

EXTENDED TO FEBRUARY 15, 2019

Department of the Treasury Internal Revenue Service

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.

Inspection

OMB No. 1545-0047

<u>A</u>	For the	2017 calendar year, or tax year beginning A	PR 1,	2017 and	ending M	IAR 31, 2	018			
В	Check if applicabl	C Name of organization				D Employer i	dentific	cation number		
	Addre chang	FAMILY FIRST HEALTH COF	RPORAT	ION						
Ē	Name chang Initial	Doing business as						118262		
	return Final return	Number and street (or P.0. box if mail is not del 116 SOUTH GEORGE STREET		eet address)	Room/suite	(717)801-4805				
	termin ated	City or town, state or province, country, and 2	ZIP or forei	gn postal code		G Gross receipts	\$	22,351,709.		
	Amen	10KK, PA 1/401				H(a) Is this a g	roup re	eturn		
	Application	F Name and address of principal officer: JEN	NIFER	ENGLERTH		for subord	dinates	? Yes X No		
	pendir	SAME AS C ABOVE				H(b) Are all subore	dinates in	cluded? Yes No		
			(insert i	no.) 4947(a)(1)	or 527	If "No," at	ttach a	list. (see instructions)		
		e: ► WWW.FAMILYFIRSTHEALTH.C	RG			H(c) Group ex	emption	n number 🕨		
K	Form of	organization: X Corporation Trust As	sociation	Other >	L Year	of formation: 19	70 N	1 State of legal domicile: PA		
Pa	art I	Summary								
4	1	Briefly describe the organization's mission or most	significant	activities: FAMI	LY FIR	ST HEALT	H'S	MISSION IS		
Governance		TO PROVIDE SERVICES OUR PA	TIENT	S NEED; TO	PROMO	OTE AND S	SUPP	ORT		
rna	2	Check this box 🕨 🔲 if the organization discor	tinued its	operations or dispos	sed of more	than 25% of its	net ass	ets.		
o Ve	3	Number of voting members of the governing body (Part VI, lin	e 1a)			. 3	10		
Ğ	4	Number of independent voting members of the gov	erning boo					10		
δ. 80	5	Total number of individuals employed in calendar ye	ear 2017 (F	Part V, line 2a)			. 5	268		
/iţi	6	Total number of volunteers (estimate if necessary)					6	40		
Activities &	7 a	Total unrelated business revenue from Part VIII, col						0.		
_	b	Net unrelated business taxable income from Form 9	990-T, line	34	<u></u>		. 7b	0.		
						Prior Year		Current Year		
ø	8	Contributions and grants (Part VIII, line 1h)				6,031,9		7,871,745.		
Revenue	9	Program service revenue (Part VIII, line 2g)				10,076,7		11,370,447.		
eve	10	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)			7,2	10.	21,065.		
<u>~</u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,				2,202,7	85.	2,961,918.		
	1	Total revenue - add lines 8 through 11 (must equal l				18,318,7	24.	22,225,175.		
		Grants and similar amounts paid (Part IX, column (A				181,9	86.	208,690.		
		Benefits paid to or for members (Part IX, column (A)					0.	0.		
S	45	Salaries, other compensation, employee benefits (F				11,318,9	08.	14,041,730.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), li					0.	0.		
ē	b	Total fundraising expenses (Part IX, column (D), line	25)	7,5	73.					
й	17	Other expenses (Part IX, column (A), lines 11a-11d,				6,774,9	34.	7,828,418.		
		Total expenses. Add lines 13-17 (must equal Part IX				18,275,8	28.	22,078,838.		
	19	Revenue less expenses. Subtract line 18 from line				42,8	96.	146,337.		
Net Assets or	g				Ве	ginning of Current	t Year	End of Year		
sets	20	Total assets (Part X, line 16)				7,964,4	04.	7,604,242.		
ASS	21	Total liabilities (Part X, line 26)				4,524,0		3,994,131.		
ESET.	22	Net assets or fund balances. Subtract line 21 from	ine 20			3,440,3	91.	3,610,111.		
Pa	art II	Signature Block								
Und	ler pena	Ities of perjury, I declare that I have examined this return,	including ac	companying schedule	s and stateme	ents, and to the be	st of my	knowledge and belief, it is		
true	, correc	t, and complete. Declaration of preparer (other than office	r) is based o	n all information of wh	nich preparer	has any knowledg	e.			
Sig	n	Signature of officer				Date				
Hei	re	JENNIFER ENGLERTH, PRES	SIDENT	AND CEO						
		Type or print name and title								
		Print/Type preparer's name	Preparer's	signature			Check	PTIN		
Pai	d		CHOMAS	LANNING	0	1/08/19	 self-employe			
Pre	parer	Firm's name ► COHNREZNICK LLP				Firm's I	EIN 🛌	22-1478099		
Use	Only	Firm's address ▶ 4 BECKER FARM ROA								
_		ROSELAND, NJ 0706	58			Phone i	no.97	3-228-3500		
Ma	y the II	RS discuss this return with the preparer shown above	e? (see ins	structions)				X Yes No		

