Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury

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

	nal Revent	ue Service	► Information abo	out Form 990 and its ins	tructions is a	t www.irs.g	ov/form990		** Inspec	HOW !
-			ndar year, or tax year beginni	1.7.		and ending	Decem	ber 31	, 20 14	
В			C Name of organization Preston					D Employe	er identification r	number
Ď	Address		Doing business as	TO JIOT WITH SUITORY INC.					621757018	
-		20.00000 0 0020		f mail is not delivered to stre	et address)	Room/suite		E Telephon	e number	
				1		6159633996				
H		Wellish -		ountry, and ZIP or foreign o	ostal code	-				
님	Continue of	- 1000 march		G Gross re	ceipts \$	614,317				
Η		SIESSON III	AND RESIDENCE AND DESCRIPTION OF THE PERSON	Micer: Chan Shappard			H(a) is this a cro	up return for s	ubordinates? Yes	. ✓ No
ш	Applicati	on pending	Finallie and address of principal of	moor. Crian Sheppard			H(b) Are all s	ubordinates	included? Tyes	□ No
_	-201-200300	nie Workenson	Пентин Пент	al () d (insert so.)	7 4047/aV(1) or	☐ 527	If "No	," attach a	list. (see instruction	ons)
Ļ.	Transmission in			c) () = (msert no.) L	_ 4947(a)(1) Or	LJ 52/				
<u>J</u>	The second second			-tare- Clores	Ti va	as of formation	1			TN
K	_			ociation Uther	1 c re	ar or iomiation	1996	T III SIGNE		
Ŀ	-	Summ	ary	testes expent almostic	ant activition	· DTM prov	ridos a mer	toring an	d afterschool	program
	75	Briefly de	scribe the organization's m	ission or most signific	ant activities	. Privipio	rides a fine	looment	character edu	cation
92		for at-risk	youth from kindergarten-12t	h grade. Afterschool pr	ogramming to	ocuses on re	eading deve	поринени,	Character eou	cattory
That is		and healt	ny living. Mentoring is provid	ed through one-on-one	lunchmate m	entors.	more than	25% of i	te net assets.	
Ver	2	Check th	is box ► L if the organization	on discontinued its op	erations or o		more man	3	15 1101 4000101	15
ဗိ	3	Number	of voting members of the go	overning body (Part VI	inera)			-		14
ళ	4	Number	of independent voting mem	bers of the governing	body (Part VI	i, line (D)		_		40
tie	5	Total nur	nber of individuals employe	d in calendar year 201		ezaj .		***		400
ŧ	6	Total nur	nber of volunteers (estimate	if necessary)				-	-	400
ĕ	7a	Total unr	elated business revenue fro	m Part VIII, column (C), line 12 .			-		
_	b	Net unre	ated business taxable incor	ne from Form 990-1,	ine 34		Prior Ve		Current Y	ear
				Production of the Control of the Con			Prior To	-		603,997
0	8					–		529,403		603,997
2	9	Program	service revenue (Part VIII, Iii	ne 2g)						1 000
eve	10	Investme	nt income (Part VIII, column		1,182		1,069			
æ	11	Other rev	renue (Part VIII, column (A),	_			505.000			
	12	Total revi	enue—add lines 8 through 1	1 (must equal Part VIII,	column (A), li	ine 12)		530,585		605,066
_	13	Grants a	nd similar amounts paid (Pa	rt IX, column (A), lines	1–3)	· · · ⊨				
	14	Benefits	paid to or for members (Par	t IX, column (A), line 4)	–			121	
60	15	Salaries,	other compensation, employe	ee benefits (Part IX, col	umn (A), lines	5-10)		364,932		431,224
JSe	16a	Profession	onal fundraising fees (Part IX	(, column (A), line 11e)			-		
De	b	Total fun	draising expenses (Part IX,	column (D), line 25) 🕨	********	36,723				5102000
۵	17	Other ex	penses (Part IX, column (A).	lines 11a-11d, 11f-24	1e)			Description of the Control of the Co		153,393
	18	Total ext	enses. Add lines 13-17 (mu	ist equal Part IX, colui	nn (A), line 2:	5) +				584,617
		Revenue	less expenses. Subtract lin	e 18 from line 12 .					End of Y	20,449
25						Ве	ginning of Cu	ALTERNATION OF THE PARTY OF THE	End of f	-
ets	20	Total ass	ets (Part X, line 16)	5				813,797		889,787
Ass	21	Total liab	ilities (Part X, line 26)							10,908
Set	22	Net asse	ts or fund balances. Subtract	ct line 21 from line 20	10.00			813,797		878,879
Name change PO Box 90442 City or town, state or province, country, and ZiP or foreign postal code Amended return Amended return Application pending F Name and address of principal officer: Chan Sheppard High is ins a group return for actorization Application pending F Name and address of principal officer: Chan Sheppard High is ins a group return for actorization Po Box 90442 Tax-exempt status:										
1.6	rder nena	Ities of periu	ry. I declare that I have examiged the	his return, including accomp	anying schedule	es and statem	ents, and to th	ne best of r	ny knowledge ar	nd belief, it is
tn	e, correct	t, and comp	ete. Declaration of prepare lether t	han officer) is based on all i	nformation of wh	nich preparer h	as any know	edge.		
_		1 /	Tha (L)							
Sic	an	Sign	ature of officer				Da		1	
	-	1 (Chan Shepmed					8/3	2015	
10.00	50,000	Type	or print name and title							
_				Preparer's signature		Date	1	Check	T # PTIN	
							Firm	n's EIN ▶		
Us	se Onl	y					7	Selections and		
-	sh - 15	Firm's a	this return with the arenar	er shown above? (see	instructions	h w w w	-		DY	es 🗌 No
Ma	ly the if	15 discus	this return with the prepar	CI SHOWII BLOVET (SEC					- Lucia	

