to 2018 distributable amount					
i	Carryover from 2013 not applied (see instructions)					
<u>i</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2018 from Section D,					
	line 7: \$					
<u>a</u>	Applied to underdistributions of prior years					
	Applied to 2018 distributable amount					
	Remainder. Subtract lines 4a and 4b from 4.					
5	Remaining underdistributions for years prior to 2018, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in <b>Part VI.</b> See instructions.					
6	Remaining underdistributions for 2018. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2019. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
	Excess from 2014					
	Excess from 2015					
	Excess from 2016					
	Excess from 2017					
e	Excess from 2018					

Schedule A (Form 990 or 990-EZ) 2018

Schedule A Part VI	(Form 990 or 990-EZ) 20 <sup>-</sup> Supplemental Info Part IV, Section A, lines line 1; Part IV, Section I Section D, lines 5, 6, an (See instructions.)	<b>prmation.</b> Provide 1, 2, 3b, 3c, 4b, 4c, 5 0, lines 2 and 3; Part 1	the explanations re 5a, 6, 9a, 9b, 9c, 1 <sup>-</sup> V, Section E, lines	equired by Part II, I 1a, 11b, and 11c; I 1c, 2a, 2b, 3a, and	ine 10; Part II, Part IV, Sectior d 3b; Part V, Iir	line 17a or n B, lines 1 ne 1; Part V	and 2; Part IV, Section , Section B, line 1e; Pa	с,
832028 10-11-1	8		2	0		Schedule	e A (Form 990 or 990-	EZ) 2018

#### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

\*\* PUBLIC DISCLOSURE COPY \*\*

## **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Employer identification number

	NONPROFIT CONNECT: NETWORK, LEARN, GROW	43-1121678	
Organization type (cho	eck one):		
Filers of:	Section:		
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation		
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under
sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from
any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;
or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an exclusively religious, charitable, etc., exclusively religious, exclusively religious,

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B	(Form	990,	990-EZ,	or 990-PF)	(2018)
------------	-------	------	---------	------------	--------

Name of organization

Employer identification number

43-1121678

#### NONPROFIT CONNECT: NETWORK, LEARN, GROW

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1		\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3		\$10,000.	Person Payroll X Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		\$10,000.	Person Payroll X Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		

23

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

10191105 795752 12893

Schedule B	(Form	990,	990-EZ,	or 990-PF)	(2018)
------------	-------	------	---------	------------	--------

Name of organization

Page **3** 

Employer identification number

NONPROFIT CONNECT: NETWORK, LEARN, GROW

43-1121678

#### Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$ (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I

823453 11-08-18

24

\$

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

#### 10191105 795752 12893

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2018)		Page			
Name of o	rganization		Employer identification number			
	OFIT CONNECT: NETWORK, 1		43-1121678			
Part III	from any one contributor. Complete columns (a	) through (e) and the following line ent	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the yea try. For organizations			
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. once.) <b>*</b>			
(a) No.	Use duplicate copies of Part III if additional	space is needed.				
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift	t .			
-	Transferee's name, address, a	na ZIP + 4	Relationship of transferor to transferee			
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
			<u> </u>			
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
			<u> </u>			
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(2) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift	I			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
823454 11-08	3-18	I	Schedule B (Form 990, 990-EZ, or 990-PF) (201			

### 10191105 795752 12893

Department of the Treasury Internal Revenue Service

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



Name of the	organization
-------------	--------------

Employer identification number NONPROFIT CONNECT: NETWORK, LEARN, GROW

43-1121678

Par	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds of	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 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	writing that the assets held in donor advise	d 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 a	advisors in writing that grant funds can be u	ised only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose c	onferring
_			
Par	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		prically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	
	day of the tax year.		Held at the End of the Tax Year
а			
b	5 ,		
	Number of conservation easements on a certified historic str		
d			
•	listed in the National Register		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the o	organization during the tax
	year		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
0	Stan and volunteer nours devoted to morntoning, inspecting,	handling of violations, and enforcing conse	avalion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservati	on easements during the year
'	A mount of expenses incurred in monitoring, inspecting, name		on easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170/h	)(4)(B)(i)
Ũ	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	-	
	conservation easements.		0
Par	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtheran	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr	ibes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under SFAS 1		
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2018
832051	1 10-29-18		