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	FAMILY FIRST HEALTH'S MISSION IS TO PROVIDE SERVICES OUR PATIENTS	
	NEED; TO PROMOTE AND SUPPORT HEALTHY LIFESTYLES; TO COLLABORATE WITH	
	OTHERS TO IMPROVE ACCESS AND BREAK DOWN BARRIERS OF AFFORDABILITY,	
	LANGUAGE AND CULTURE; AND TO ADVOCATE FOR OUR PATIENTS AND THE	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	∐ No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes 🖸	∐ No
	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 \$18,815,504. including grants of \$208,690.) (Revenue \$13,841,30	
	MEDICAL, DENTAL AND SOCIAL SERVICES ARE PROVIDED BY FAMILY FIRST HEALT	<u>.'H</u>
	TO UNDERSERVED PATIENTS IN YORK AND ADAMS COUNTIES IN THE STATE OF	
	PENNSYLVANIA. GENERAL MEDICAL CARE IS PROVIDED AT OUR HEALTH CENTERS	
	IN YORK, HANOVER, HANNAH PENN MIDDLE SCHOOL, LEWISBERRY, AND	
	GETTYSBURG. DENTAL CARE IS PROVIDED AT OUR DENTAL CENTERS IN YORK,	
	HANOVER AND GETTYSBURG.	
	207 660	<u>, , , , , , , , , , , , , , , , , , , </u>
4b	(Code:) (Expenses \$ 387,662. including grants of \$) (Revenue \$ 447,29	<u>, () </u>
	ONE ASPECT OF THE SOCIAL SERVICES DEPARTMENT IS THE NURSE FAMILY	
	PARTNERSHIP PROGRAM (NFP). NFP PARTNERS A SPECIFICALLY TRAINED NURSE WITH A FIRST TIME MOTHER. THE PROGRAM BEGINS IN PREGNANCY AND	
	CONTINUES UNTIL THE CHILD TURNS TWO YEARS OLD. THE NURSE VISIT TAKES	
	PLACE WHERE THE PATIENT IS MOST COMFORTABLE. THE EXPENTANT MOTHER MUS	
	ETNER THE PROGRAM BEFORE 28 WEEKS GESTATION AND BE ELIGIBLE FOR WIC	, 1
	(WOMEN, INFANTS AND CHILDREN PROGRAM) OR MEDICAL ASSISTANCE. THE	
	PROGRAM BEGAN IN 2001 AND AVERAGES 100 PATIENTS AT ANY GIVEN POINT.	
	FROGRAM DEGAN IN 2001 AND AVERAGES 100 FAILENIS AT ANT GIVEN FOINT.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
	/ (Expenses to the final and grains of the final and g	— <i>'</i>
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 19,203,166.	
	Form 990	(2017)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "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 land 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? 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?			
	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's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	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," 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 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 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			
	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,"			
	complete Schedule G. Part III	19		X
			$\alpha\alpha\alpha$	(

Form **990** (2017)

Part IV Checklist of Required Schedules (continued)

			Yes	_
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		
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	Х	
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	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		х
h	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			
	, ,	25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
20	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		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		x
20	of any of these persons? If "Yes," complete Schedule L, Part III	21		
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):	00-		х
	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		
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	Х	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			3,7
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	l		3,7
	If "Yes," complete Schedule N, Part I	31		<u> </u>
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		<u> </u>
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		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			l
	Part V, line 1	34		<u> X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		_	$\Omega\Omega\Omega$	

Form 990 (2017) FAMILY FIRST HEALTH CORPORATION Part V Statements Regarding Other IRS Filings and Tax Compliance