Form 990 (2)	014)
Part III	- 3

Page 2

art	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Through joy-filled friendships Preston Taylor youth will pursue God-inspired dreams. Mentoring, retreats, daily academic development
	enrichment activities, and small groups provide an environment where PTM youth are challenged and equipped to develop habits that
	are productive and prepare them for independence.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
1776	services?
	If "Yes," describe these changes on Schedule O.
4	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.
4a	(Code:) (Expenses \$ 367850 including grants of \$) (Revenue \$)
	Afterschool Program: PTM served 160 K-8th grade students in reading development, Christian discipleship, and enrichment
	opportunities. As a result, over 75% of students imporved their fluency and over 60% improved by more than one grade level.
	Through this program, students were able to take part in 20 field trips as well as PTM Life, a running and nutrition program where
	40 students trained for and completed a 5k run. Additionally, 20 students were able to participate in Dance for Fitness, a fitness and nutrition class built around dance.
	and nutrition class built around dance.

4b	(Code:) (Expenses \$ 96536 including grants of \$) (Revenue \$)
- 5	Calvin House Youth Program: PTM served over 50 6th-12th graders in this program providing weekly gatherings for a meal, a
	Bible lesson, and small group time. Additionally, students from this program were offered outings such as movie and game nights
	along with three weekend retreats a Fall retreat, a ski trip for high school students, and a mystery trip for junior high
	students. 30 Students in the Calvin House program also attended a week-long overnight camp at Barefoot Republic. In addition, high school students met on Sundays in a small group helping to build positive peer groups. Also through Calvin House Youth 30 HS
	school students met on Sundays in a small group neiping to build positive peer groups. Associated the students participated in SaLT (servant and leadership training). These 10 students were able to receive mentoring from an
	adult (4 hours a month), mentor a younger student at PTM, participate in life skills training, and academic development.
	audit (4 nouls o morning, mornes o)
	(Code:) (Expenses \$ 24,934 including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ 24,934 including grants of \$) (Nevertibe \$ Mentoring Programs: PTM provided one-on-one mentoring through lunchmate mentors. There were 75 lunchmate mentoring matches
	in 2013, DTM also provided mentoring for 34 students involved in Breakfast and Bible Study. In this program, 4th-8th grade students
	meet weekly before school with a mentor to read and discuss the Bible together. PTM also provided job skills mentoring through
	Springbreak in the Marketplace. 27 students (5th-12th grade) participated in 3 days of job shadowing with 3 different mentors.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 489320