26

Sche Par		IT CONNECT:					$\frac{43-11}{10000000000000000000000000000000000$			age <b>2</b>		
								,	,			
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that	t are a s	ignificar	nt use of its	collection	items	i		
	(check all that apply):											
а												
b												
С												
4	Provide a description of the organization's co	ellections and explain	how they further t	the organizatio	on's exe	mpt pui	rpose in Par	t XIII.				
5												
	to be sold to raise funds rather than to be ma							Yes		No		
Par	t IV Escrow and Custodial Arrang		ete if the organizati	on answered	"Yes" or	n Form 9	990, Part IV,	line 9, or				
	reported an amount on Form 990, Par											
1a	Is the organization an agent, trustee, custodia							_	_	-		
	on Form 990, Part X?						L	Yes		No		
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:									
								Amoun	<u>t</u>			
С	Beginning balance					1	c					
d	Additions during the year					1	d					
е	Distributions during the year					1	e					
f	Ending balance					📘 1	f					
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or c	custodial acco	unt liabi	lity?	L	Yes		No		
	If "Yes," explain the arrangement in Part XIII.											
Par	t V Endowment Funds. Complete i	f the organization an	swered "Yes" on F	orm 990, Part	IV, line	10.						
		(a) Current year	<b>(b)</b> Prior year	(c) Two yea	rs back	(d) Thr	ee years back	(e) Fou	r years	back		
1a	Beginning of year balance	177,490.	152,906	. 14	2,867.		145,469	,	137,	566.		
b	Contributions											
с	Net investment earnings, gains, and losses	-9,238.	24,584	. 1	0,039.		-2,602.		7,	903.		
d	Grants or scholarships											
	Other expenditures for facilities											
	and programs	-50,000.										
f	Administrative expenses											
g	End of year balance	118,252.	177,490	. 15	2,906.		142,867		145,	469.		
2	Provide the estimated percentage of the curr	ent vear end balance	e (line 1a. column (	a)) held as:	-			•				
	Board designated or quasi-endowment	35.00	%	-,,,								
b	Permanent endowment ► 65.00	%	_/*									
	Temporarily restricted endowment	%										
Ū	The percentages on lines 2a, 2b, and 2c shou											
3a	Are there endowment funds not in the posses		tion that are held a	and administer	red for tl	he orda	nization					
ou	by:	solon of the organiza				ne orga	Inzation		Yes	No		
	(i) unrelated organizations							3a(i)	100	X		
										x		
h	(ii) related organizations If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ad on Schedule R2	· · · · · · · · · · · · · · · · · · ·				3b				
4	Describe in Part XIII the intended uses of the							30	I	L		
Par			wittent funds.									
	Complete if the organization answered		Part IV line 11a	See Form 990	Dart X	line 10	1					
	Description of property	(a) Cost or of		st or other	ŕ	Accumu		(d) Boo	k volu			
	Description of property	basis (investr	• • •	s (other)		epreciat		( <b>u</b> ) 600	k valu	e		
1a	Land			. ,								
	Buildings											
	Leasehold improvements		1	39,694.		134.	404.		5,2	90.		
	Equipment			23,292.			640.		9,6			
	Other			2,950.			950.			0.		
	Add lines 1a through 1e. (Column (d) must e		X column (P) line	-	1			.1	4,9			
- otd		<u>uuai ruitti 990, Palt /</u>	<u>, coluititi (b), iiile</u>	100,1					- 1			

Schedule D (Form 990) 2018

Part VII Investments - Other Securities.	JNNECT: NETWO	JRK, LEARN, GROW	43-1121678 Page 3
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	e 11b. See Form 990. Part X. line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) DODGE & COX INCOME FUND	104,857	END-OF-YEAR MAR	KET VALUE
(B) GUGGENHEIM TOTAL RETURN			
(C) BOND	113,948	END-OF-YEAR MAR	KET VALUE
(D) EATON VANCE FLOATING RATE			
(E) I	238,011	• END-OF-YEAR MAR	KET VALUE
(F) FIDELITY US BOND INDEX			
(G) FUND	73,521	END-OF-YEAR MAR	KET VALUE
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨	530,337	•	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line         Part X       Other Liabilities.			▶
Complete if the organization answered "Yes" (	on Form 990, Part IV, line		line 25.
1.     (a) Description of liability		(b) Book value	
(1) Federal income taxes		100.000	
(2) REFUNDABLE ADVANCES		190,000.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		100.000	
Total. (Column (b) must equal Form 990, Part X, col. (B) line	,	190,000.	
2. Liability for uncertain tax positions. In Part XIII, provide			
organization's liability for uncertain tax positions under	HIN 48 (ASC 740). Chec	k here if the text of the footnote has	been provided in Part XIII