a 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 Gross income from members or shareholders 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12a		Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		<u></u>		
be Enter the number of Forms W.2G inclusted in line 1s. Enter-0** if not applicable 1st be organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W.3, Transmittat of Wage and Tax Statements, field for the caucierds year entiring with or within the year covered by this return 26 kg 2 kg						Yes	No
b Enter the number of Forms W-2G included in line 1s. Enter-0-18 included in line 1s. Enter-0-18 in not applicable in Colift the organization comply with backup withholding rules for reportable gammans (gambiling) winnings to prite winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, lifed for the calendar year andring with or within the year covered by this return If the calendar year andring with or within the year covered by this return If the calendar year andring with or within the year covered by this return Note. If the sum of fines 1 and 2 as greater than 250, you may be required to e-file (see instructions) Note. If the sum of fines 1 and 2 as greater than 250, you may be required to e-file (see instructions) Note. If the sum of fines 1 and 2 as greater than 250, you may be required to e-file (see instructions) B. If Yea's has filed a Form 990 of 76 the layer 2" Any, ** to limit and you do not not claiming the year? 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 of 15 the organization and 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 their financial account)? 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 their financial account)? 5b If Yes, and the the number of the foreign country (such as a bank account, securities account, or their financial account)? 5c If If Yes, and the prayment of the organization that it was or is a party to a prohibited tax sheller transaction? 5c If Yes, did the organization and party (such as a bank account, securities). 5c If Yes, did the organization include with every solicitation an express statement that such contributions or gifts we	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	88			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, riled for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to a-rile (eee instructions) 3a	b		1b	0			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, idea for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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 they year? 3a X b if "Yes, "has it filed a Form 990-T for this year? if "No," to film 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an explanation in Schedule O 5b If "Yes," that it filed a form 990-T for this year? if "No," to film 3b, provide an explanation in Schedule O 5c If "Yes," the time the name of the foreign country. ► 5c If "Yes," enter the name of the foreign country. ► 5c If "Yes," the time same of the foreign country. ► 5c If "Yes," to line 5a or 5b, did the organization file Form 8886-17 6c If "Yes," to line 5a or 5b, did the organization file Form 8886-17 6c If "Yes," to line 5a or 5b, did the organization file Form 8886-17 6d Does the organization invaluation file Form 8886-17 6d Does the organization have were not tax deductible as charitable contributions? 6d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c If "Yes," did the organization orelive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Did the organization received as contribution	С		portab	le gaming			
filed for the calendar year ending with or within the year covered by this return 2a		(gambling) winnings to prize winners?	······		1c	Х	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a A at yit mean and organization have unrelated business gross income of \$1,000 or more during the year? 3a A at yit meduring the calendary year, did the organization have un interest in, or a signature or other authority over, a funcional account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR). 5b If "Yes," its life of the freeign 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 prohibitor tax shelter transaction? 5b If yes, "to line Sa or 5b, did the organization file form 8886-17 6c If "Yes," its line Sa or 5b, did the organization file form 8886-17 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? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7a Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible or or the value of the goods or services provided? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b If the granization sell, example in excess of \$75 made party as a contribution of quartication file form 8899 as required? 7c X If If Yes, and the organization neceeve a payment in excess of \$75 made party as a contribution of quartication file form \$8000 and services provided to the paymination of the value of the goods or services provided? 7c If If Yes, an	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to _e-fie (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 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 baria Account, securities account, or other financial account); over, a financial account in a foreign country (such as a baria Account, securities account, or other financial account); over, a financial account in a foreign country (such as a baria Account, securities account, or other financial accounts); over, a financial account in a foreign country (such as a baria Account, securities account, or other financial accounts); over, a financial account in a foreign country (such as a baria Account, securities). 5b If "ves," the organization aparty to a prohibited tax shelter transaction? 5c If "ves," the ine Sar of 5b, did the organization file form 888-67. 5c If "ves," the ine Sar of 5b, did the organization file form 888-67. 5c If "ves," did 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? 5c Organization shart may receive deductible contributions under section 170(c). 5d If "ves," did the organization include with every solicitation an express statement that such contributions or gifts were not itax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "ves," indicate the number of Forms 8282 filed during the year 7c If "ves," indicate the number of Forms 8282 filed during the year 8d If "ves," indicate the number of Forms 8282 filed during the year 9c If the organization receive a contribution of care, boats, ariginates, or other velvation file form 8999 as required? 7d If the organization receive a contribution of care, boats, ariginates, or other velvation file		filed for the calendar year ending with or within the year covered by this return	2a	268			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4b If Yes,* has it filled a Form 9901 for this year? If *No,* to like 3b, provide an explanation in Schedule O 4c All 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)? 5c Be instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c Was the organization aparty to a prohibited tax shelter transaction? 5c Was the organization have variety on prohibited tax shelter transaction? 5c If Yes,* to line 5a or 5b, did the organization file Form 8886 T? 6c 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? 6c Was the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization stat may receive deductible as charitable contributions? 6c Did the organization state in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7c Organizations that may receive deductible contributions under section 170(c). 8d If Yes,* did the organization organization organization selection organization selection and partly for goods and services provided to the payor? 7d If Yes,* did the organization organization file Form 8282? 8d If Yes,* did the organization organization file Form 8282? 8d If Yes,* did the organization organization file Form 8282 filed during the year 9d If Yes, and the payor organization file Form 8282 filed during the year 9d If Yes and the payor organization file Form 8283 as required? 7d If the organization received a contribution of qualified intellectual property, did the organization file Form 829	b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
b If "Yes," has it filed a Form 990-T for this year? #"No," to line 3b, provide an explanation in Schedule O 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 accounts, 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). 5b Was the organization a party to a prohibited tax sheller 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 sheller transaction? 5b X c If "Yes," to line Sa or Sb, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c X b If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles a charitable contributions? 6c X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Organizations that may receive deductible contributions under section 170(c). 6c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization notify the donor of the value of the goods or services provided? 7 The organization self, exchange, or otherwise dispose of tangible personal property for which it was required to the leave of the organization notify the donor of the value of the goods or services provided? 7 The Did the organization notify the donor of the value of the goods or services provided? 7 The Did the organization notify the donor of the value of the goods or services provided? 8 Did the organization notin		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
4a Al 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, or other financial accounts)? 5b If "Yes," either the name of the foreign country: 5c einstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). 5c Was the organization aparty to a prohibited tax sheller transaction at any time during the tax year? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 8886.T? 6d 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? 6d If "Yes," did the organization include with every solicitation an express statement that such contributions or gitts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 The section of the form 8882? 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 If "Yes," indicate the number of Forms 8282 filed during the year 9 Did the organization received a contribution of qualified intellectual property, did the organization for the value of the goods or services provided? 9 If "Yes," did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1096.C? 10 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1096.C? 10 If the organization service and contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1096.C? 11 Section 50	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
financial account, in a foreign country (such as a bank account, securities account, or other financial account)? b f "Yes," enter the name of the foreign country.	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		
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 ("BAF). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a			
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? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5a Does the organization 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? 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c To organizations that may receive deductible contributions under section 170(c). a 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to tile Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year b Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 5ponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization maintaining donor advised funds. b Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 5 Section 501(c)(27) organizations. Enter: a financial form the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring		financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	4a		X
56 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 50 Did any taxable party notify the organization file form 8886-T? 50 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? 51 If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 52 Organization shat may receive deductible contributions under section 170(c). 53 If 'Yes,' did the organization notify the donor of the value of the goods or services provided to the payor? 54 If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 55 If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 56 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? 56 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? 57 Organization stat may receive deductible contributions under section 170(c). 58 Organization received a contribution of value of the goods or services provided? 59 Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 50 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1099-C? 50 Sponsoring organization nation of caris, boats, airplanes, or other vehicles, did the organization file a Form 1099-C? 51 Sponsoring organization make any taxable distributions under section 4966? 52 Did the sponsoring organization make any taxable distributions under section 4966? 53 Sponsoring organization make any taxable distributions under section 4966? 54 Did the sponsoring organization make any tax	b	If "Yes," enter the name of the foreign country:					
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 1"Yes," to line 5 a or 5b, did the organization file Form 8886-T7 8 2		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	s (FBAR).			
ti "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c	5a						
56 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? 56 Fif***, **did the organization include with every solicitation an express statement that such contributions or girls were not tax deductible? 57 Organizations that may receive deductible contributions under section 170(c). 58 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? 58 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 59 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 50 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 50 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 70 Did the organization received any funds, directly or indirectly, on a personal benefit contract? 71 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 71 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? 72 Sponsoring organizations maintaining donor advised funds. 73 Did the sponsoring organization make any taxable distributions under section 4966? 74 Sponsoring organization make any taxable distributions under section 4966? 75 Sponsoring organization make any taxable distributions under section 4966? 76 Section 501(c)(7) organizations. Enter: 87 In thitation fees and capital contributions included on Part VIII, line 12 100a 100b 100b 100b 100b 100b 100b 100b							X
any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a 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? 7 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8 d If "Yes," indicate the number of Forms 8282 filed during the year 9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0? 9 Sponsoring organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0? 9 Sponsoring organization maw excess business holdings at any time during the year? 9 Sponsoring organization maw excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advised funds. 10 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advised funds. 10 Did the sponsoring organization make a distribution to a donor, donor advised funds. 10 Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable dis					5с		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 7 D I I Tyes," did the organization notify the donor of the value of the goods or services provided? 8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 10 If the organization received a contribution of outsified intellectual property, did the organization file Form 8899 as required? 11 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 12 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? 12 Sponsoring organization make any taxable distributions under section 4966? 13 Did the sponsoring organization make any taxable distributions under section 4966? 14 Did the sponsoring organizations. Enter: 15 Gross receipts, included on Form 990, Part VIII, line 12 16 Gross receipts, included on Form 990, Part VIII, line 12 17 Did Tyes," enter the amount of tax exempt interest received or accrued during the year 18 Section 501(c)(12) organizations. Enter: 19 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 19 Section 4947(a)	6a		e orga	nization solicit			37
were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a 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? 5 b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d 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? f Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 Th X 8 Sponsoring organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization have a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization have a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization have a distribution to a donor, donor advisor, or related person? 10 Did bid to some from members or shareholders 11 Did Did the organization ferei		,			6a		X
7 Organizations that may receive deductible contributions under section 170(c). a 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? 7 A X The bif "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? To I if "Yes," in dicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 E X 7 I Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 I X 7 I I W 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? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organizations make a distribution to a donor, donor advisor, or related person? Section 501(c)(17) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Section 501(c)(17) organizations. Enter: Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 501(c)(12) organizations. Enter: Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 501(c)(12) qualified nonprofit health insurance issuers. I set organization is licensed to issue qualified health plans in more than one state?	b	and the second s					
a 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? b "Yes," did the organization notify the donor of the value of the goods or services provided? To Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d	_				6b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Pid the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c		•			_		v
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		· · · · · · · · · · · · · · · · · · ·					
to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7					76		
d if "Yes," indicate the number of Forms 8282 filed during the year Pid the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 bid the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 bid the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 bid the sponsoring organizations. Enter: a initiation fees and capital contributions included on Part VIII, line 12 bid Gross income from members or shareholders Bid Gross income from members or shareholders bid Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 14 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 15 If "Yes," enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. be Enter the amount of reserves on hand c Enter the amount of reserves on hand bid the organization receive any payments for indoor t	C		as requ	illed	70		x
the Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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 Sponsoring organization maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b Did the sponsoring organizations. Enter: a 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 Did Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from ther 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Ч		7d		70		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make and distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations. Enter: a linitiation 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 10 Did 10 Section 501(c)(12) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 11 If It	e			?	7e		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? b Cection 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross income from members or shareholders b Gross income from members or shareholders c Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 112a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b	f						
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Gross income from members or shareholders 11 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? 15 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 16 Section 501(c)(29) qualified nonprofit health insurance issuers. 18 Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 18 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 19 C Enter the amount of reserves on hand 10 C Enter the amount of reserves on hand 11 D Id the organization receive any payments for indoor tanning services during the tax year? 11 D If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 11 D If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.				99 as required?			
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? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Did the sponsoring organization sake a distribution to a donor, donor advisor, or related person? Did the sponsoring organization sake a distribution to a donor, donor advisor, or related person? Did the sponsoring organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Did forss receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Did forss income from members or shareholders Did Section 501(c)(12) organizations. Enter: Did Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Did If "Yes," enter the amount of tax-exempt interest received or accrued during the year Did If "Yes," enter the amount of tax-exempt interest received or accrued during the year Did If "Yes," enter the amount of reserves the organization the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Did the organization is licensed to issue qualified health plans Did the organization receive any payments for indoor tanning services during the tax year? Did the organization receive any payments for indoor tanning services during the tax year? Did Tyes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. Did	•						
sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organizations. Enter: a 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 Cross income from members or shareholders b Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 112a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b If Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c If Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.							
a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Initiation fees and capital contributions included on Part VIII, line 12					8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a 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 Gross income from members or shareholders 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	9						
Section 501(c)(7) organizations. Enter: a 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 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explanation in Schedule O. In the service of club and an explana	а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b 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 Gross income from members or shareholders 11a 1 1b 1 1b 1 1b 1 1b 1 1a 1 1b 1 1b	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	10	Section 501(c)(7) organizations. Enter:					
a Gross income from members or shareholders 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b			10a				
a Gross income from members or shareholders 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	11	Section 501(c)(12) organizations. Enter:					
amounts due or received from them.) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b			11a				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b						
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b		/	$\overline{}$				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b			1 1	•	12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b			12b				
Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	13				4-		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	а	-			13a		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b		·					
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b	b		40:-				
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0 14b 14b	_						
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			LISC		140		x
							- 22
	D	п тез, паз к шей а гопптиго котерок кнезе раушенкз! ју "No," provide an explanation in Scheduli	 U			990	(2017)