4118	Checklist of Required Schedules		T w	T 10-
1	is the organization described in section 501/oV(2) or 4047/oV(1) (other than a private foundation)? If "Vos."	_	Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	4	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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 I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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? If "Yes," complete Schedule D, Part IV	9		/
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	ارورا		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
	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		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
ь	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		1
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		1
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		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)	_	Yes	No
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	103	/
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 27 If "Yes," complete Schedule I, Parts I and III	22		,
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		1
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		1
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	7
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		1
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 Schedule L, Part I	25b		1
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," complete Schedule L, Part II	26		,
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 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		,
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):	-		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		1
	Schedule L, Part IV	28b		1
c	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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
31	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N.	30		1
	Part !	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
ь	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		1
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		1
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			1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	37		· ·

Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
easons.	Enter the sumber reported in Poy 3 of Form 1006 Enter -0, if not explicable			
1a	Enter the hamber reported in box 3 of Furth 1036. Enter -0 in not applicable	0		
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			1
C	reportable gaming (gambling) winnings to prize winners?	10	1	
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			111
20	Statements, filed for the calendar year ending with or within the year covered by this return 2a 40)		1
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	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		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	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		1
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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	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	6a		1
3643	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or	Od .		•
D		6b	1	
~	gifts were not tax deductible?			
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1 1	- 1	
30	and services provided to the payor?	7a	1	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	1	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
ď	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	71		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	_	
	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	_	
	Sponsoring organizations maintaining donor advised funds.		-	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	-	_
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	-	
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	1		
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1	1	
	Section 501(c)(12) organizations. Enter:	1	- 1	
	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		1000	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		1
	Note. See the instructions for additional information the organization must report on Schedule O.			100
	Enter the amount of reserves the organization is required to maintain by the states in which	1		
	the organization is licensed to issue qualified health plans			
- Mari 13	Enter the amount of reserves on hand		20	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Pare	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee in	struci	tions.
Sect	Check if Schedule O contains a response or note to any line in this Part VI			. 🗵
20	1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
74	committee, explain in Schedule O.)	
2 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 14 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		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Sect	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	1.07	ode.)	
			Yes	No
10a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		1
		10b		
11a	INN	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			1, 3
12a b		12a 12b		1
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		
13	Did the organization have a written whistleblower policy?	13	1	7/=
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а		15a	1	
b	Other officers or key employees of the organization	15b		1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a	, direct	,
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			3 T
	organization's exempt status with respect to such arrangements?	16b		
-	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► Tennessee	_		
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19	✓ Own website ✓ Another's website ✓ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of intefinancial statements available to the public during the tax year.			/, and
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	ords	>	
	Allison McGaha, 108 Rushing Brook Circle, Nashville, TN 37221 (615) 498-8818			(2014)

	74				- A - Flaus	
Part VII	Compensation of Officers, Directors,	Trustees	, Key Employees,	Highest	Compensated Employer	35, anu
	Independent Contractors					

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- · List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Tritle	(B) Average hours per	(do n	ot ch	Pos eck s pe	c) ition more rson	than o	one Lan	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Chan Sheppard, Executive Director	40	1			1			62000	0	
(2) Gordon Brewer, Board Chair	2	1		1				0	0	
(3) Jeanne Burton, Board Chair-Elect	2	/		1				0	0	
(4) Patricia Wright	1	1				- 6		0	0	
(5) Steve Bartlett	3	1						0		
(6) Mike Dillon	1	1						0	0	
(7) Craig Carmon	A	,						0	0	
(8) Melora Turner	2	1							0	
(9) Rachel Barden	2	1						0	0	
(10) Cathy Weisbrodt	1	,						0		
(11) Allison McGaha, Treasurer	4	,		,						
(12) Elise Goodrich, Secretary	2	,		,				0	0	
(13) Monty Herring	2	,		*				0		
(14) Jay McKnight	1	•						0	0	