832053 10-29-18

Schedule D (Form 990) 2018

ADJUSTMENTS:
29
2018.05000 NONPROFIT

1	Total revenue, gains, and other support per audited financial statements			1	1,062,270.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	<u>-94,917.</u> 12,500.		
b	Donated services and use of facilities	2b	12,500.		
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		60,660.		
е	Add lines 2a through 2d			2e	-21,757.
3	Subtract line 2e from line 1			3	1,084,027.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	4,955.		
b	Other (Describe in Part XIII.)	. 4b			
	Add lines <b>4a</b> and <b>4b</b>			4c	4,955.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,088,982.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per F	Returi	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total expenses and losses per audited financial statements			1	1,019,574.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	12,500.		
b	Prior year adjustments	. 2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	60,660.		
е	Add lines 2a through 2d			2e	73,160.
3	Subtract line 2e from line 1			3	946,414.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	4,955.		
b	Other (Describe in Part XIII.)	. 4b			
с	Add lines <b>4a</b> and <b>4b</b>			4c	4,955.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		<u></u>	5	951,369.
Pa	t XIII Supplemental Information.				

NONPROFIT CONNECT: NETWORK, LEARN, GROW

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Provide 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 X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART V, LINE 4:

Schedule D (Form 990) 2018

THE BOARD OF DIRECTORS HAS ADOPTED A SPENDING POLICY ON THE NET ANNUAL

INVESTMENT RETURN FROM THE BOARD-DESIGNATED ENDOWMENT WHEREBY A PERCENTAGE

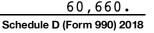
OF INVESTMENT INCOME WILL BE PROVIDED TO FUND OPERATIONS. THE

DISTRIBUTION RATE IS DETERMINED BY THE BOARD OF DIRECTORS ON AN ANNUAL

BASIS.

#### PART XI, LINE 2D - OTHER ADJUSTMENTS:

#### SPECIAL EVENT EXPENSES



60,660.

43-1121678 Page 4

CONNECT: NETWOR 12893\_2

Schedule D (Form 990) 2018 Part XIII Supplemental Info	NONPROFIT	CONNECT:	NETWORK,	LEARN,	GROW	43-1121678	Page 5
Part XIII Supplemental Info	rmation (continued)						
						Schedule D (Form 9	90) 2018

SCHEDULE G	Suppleme	ntal Information Regardir	ng Fund	raisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047			
(Form 990 or 990-EZ)	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.										
	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. Open to Public										
Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990 for instructions and the latest information.										
Name of the organization	ו		ntification number								
<u> </u>		IT CONNECT: NETWO					43-1121				
	complete this part	Complete if the organization ans	swered "Y	es" or	n Form 990, Part IV, I	line 17	7. Form 990-EZ	filers are not			
		ed funds through any of the follow	wing activ	ities. (	Check all that apply.						
a 📃 Mail solicitat					overnment grants						
<b>b</b> Internet and	and email solicitations <b>f</b> Solicitation of government grants										
c Phone solici		g Special fundraising events									
d in-person so		w aval agreement with any individ	ual (inclus	ina of	ficere directore true	+	<b>.</b>				
		or oral agreement with any individe art VII) or entity in connection with					Yes	No			
		viduals or entities (fundraisers) put			•						
compensated at le	ast \$5,000 by the	organization.									
			(iii)	Did			Amount paid	(vi) Amount paid			
(i) Name and addres or entity (func		(ii) Activity	fùndr have c	aiser Jstody	(iv) Gross receipts from activity	to (or retained by) fundraiser		(vi) Amount paid to (or retained by)			
or entity (lune			or cor contrib	utions?	nom activity	listed in col. (i)	organization				
			Yes	No							
Total											
Total 3 List all states in whi	ch the organizatio	n is registered or licensed to solic	it contrib	utions	or has been notified	Litis e	exempt from re	distration			
or licensing.							·····	<b>J</b>			
LHA For Paperwork Re	eduction Act Noti	ice, see the Instructions for For	m 990 or	990-E	Z	Scheo	dule G (Form 9	90 or 990-EZ) 2018			

832081 10-03-18

Schedule G (Form 990 or 990-EZ) 2018 NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1121678 Page 2