FAMILY FIRST HEALTH CORPORATION 23-7118262 Page 6 Form 990 (2017) 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 Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management

	g _ cay ama mamagement					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10			
	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 O.		4.0			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p 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					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 was fi	led?	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 a	opoint one	e or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockholde	ers, 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?			8a	_X_	
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					
<u> </u>	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 Co	ode.)			Γ
	District the second of the sec			40	Yes	No X
	Did the organization have local chapters, branches, or affiliates?			10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such classification and because the ground the procedure of the companies of the			401-		
44-			iling the form?	10b	Х	
_	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y before i	iling the form?	11a	Λ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			40-	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a 12b	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risk			120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	,		12c	Х	
13	in Schedule O how this was done Did the organization have a written whistleblower policy?			13	X	
				14	X	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approve			14	-2	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	a by iiluel	Jonaont			
а	The approximation is OFO. For extina Director, automorphisms			15a	Х	
	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).			. 3.2		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with	а			
	taxable entity during the year?			16a		х
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 ▶PA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-7	(Section	501(c)(3)s only) av	ailable		
	for public inspection. Indicate how you made these available. Check all that apply.		- /			
	Own website Another's website X Upon request Other (explain	n in Sched	dule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co		•	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 ho	oks and re	ecords.			

116 SOUTH GEORGE STREET,

BECKY SHEARER, CFO -717-801-4809

YORK,

Form **990** (2017)

17401

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and 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.