	(A) Name and title	(B) Average hours per week (list any	box, i	ot ch unles	Pos eck s pe	tion more	than o	one n an (ee)	(D) Reportable compensation from	(E) Reportable compensation fro	(F) Estimated om amount of other			
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	comp fro orgai and	ensation m the nization related nization	7
(15) Roc	osevelt Walker	2	1								0			0
(16)			•						0					
(17)											1			
(18)											-			
(19)								H			+		-	
(20)			-					-			+		-	
(21)	***************************************										-			
				_	ļ .				<u> </u>		1			
(22)											4			
(23)														
(24)											į.			
(25)														
1b c d	Sub-total	t VII, Sectio	n A	•		<u> </u>		A A	62000					
2	Total number of individuals (including bureportable compensation from the organ	t not limite	d to t					e) v			000 c	of		
3	Did the organization list any former of			or t	rust	ee,	key	em	ployee, or high	nest compens	ated		Yes	No
2700	employee on line 1a? If "Yes," complete For any individual listed on line 1a, is th	Schedule .	l for s	uch	inc	livid	ual				•	3		1
4	organization and related organizations	greater th	an \$	150	,00	07	If "Ye	es, "	complete Sci	nedule J for s	uch	4	-	
5	Did any person listed on line 1a receive for services rendered to the organization	or accrue c 1? If "Yes,"	ompe	ensa elete	tion Sc	fro hed	m an ule J	y u for	nrelated organi such person	zation or indivi	dual	5		1
_	on B. Independent Contractors Complete this table for your five highest	compensa	ted in	der	nend	tent	cont	rac	tors that receiv	ed more than !	\$100.0	000 0	f	
1	compensation from the organization. Re year.	eport compe	ensat	ion i	for t	he	calen	dar	year ending wi	th or within the	orga	nizati	on's t	ax
	(A) Name and business ad	idress						-	(B) Description of	services	С	(C) ompen		
=						_								
	Total number of independent contract	tors (includ	ing b	ut	not	lim	ited	to	those listed at	oove) who				715

Part	VIII	Statement of Reve Check if Schedule C				any line is this	D. + 1/111		rage
		Shook if Schedule C	CORTAINS	a res	donse of note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
20 00	1a	Federated campaigns		1a			revenue		012-014
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues .	ាស្រស ់	1b					
9 6	c	Fundraising events .	E + * *	-	218				
f A	10 10			10	20,911				
Gilla	d	Related organizations		1d					
Sir	e	Government grants (cor	itributions)	1e		1			
er ĝ	f	All other contributions, g	iits, grants,						
黄色		and similar amounts not inc	the same of the sa	if	582,868				
f b	g	Noncash contributions include	ded in lines 1a-	11: \$					
8 5	h	Total. Add lines 1a-1	$f = c \cdot c \cdot c$	1865		603,997			
9					Business Code				
le le	2a								
8	b	***************************************							
.8	c	***************************************							
2	ď	***************************************							
S	🎽	***************************************							
13	,	All -46	·						
8	1	All other program ser							
	_ g	Total. Add lines 2a-2							
Program Service Revenue	3	Investment income		aivio	11 11 11 11 11 11				
		and other similar amo	1 (5.7)	24.1	>	1,069			1,069
	4	Income from investmen	t of tax-exen	npt bo	ond proceeds ►				
	5	Royalties			▶				
			(i) Real		(ii) Personal				
	6a	Gross rents							
	ь	Less: rental expenses							
	c	Rental income or (loss)					- 1		
	ď	Net rental income or	(lose)						
	7a	Gross amount from sales of	(i) Securitie	es l	(ii) Other				
	10	assets other than inventory	11.0	-	77.4				
	ь	Less: cost or other basis	_	_					
		and sales expenses .	1						N.
		120		_					
	C	Gain or (loss)							
	d	Net gain or (loss) .							
en.									
evenue	8a	Gross income from fu	indraising				1		
ĕ		events (not including \$	20,91		- 1		1		
æ	ľ	of contributions reporte).			1		- 6
Other R		See Part IV, line 18 .	(a) K * 3	а	9,251		- 1		
チ	ь	Less: direct expenses		ь	9,251	and the second of	1		40.00
O	c	Net income or (loss) f		sina (0			
		Gross income from ga							7 2 2 7 7
	200	그리고 있었다면 내가 있네요 맛없이 되었다면 하나 그래?	NOW THE TAXABLE FOR	40.000			- 1		- 19
	2	Less: direct expenses		h					
	b	Net income or (loss) for		activ	itiae			1 1 1 11 11	100000
	C +000	Gross sales of in			This is a first				
	108	returns and allowance			. 1				1
	0.45			1100				100 100 100 100 100 100 100 100 100 100	4 1 2 3
	ь	Less: cost of goods s				12.00	- T-1	STATE OF THE PARTY.	The second second
l	C	Net income or (loss) fr		inve					
		Miscellaneous R	evenue.		Business Code		4 70	2.2	1235
	11a								
	b			200					
	c	######################################							
	d	All other revenue .							
	e	Total. Add lines 11a-			2 53 535 20 1			7.7	
	12	Total revenue. See in		1 20 1		605,066			12/15/5
		1		-		000,000			1.069