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 F7 lines 1 and 6b. List events with g ainta graatar than \$5 000

		of fundraising event contributions and gr			vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			LUNCHEON		(total course au)	col. <b>(c)</b> )
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	215,110.			215,110.
	2	Less: Contributions	175,110.			175,110.
_	3	Gross income (line 1 minus line 2)	40,000.			40,000.
	4	Cash prizes				
s	5	Noncash prizes	1,731.			1,731.
pense	6	Rent/facility costs	10,765.			10,765.
Direct Expenses	7	Food and beverages	38,295.			38,295.
		Entertainment	300.			300.
	9	Other direct expenses				9,569.
	10	Direct expense summary. Add lines 4 through			▶	60,660.
	11	Net income summary. Subtract line 10 from I	ine 3, column (d)			-20,660.
anc		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Revenue	1	Gross revenue				
es	2	Cash prizes				
zpens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6		Yes%	└── Yes % └── No	└── Yes %	
		Volunteer labor	No No			
		Direct expense summary. Add lines 2 through				
			h 5 in column (d)		►	
	7 8	Direct expense summary. Add lines 2 throug Net gaming income summary. Subtract line 7	h 5 in column (d)		►	
	7 8 Ent	Direct expense summary. Add lines 2 throug Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities:		►	
а	7 8 Ent	Direct expense summary. Add lines 2 throug Net gaming income summary. Subtract line 7	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: ctivities in each of these s	states?	►	Yes No
a b	7 Ent Is t	Direct expense summary. Add lines 2 throug <u>Net gaming income summary. Subtract line 7</u> ter the state(s) in which the organization condu- the organization licensed to conduct gaming a No," explain:	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: ctivities in each of these s	states?	► ►	
a b 0a	7 Ent 1 Is t	Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu- the organization licensed to conduct gaming a	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: ctivities in each of these s evoked, suspended, or te	states? rminated during the tax y	► ►	
a b 0a	7 Ent 1 Is t	Direct expense summary. Add lines 2 throug <u>Net gaming income summary. Subtract line 7</u> ter the state(s) in which the organization conduct the organization licensed to conduct gaming and No," explain: ere any of the organization's gaming licenses re-	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: ctivities in each of these s evoked, suspended, or te	states? rminated during the tax y	► ►	

Sch	edule G (Form 990 or 990-EZ) 2018 NONPROFIT CONNECT: NETWORK, LEARN, GROW 43-1	121678	Page <b>3</b>
	Does the organization conduct gaming activities with nonmembers?	Yes	🗌 No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	└── No
	Indicate the percentage of gaming activity conducted in:		0/
	The organization's facility An outside facility	13a 13b	<u>%</u> %
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100	/0
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount		
~	of gaming revenue retained by the third party <b>&gt;</b> \$		
U			
	Name		
	Address ►		
16	Gaming manager information:		
	Gaming manager compensation 🕨 💲		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	🗌 No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
Da	organization's own exempt activities during the tax year <b>s</b> <b>t IV Supplemental Information.</b> Provide the explanations required by Part L line 2b, columns (iii) and (v): and Part		01 401
га	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	III, lines 9,	96, 106,
83208	33 10-03-18 Schedule G (Form	990 or 990	-EZ) 2018
	33		

Schedule G	G (Form 990 or 990-EZ)	NONPROFIT	CONNECT:	NETWORK,	LEARN,	GROW	43-1121678	Page 4
Part IV	a (Form 990 or 990-EZ) Supplemental Infor	mation (continued)	)					
						Scl	hedule G (Form 990 or	r 990-EZ)

SCHEDULE I (Form 990)	Go	irants and Oth vernments, an ete if the organization	d Individual	s in the Uni on Form 990, Par	ted States		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		Go to www.ir	Attach to For s.gov/Form990 fo		nation.		Open to Public Inspection
Name of the organization NONPROFIT	CONNECT:	NETWORK, LI	•				Employer identification number 43-1121678
Part I General Information on Grants a							
1 Does the organization maintain records criteria used to award the grants or assisted as a second s	stance?						
2 Describe in Part IV the organization's pro-							
					anization answered "Y	es" on Form 990, Par	IV, line 21, for any
recipient that received more than <b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
NORTHLAND EARLY EDUCATION CENTER 8630 NORTH OAK KANSAS CITY, MO 64155	43-1217498	501(C)(3)	5,000.	0.			PROVISION OF EDUCATION AND THERAPY SERVICES FOR CHILDREN
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organization</li> </ul>	is listed in the line <sup>-</sup>	I table				1	1. 0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

#### 832102 11-02-18

#### NONPROFIT CONNECT: NETWORK, LEARN, GROW Schedule I (Form 990) (2018)

Part III can be duplicated if additional space is needed.