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

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

(A)	(B)		(C) Position					(D)	(E)	(F)
Name and Title	Average		(do not check more than one box, unless person is both an					Reportable	Reportable	Estimated
	hours per week		, unles cer an					compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	ndividual trustee or director				pa		organization	(W-2/1099-MISC)	from the
	related	stee o	ustee			ensat		(W-2/1099-MISC)		organization
	organizations	al trus	onal tr		loyee	comp				and related
	below	dividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ALLISON HAWTHORNE	line) 1.50	<u>=</u>	Ë	J0	-S	훈	요			
BOARD SECRETARY	1.50	Х						0.	0.	0.
(2) ANN SHALEIALOHALANI	1.50	Λ						0.	0.	0.
DIRECTOR	1.50	Х						0.	0.	0.
(3) CHARLIE SNYDER	1.50									
DIRECTOR		х						0.	0.	0.
(4) CINDY STEEL	1.50									
DIRECTOR		Х						0.	0.	0.
(5) DON DUSICH	1.50									
BOARD TREASURER		Х		Х				0.	0.	0.
(6) JOHN BREON	1.50									
DIRECTOR		Х						0.	0.	0.
(7) MARGARET ECKLES-RAY	1.50									
DIRECTOR - RESIGNED 1/30/18		Х						0.	0.	0.
(8) MICHAEL SHANEBROOK	1.50									
DIRECTOR		Х						0.	0.	0.
(9) RICK HACKMAN	1.50									
OUTGOING DIRECTOR		Х						0.	0.	0.
(10) ROBERT BERHHARD	1.50									
BOARD VICE CHAIR		Х		X				0.	0.	0.
(11) VICTORIA KROTZER	1.50									
BOARD CHAIR		Х		Х				0.	0.	0.
(12) BECKY SHEARER	40.00							110 511		10 11 =
VICE PRESIDENT OF FINANCE	10.00			Х				112,614.	0.	18,117.
(13) JENNIFER ENGLERTH	40.00	-		l				154 560	•	10 151
PRESIDENT & CHIEF EXECUTIVE OFFICER	40.00			Х				174,768.	0.	19,451.
(14) ASCELINE GO	40.00							021 040	•	11 000
VP OF MEDICAL SERVICES	40.00				Х	_		231,842.	0.	11,828.
(15) JOSEPH MOUNTAIN	40.00				37			100 042	0	0.42
VP OF DENTAL SERVICES	40.00				Х			180,843.	0.	943.
(16) LAJUAN MOUNTAIN	40.00	ł			~			169 207	0.	22 771
VP OF DENTAL SERVICES (17) DEBRA BELL	40.00				Х	\vdash		168,397.	0.	22,771.
DIR OF CLINICAL QUALITY IMPROV.	40.00	1				x		170,150.	0.	8,958.
DIN OF CHINICAL QUALITY IMPROV.	I			<u> </u>		Λ	<u> </u>	1/0,130.	0.	6,930.

732007 11-28-17

Form **990** (2017)

Form 990 (2017) FAMILY F									23-7:	118	262	P	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)				
(A) Name and title	Name and title Average hours per week			Positive theck in the same personal a direction of the same personal additional addition	tion nore son is	l than o s both	one n an	(D) Reportable compensation from	(E) Reportable compensation from related	on d	am	(F) timate nount other	of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fro orga and	pensa om the anizat d relate inizatie	e ion ed
(18) HETAL PATEL PHYSICIAN	40.00					х		220,664.		0.	,	9,9	83.
(19) LISA SMITH	40.00												
PHYSICIAN (20) LUIS GARCIA	40.00			Н		X		160,473.		0.	-	7,7	<u> 72.</u>
PHYSICIAN (01) NEGOTI TOTAL				Ш		Х		176,316.		0.	21	1,7	85.
(21) NICOLE TOTH PEDIATRICIAN	40.00	1				x		160,375.		0.		1,6	11.
				Н									
				Н									
		-											
1h Sub total								1,756,442.		0.	12	3,2	19.
1b Sub-total c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but n							<u> </u>	1,756,442.	000 of war antable	0.	123	3,2	<u> 19.</u>
Total number of individuals (including but n compensation from the organization	ot iimited to tri	ose	iiste	eu ab	ove) WH	o re	eceived more than \$100,	000 of reportable	; 			24
O Did the amountable list and former of the	alia.a.b.a a	4_								I		Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s.	,			•	•	•		•			3		Х
4 For any individual listed on line 1a, is the su	ım of reportabl	e cc	mpe	ensat	tion	and	oth	ner compensation from t	he organization			Х	
and related organizations greater than \$150Did any person listed on line 1a receive or a											4	^	
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedule	e J f	or su	ıch p	ers	on .					5		Х
Complete this table for your five highest contractors	mpensated inc	lepe	nde	nt co	ntra	acto	rs th	nat received more than \$	3100,000 of comp	 pensa	tion fre		
the organization. Report compensation for	the calendar ye	ear e	endir	ng wi	th o	or wi	thin T		ear.				
(A) Name and business	address	N	ONI	3				(B) Description of s	ervices	С	(C Comper		n
							4						
2 Total number of independent contractors (ii \$100,000 of compensation from the organization from the organization)	•	ot lir	nite	d to t	hos 0		ted	above) who received mo	ore than				
,	-											200	