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).

	Check if Schedule O contains a respons	e or note to any lin	e in this Part IX .		
8b, 9	of include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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				
5	Benefits paid to or for members	62,000	40,300	12.400	0.20
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	82,000	40,300	12,400	9,300
7 8	Other salaries and wages	325,338	298,857	11,952	14,529
9	Other employee benefits	20,694	17,719	2,485	490
10	Payroll taxes	23,192	19,829	2,783	580
11	Fees for services (non-employees):				
а	Management				
ь	Legal				
c	Accounting	5,500		4,675	825
ď	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees				
12	Advertising and promotion				
13	Office expenses				
14	Information technology	17,340	6,707	5,273	5,360
15	Royalties	60			60
16	Occupancy	23,094	18,039		
17	Travel	11,103	8,579	4,730	325
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	11,103	0,379	2,072	452
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	22,489	19,116	2,249	1,124
23	Insurance	10,769	2,378	8,391	- 1,121
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 O.)				
а	Program Curriculum/Food	9,802	9,802		
ь	General Program Expenses	19,462	19,375		
C	Volunteer Management	10,165	5,010	1,564	87
d	Student Field Trips & Outings	22,449	22,449	1,007	3,591
e	All other expenses Benevolence	1,160	1,160		
25	Total functional expenses. Add lines 1 through 24e	584,617	489,320	58,574	36,723
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)			535.7	30,723