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

(e) Method of valuation (book, FMV, appraisal, other) (b) Number of (a) Type of grant or assistance (c) Amount of (d) Amount of non-(f) Description of noncash assistance recipients cash grant cash assistance

36

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

PART I, LINE 2:

Part III

THE ORGANIZATION ONLY GRANTS NONCASH MEMBERSHIP FEE REDUCTIONS AND ONE CASH

THE ORGANIZATION MONITORS THE ACTIVITIES OF THE GRANT GRANT AS AN AWARD.

RECIPIENT AND ENSURES GRANT IS USED FOR NONPROFIT PURPOSE.

43-1121678

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

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

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

LEARN,

GROW



43-1121678

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

NONPROFIT CONNECT: NETWORK,

FOUNDED IN 1974 AS THE COUNCIL OF PHILANTHROPY, IT NOW SERVES AS THE

HUB OF GREATER KANSAS CITY'S NONPROFIT SECTOR.

THE ORGANIZATION IS A REGIONAL ASSOCIATION UNIQUELY SERVING INDIVIDUALS

IN THE MANAGEMENT OF NONPROFIT ORGANIZATIONS. WE CURRENTLY HAVE MORE

THAN 2,500 PROFESSIONAL MEMBERS FROM OVER 800 ORGANIZATIONS

REPRESENTING LOCAL, REGIONAL AND NATIONAL NONPROFIT ORGANIZATIONS OF

ALL SIZES, AS WELL AS FOR-PROFIT BUSINESSES AND COMMUNITY FUNDERS.

DISTINCTIVELY, NONPROFIT CONNECT UNITES NONPROFITS, FOUNDATIONS,

COMMUNITY AND BUSINESS LEADERS IN A WAY THAT'S RARE ACROSS THE COUNTRY

TO STRENGTHEN THEIR ORGANIZATIONS AND IMPACT THE FUTURE OF KANSAS CITY

AND THE NONPROFIT SECTOR.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

FOUNDATION DIRECTORY, A BENEFIT PROVIDED TO MEMBERS, WHICH IS A

SEARCHABLE DATABASE OF NEARLY 1,000 FUNDERS THAT MAKE GRANTS IN GREATER

37

KANSAS CITY. MEMBERS ARE ALSO ENCOURAGED TO ACCESS THE E-LEARNING

CENTER TO DISCOVER ON-DEMAND TRAINING, BEST PRACTICE TOOLKITS, AND

VIDEOS ON A VARIETY OF TOPICS ESPECIALLY CREATED FOR NONPROFIT

PROFESSIONALS.

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION DOES NOT HAVE SUCH COMMITTEES.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832211 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018) Page 2								
Name of the organization	NONPROFIT	CONNECT:	NETWORK,	LEARN,	GROW	Employer identification number 43-1121678		
FORM 990, PART	r VI, SECTI	ON B, LII	NE 11B:					

FORM 990 IS PREPARED BY AN INDEPENDENT PUBLIC ACCOUNTING FIRM, REVIEWED BY THE AUDIT AND FINANCE COMMITTEE, THEN EMAILED TO THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

MEMBERS OF THE BOARD AND MANAGEMENT ARE REQUIRED TO COMPLETE CONFLICT OF

INTEREST STATEMENTS ANNUALLY. THE EXECUTIVE DIRECTOR REVIEWS THESE

STATEMENTS AND ADDRESSES ANY CONFLICTS NOTED.

FORM 990, PART VI, SECTION B, LINE 15:

GREATER KANSAS CITY NONPROFIT SALARY AND BENEFITS SURVEYS ARE USED BY THE

SEARCH COMMITTEE WHEN NEW EMPLOYEES ARE HIRED. ANY ANNUAL CHANGE IN

COMPENSATION IS DETERMINED BY THE BOARD. THE EXECUTIVE DIRECTOR IS

MONITORED ON A SEMI-ANNUAL BASIS WITH END-OF-YEAR APPRAISAL.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZING DOCUMENTS, FINANCIAL STATEMENTS, AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON WRITTEN REQUEST.

832212 10-10-18