Form 990 (2017) FAMILY
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any line	e in this Part VIII			
				·	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
SΩ	1	a Federated campaigns	1a	4,475.				012 011
ant	•	b Membership dues		,				
يَ ۾		c Fundraising events						
ifts		d Related organizations						
nila nila	,	e Government grants (contribution	·····	6,640,736.				
Sir		f All other contributions, gifts, grant		, ,				
outi her		similar amounts not included abov		1,226,534.				
ÖĔ		g Noncash contributions included in lines 1		759,583.				
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines 1a-1f		>	7,871,745.			
				Business Code				
g,	2	a MEDICAID		621110	7,893,660.	7,893,660.		
Program Service Revenue		b PRIVATE INSURANCE		621110	1,804,446.	1,804,446.		
		c MEDICARE		621110	1,019,165.	1,019,165.		
am		d SELF PAY		621110	653,176.	653,176.		
ogr B		e						
P.	1	f All other program service rever	nue					
		g Total. Add lines 2a-2f			11,370,447.			
	3	Investment income (including of	dividends, inter	est, and				
		other similar amounts)		>	8,319.			8,319.
	4	Income from investment of tax	exempt bond p	oroceeds >				
	5	Royalties						
			(i) Real	(ii) Personal				
	6	a Gross rents	106,009	_				
		b Less: rental expenses	62,242.					
		c Rental income or (loss)	43,767					
		d Net rental income or (loss)		>	43,767.			43,767.
	7	a Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	77,038	•				
		b Less: cost or other basis						
		and sales expenses	64,292					
		c Gain or (loss)			10 = 16			10 = 16
		d Net gain or (loss)			12,746.			12,746.
e	8	a Gross income from fundraising	•					
len!		including \$						
Re		contributions reported on line	•					
Other Reven		Part IV, line 18]				
₹		b Less: direct expenses		` <u> </u>				
		Net income or (loss) from fundGross income from gaming act						
	9	Part IV, line 19		.				
		b Less: direct expenses		<u>'</u>				
		c Net income or (loss) from gami						
		a Gross sales of inventory, less r						
		and allowances		,				
		b Less: cost of goods sold						
		c Net income or (loss) from sales						
ļ		Miscellaneous Revenue		Business Code				
ļ	11 :	a 340B PHARMACY		621110	1,967,063.	1,967,063.		
		b INCENTIVE PAYMENTS		900099	867,436.	867,436.		
		c MEANINGFUL USE		621110	42,500.	42,500.		
		d All other revenue		621110	41,152.	41,152.		
		e Total. Add lines 11a-11d			2,918,151.			
	12	Total revenue. See instructions.			22,225,175.	14,288,598.	0.	64,832.

Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respor			nplete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, 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	208,690.	208,690.		
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	934,108.	809,296.	124,812.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	10 010 051	2 224 242	4 445 544	
7	Other salaries and wages	10,842,051.	9,394,340.	1,447,711.	
8	Pension plan accruals and contributions (include	25 224	20 522	4 554	
	section 401(k) and 403(b) employer contributions)	35,284.	30,533.	4,751.	
9	Other employee benefits	1,395,132.	1,207,274.	187,858.	
10	Payroll taxes	835,155.	722,700.	112,455.	
11	Fees for services (non-employees):				
а	Management	17 074		17 074	
b	Legal	17,274.		17,274.	
	Accounting	65,275.		65,275.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	2 222		2 222	
f	Investment management fees	2,232.		2,232.	
g	Other. (If line 11g amount exceeds 10% of line 25,	E22 724	264 500	168,136.	
	column (A) amount, list line 11g expenses on Sch 0.)	532,724. 95,636.	364,588. 34,716.	60,920.	
12	Advertising and promotion	431,371.		69,007.	
13	Office expenses	780,939.	780,939.	09,007.	
14	Information technology	100,939.	100,939.		
15 16	Royalties	298,584.	298,584.		
16 17	Occupancy	116,204.	85,288.	30,916.	
	Travel Payments of travel or entertainment expenses	110,201.	03,200.	30,310.	
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	98,338.	77,230.	21,108.	
19 20		77,182.	77,182.	,	
20 21	Payments to affiliates	,1024	, 1020		
22	Depreciation, depletion, and amortization	338,490.	326,255.	12,235.	
23	Insurance	32,011.	1,200.	30,811.	
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	MEDICAL SUPPLIES	1,787,274.	1,787,274.		
b	PHARMACY, LAPORATORY AN	1,783,221.	1,783,221.		
c	EQUIPMENT RENTAL AND MA	789,705.		302,614.	
d	PROVISION FOR BAD DEBTS	253,369.			
	All other expenses	328,589.	111,032.	209,984.	7,573
25	Total functional expenses. Add lines 1 through 24e	22,078,838.	19,203,166.	2,868,099.	7,573
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)				

Form **990** (2017)

Form 990 (2017)

Part X | Balance Sheet

<u>Par</u>	t X	Balance Sheet					
		Check if Schedule O contains a response or note	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,300.	1	1,270.
	2	Savings and temporary cash investments			1,453,282.	2	946,318.
	3	Pledges and grants receivable, net			659,064.	3	826,215
	4	Accounts receivable, net			1,349,057.	4	1,561,874
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa		, , , , , , , , , , , , , , , , , , ,			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualif					
	_	section 4958(f)(1)), persons described in section		,			
		employers and sponsoring organizations of secti					
,		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use			2,907.	8	4.993
	9	B			147,879.	9	4,993 139,010
		Land, buildings, and equipment: cost or other	I				
		basis. Complete Part VI of Schedule D	10a	7.873.495.			
	h	Less: accumulated depreciation	10h	7,873,495.	4,093,288.	10c	3.840.359
	11	Investments - publicly traded securities	233,079.	11	3,840,359 255,315		
	12	Investments - other securities. See Part IV, line 1			200,0750	12	200,020
	13	Investments - program-related. See Part IV, line 1				13	
	14				14		
	15	Intangible assets		24,548.	15	28,888	
	16	Total assets. Add lines 1 through 15 (must equa			7,964,404.	16	7,604,242
	17	Accounts payable and accrued expenses			1,141,135.	17	1,178,423
	18	Grants payable		18			
	19	Deferred revenue			462,370.	19	52,821
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete F			21		
,	22	Loans and other payables to current and former					
tie		key employees, highest compensated employees					
Liabilities						22	
Lia	23	Secured mortgages and notes payable to unrela			2,920,508.	23	2,762,887.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines					
		Schedule D	-			25	
	26	Total liabilities. Add lines 17 through 25			4,524,013.	26	3,994,131.
		Organizations that follow SFAS 117 (ASC 958)					
s		complete lines 27 through 29, and lines 33 and					
)ce	27	Unrestricted net assets			3,440,391.	27	3,610,111.
ala I	28	Temporarily restricted net assets				28	
B	29					29	
ğ		Organizations that do not follow SFAS 117 (AS					
Net Assets or Fund Balances		and complete lines 30 through 34.		. —			
ts (30	Capital stock or trust principal, or current funds				30	
SSe	31	Paid-in or capital surplus, or land, building, or eq				31	
ایٍ۲	32	Retained earnings, endowment, accumulated inc				32	
ž	33	Total net assets or fund balances			3,440,391.	33	3,610,111.
	34	Total liabilities and net assets/fund balances			7,964,404.	34	7,604,242.