2 Savings and temporary cash investments	Pa	rt X	Balance Sheet			
1			Check if Schedule O contains a response or note to any line in this Par	tX		🗅
2 Savings and temporary cash investments						
2 Savings and temporary cash investments 3 Piedges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from the disqualified persons (as defined under section 4958(f)(f)), persons described in section 4958(f)(g), and contributing employees and sponsioning organizations of asction 4958(f)(g), wountary employees beneficiary organizations (see instructions). Complete Part II of Schedule D 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 10b Less: accumulated depreciation 11b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—other securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Tax-evempt bond liabilities 20 Total and the payable sto current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 22 Complete lines 27 through 25, and lines 33 and 34. 10 Unsecured notes and loans payable to unrelated third parties 23 Corporative restricted net assets 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities and lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Torostricted net assets 28 Permanently restricted net assets 29 Permanently restricted		1	Cash—non-interest-bearing	147,178	1	177,104
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 9458(ff)), person described in section 4598(f(3))8, and contributing employees and sponsoring organizations of section 501(p)(g) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b Instruments—other securities. See Part IV, line 11 11 Investments—publicity traded securities 11 Investments—publicity traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—brogram-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 fluorgh 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Total liabilities. Add lines 17 through 25 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Secured mortgages and notes payable to unrelated third parties 26 Total liabilities. Add lines 17 through 25 27 Organizations that do not follow SFAS 117 (ASC 958), check here I and complete lines 27 through 29, and lines 33 and 34. 27 Total inabilities and counted account liability. Complete Part	- 1		- "회사가 가장 , , 면서, 회사가 있다고 있어 경우가 있다. "아프라그트로 그렇게 되는 다른 그리는	20,7,000,000		209,579
4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 6 Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(II), persons described in section 4958(f)(II), persons described in section 4958(f)(III), persons described in section 4		3			3	
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4956(f)(1), persons described in section 4958(c)(3)(6), and contributing employers and sponsoring organizations de section 501c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L					5	
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11 Investments — publicly traded securities 12 Investments — other securities. See Part IV, line 11 13 Investments — program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 17 10,908 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties) 26 Other liabilities (including federal income tax, payables to related third parties) 27 Other liabilities not included on lines 17-24). Complete Part X of Schedule D 28 Total liabilities. Add lines 17 through 25 29 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. 29 Unrestricted net assets 20 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Unterestricted net assets or fund balances 35 Total is assets or fund balances 36 Total liabilities and net assets or fund balances 37 Total liabilities and net assets or fund balances 38 Total net assets or fund balances 39 Total net assets or fund balances 30 Se78.879		10a	other basis Constitute Don't VII of Cabantute D			
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13		11	Investments—publicly traded securities			
14		12	Investments—other securities. See Part IV, line 11		12	
15 Other assets. See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 34). 17 Accounts payable and accrued expenses. 18 Grants payable. 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 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. 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. 28 Temporarily restricted net assets. 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 20 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 34 Intal liabilities and net assets of fund balances.		13	Investments-program-related. See Part IV, line 11		13	
16 Total assets. Add lines 1 through 15 (must equal line 34)		14			14	
17 Accounts payable and accrued expenses		15	Other assets. See Part IV, line 11		15	
18 Grants payable	_	_		813,797		889,787
19 Deferred revenue		1-6323				10,908
20 Tax-exempt bond liabilities						
21 Escrow or custodial account liability. Complete Part IV of Schedule D . 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . 23 Secured mortgages and notes payable to unrelated third parties . 24 Unsecured notes and loans payable to unrelated third parties . 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 . 25 Total liabilities. Add lines 17 through 25 . 26 Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets						
22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L						
trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.220	10000			21	
Unsecured notes and loans payable to unrelated third parties	Liabilities	22	trustees, key employees, highest compensated employees, and			
Unsecured notes and loans payable to unrelated third parties		22	- [4] 할머니에 가게 되면 작업이 없는 가격이 있습니다. 전에 가득했다면 하면 작업을 가면 있습니다. 하는 것이 없는 것이 되었습니다. 그런 그런 그런 그는 그리고 있다. 그리고 있다는 그리고 있다. 그리고 있다는 그리고 있다는 그리고 있다. 그리고 있다는 그리고 있다는 그리고 있다. 그리고 있다는 그리고 있다는 그리고 있다.			
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parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		2			24	
26 Total liabilities. Add lines 17 through 25		25	parties, and other liabilities not included on lines 17-24). Complete Part X			
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complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets	3alances	-			20	10,908
34 Total liabilities and not assets/fund halances						
34 Total liabilities and not assets/fund halances		27	Unrestricted net assets	813 707	27	940.054
34 Total liabilities and not assets/fund halances		100		010,737		
34 Total liabilities and not assets/fund halances	P	29				23,023
34 Total liabilities and not assets/fund halances	Net Assets or Fun		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and □			
34 Total liabilities and not assets/fund halances		30	Capital stock or trust principal, or current funds		30	
34 Total liabilities and not assets/fund halances		31	Paid-in or capital surplus, or land, building, or equipment fund			
34 Total liabilities and not assets/fund halances		32				
34 Total liabilities and not assets/fund halances		2272	Total net assets or fund balances	813,797		878 970
		34	Total liabilities and net assets/fund balances			100000 -0-000

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Part	X Reconciliation of Net Assets			100.00
	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)	_	6	05,066
2	Total expenses (must equal Part IX, column (A), line 25)	_	_	84,617
3	Revenue less expenses. Subtract line 2 from line 1		_	20,449
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		8	13,797
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities		_	
7	Investment expenses	-		
8	Prior period adjustments	_	_	
9	Other changes in net assets or fund balances (explain in Schedule O)			44,633
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))		8	78,879
1	Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	 E	Yes	No No
5110	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:	2a		1
	Separate basis Consolidated basis Both consolidated and separate basis			-2
b	Were the organization's financial statements audited by an independent accountant?	2b	1	1
c	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	/	- 4
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		1
Ŀ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

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