Form **990** (2017)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Act and OMB Circular A-133?

Form **990** (2017)

Х

За

SCHEDULE A

Internal Revenue Service

Total

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Employer identification number Name of the organization FAMILY FIRST HEALTH CORPORATION 23-7118262 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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.)

Sec	tion A. Public Support											
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received. (Do not											
	include any "unusual grants.")	3951318.	4553725.	5412269.	6031946.	7871745.	27821003.					
2	Tax revenues levied for the organ-											
	ization'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	3951318.	4553725.	5412269.	6031946.	7871745.	27821003.					
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,											
	column (f)											
6	Public support. Subtract line 5 from line 4.						27821003.					
Sec	tion B. Total Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total					
7	Amounts from line 4	3951318.	4553725.	5412269.	6031946.	7871745.	27821003.					
8	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources	112,913.	132,183.	128,686.	117,776.	114,328.	605,886.					
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.)	442,548.	785,343.	1014277.	2159071.	2918151.	7319390.					
11	Total support. Add lines 7 through 10						35746279.					
12	Gross receipts from related activities,	etc. (see instruction	ns)			12 47	,658,266.					
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)						
	organization, check this box and stop	here										
Sec	tion C. Computation of Publi	c Support Per	centage									
14	Public support percentage for 2017 (li	ne 6, column (f) di	vided by line 11, co	olumn (f))		14	77.83 %					
	Public support percentage from 2016					15	81.50 %					
16a	33 1/3% support test - 2017. If the o	-										
	stop here. The organization qualifies	as a publicly suppo	orted organization				> X					
b	33 1/3% support test - 2016. If the o											
	and stop here. The organization quali	fies as a publicly s	upported organiza	ation			▶□					
17a	10% -facts-and-circumstances test	- 2017. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,					
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization											
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization											
b	10% -facts-and-circumstances test	- 2016. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or					
	more, and if the organization meets the	e "facts-and-circur	mstances" test, ch	eck this box and	stop here. Explain	in Part VI how the	e					
	organization meets the "facts-and-circ		•	•			▶∐					
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	s					

Schedule A (Form 990 or 990-EZ) 2017

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	r the organization's	s first, second, third	d, fourth, or fifth ta	ax year as a section	n 501(c)(3) organiz	ation,
_	check this box and stop here						>
	ction C. Computation of Publi					т т	
	Public support percentage for 2017 (I			olumn (f))		15	<u>%</u>
	Public support percentage from 2016					16	<u>%</u>
	ction D. Computation of Inves						
17	Investment income percentage for 20			e 13, column (f))		17	<u>%</u>
18						18	%
19a	a 33 1/3% support tests - 2017. If the						7 is not
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2016. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	▶Ш

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 (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.)

	Yes	No
1		
2		
_		
3a		
3b		
3с		
4a		
4b		
4c		
_		
5a		
5b		
5с		
6		
7		
8		
3		
9a		
9b		
0-		
9с		
10a		
10b		

11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of an supported organization? b A family member of a person described in (a) above? If 'Yes' to a.b. or c. provide detail in Part VI. 11b C	Pal	Supporting Organizations (Continued)			
a 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? b A family member of a person described in (a) above? c A 59% controlled with or a special person described in (a) a for (a) bove? if Yes' to a, b, or c, provide detail in Pert VI. 11b				Yes	No
below, the governing body of a supported organization? 1 A family member of a person described in (a) above? 2. AS\$6 controlled entity of a person described in (a) or (b) above? 3. AS\$6 controlled entity of a person described in (a) or (b) above? 4. Yes 1 to a. b. or c. provide detail in Pert VI. 11b 11c Section B. Type I Supporting Organizations 1 Did the directors, frustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations directors or trustees at all times during the tax year? If 'No,' observible. If the organization directors or trustees at all times during the tax year? If 'No,' observible. 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 organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization and what conditions or restrictors, if any, applied to supple powers during the tax year 2. Did the organization operate for the benefit of any supported organization other than the supported organization and what conditions or estrictors, if any, applied to supple powers during the tax year in Part VI how providing such benefit carried out the purposes of the supported organization of the than the supported organization and the supported organizations and the supported organizations of the supported organization of the supported organizations of the supported organization of the supported organization of the supported organization of the supported organization or trustees of each of the organization and the supported organization of the supported organization or trustees of each of the organization organization and the supported organization organization organization organiz	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family member of a person described in (a) above? If "Yes" to a, b, or c, provide detail in Part VI. Section B. Type I Supporting Organizations 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 organizations directors or trustees at all times during the tax year? If "Yes" describe in Part VI how the supported organization effectively operated, supervised, or controlled the organization's activities. If the organization and more than one supported organization, describe how the powers to appoint and/or embers delectors or trustees, are allocated omong the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization? If "Yes," explain in Part VI how the powers to appoint and/or embers upsopreed organization? If "Yes," explain in Part VI how the powers to appoint acroid remove supported organization? If "Yes," explain in Part VI how providing such benefit carred out the supported organization? If "Yes," explain in Part VI how providing such benefit carred out the supposes of the supported organization? If "Yes," explain in Part VI how control or management of the supporting Organizations 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 organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organization, by the last day of the fifth month of the organization provide to each of its supported organization, to the extent not previously provided? 2 Were any of the organization or the source of the supported organiz	а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
section B. Type I Supporting Organizations 1 Did the directors, frustees, 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 frustees at all times during the tax year? If "No," describe in Part VI now the supported organization's directors or frustees at all times during the tax year? If "No," describe in Part VI now the supported organization's directors or frustees at all times during the tax year? If "No," describe in Part VI now the supported organization or describe or or frustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or frustees were allocated among the supported organization and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization that the supported organization (s) that operated, supervised, or controlled the supporting organization and controlled the supporting organization and controlled the supporting organization and controlled the supported organization (s) that operated, supervised, or controlled the supported organization (s) that operated, supervised, or controlled or supported organization (s) If No, 'describe in Part VI how control or management of the supported organizations. 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 directors or trustees or trustees and so an analysis of the directors or trustees of each of the organization's supported organization's power and 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 encountly field as of the dail of notification, and (iii) copies of the organization's efficiency of via power power of the organization's efficiency of a supported organization's,		below, the governing body of a supported organization?	11a		
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 Pat VI how the supported organization's directors or trustees at all times during the tax year? If *No,* describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the 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. 2 Did the organization operated for the benefit of any supported organization other than the supported organization; and the supported organization of the supported organization; if *Yes,* explain in Part VI pro providing outs benefit carried out the purposes of the supported organization; if *Yes,* explain in Part VI providing organizations and explain and in the supported organization. 2 Section C. Type II Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, and (ii) copies of the organization provide to each of its supported organizations, and (iii) copies of the organization markinate a close and continuous working relationship with the supported organizations). 3 By reason of the relationship described in IQ), did the organization if \(\frac{1}{1} \) the organization is provided to the Activate Teachty Supported organizations is supported organizations in supported organizations is supported organizations in the part VI how the organization is the parent of each of its	b	A family member of a person described in (a) above?	11b		
Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least an najority of the organization's directors or trustees at all times during the tax yea? If "No," describe in Part VI how the supported organization's directors or trustees at all times during the tax yea? If "No," describe in Part VI how the supported organization or extended organization, and the organization and what conditions or restrictions if any, applied to such powers during the tax year. 2. Did the organization operate for the benefit of any supported organization of the thin the supported organization of year to the providing such benefit carried out the purposes of the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization; but no perated. Section C. Type II Supporting Organizations 1. Were a majority of the organizations directors or trustees during the tax year also a majority of the directors or trustees of each of the organizations or supported organizations? If "Yes," describe in Part VI how control or management of the supporting Organizations and the same persons that controlled or managed. 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 copy of the Form 900 that was most recently filed as of the date of netification, and (ii) copies of the organization's powering documents in effect on the date of netification, to the extent not previously provided? 2. Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's powering documents in effect on the date of netification, to the organization's provided? 2. Were any of the organization is with supported organization's income or assests at all times during the tax year? If "Yes," describe in Part VI how the organization's powering documents in effect on the date of ne			11c		i
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 and 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. 2 Did the organization operated for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization of the than the supported organization of the than the supported organization or controlled the supporting organization. 3 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). 3 Were a majority of the organization's supported organization(s). 4 Were any orely of the Form 990 that was most vectors of the supported organization in the supporting organization is tax year, (i) a vortice describing the type and amount of support provided during the prior tax year, (ii) a vortice of the organization is tax year, (ii) a color of the organization is the vector of the organization is described in the supported organization is governing documents in effect on the date of notification, to the extent not previously provided? 1 Did the organization is diversed on the date of notification, to the extent not previously provided organizations is supported organizations is supported organizations is supported organiza	Sec	tion B. Type I Supporting Organizations			
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 and more than one supported organization, describe how the powers to appoint another remove directors or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization operate for the benefit of any supported organization of the trust than the supported organization operate for the benefit of any supported organization of the than the supported organization of the trustees of acts of the organization's directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations. 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 supported organization or unangement of the supporting organization in the same persons that controlled or managed the supported organization's activities of the 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? 2 Were any of the organization's officers, directors, or trustees either (ii) appointed or elected by the supported organization's provided organization's income or assets at all times during the sax year? If "yes," describe in Part VI five role the organizat				Yes	No
tax year? If *No,* describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization 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. 2 Did the organization operate for the benefit of any supported 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 organizations. 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 Organizations was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization is 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 (ii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization of the certification, and the province organization is part Vi now the organization and part of the province organizat	1	Did the directors, trustees, or membership of one or more supported organizations have the power to			1
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. 2 bid the organization operate for the benefit of any supported organization other than the supported organization (s) that operated, supervised, or controlled the supporting organization (f) 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. Section C. Type II Supporting Organizations 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 was vested in the same persons that controlled or managed to measurement of the supporting organization was vested in the same persons that controlled or managed to measurement of the supporting organization was vested in the same persons that controlled or managed to measurement of the supported organizations by the last day of the fifth month of the organization's tax year, (i) a viriten 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 field 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? 2 Were any of the organization so officers, directors, or trustees either (ii) appointed or elected by the supported organization's provided organization's provided organization's provided organization's provided organization's involvement as significant voice in the organization and the supported organization's live in the relationship described in (ii), did the organization's supported organization's involvement as supp		regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
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. 2 bid the organization operate for the benefit of any supported organization other than the supported organization (s) that operated, supervised, or controlled the supporting organization (f) 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. Section C. Type II Supporting Organizations 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 was vested in the same persons that controlled or managed to measurement of the supporting organization was vested in the same persons that controlled or managed to measurement of the supporting organization was vested in the same persons that controlled or managed to measurement of the supported organizations by the last day of the fifth month of the organization's tax year, (i) a viriten 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 field 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? 2 Were any of the organization so officers, directors, or trustees either (ii) appointed or elected by the supported organization's provided organization's provided organization's provided organization's provided organization's involvement as significant voice in the organization and the supported organization's live in the relationship described in (ii), did the organization's supported organization's involvement as supp		tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
2 Did the organization and what conditions or restrictions, if any, applied to such powers during the tax year 2 Did the organization operate for the benefit of any supported organization other than the supported organization of the two providing such benefit carried out the purposes of the supported organizations of the supported organizations or trustees of cannot 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 organizations or trustees of each of the organization's supported organizations, and the supported organization's supported organizations or trustees of each of the organization's supported organizations or trustees of each of the organization's supported organizations or trustees of each of the organization's supported organizations organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (ii) copies of the organization's orficers, directors, or trustees either (i) appointed or elicited by the supported organization's poverning documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elicited by the supported organization's provided or					
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supenvised, 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, supenvised, or controlled the supporting organizations. Section C. Type II Supporting Organizations 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 was vested in the same persons that controlled or managed the supported organization supported organizations. Section D. All Type III Supporting Organizations 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, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (ii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization organization(s) or (ii) serving on the governing body of a supported organizations have a significant voice in the organization is substantially all the directors, or trustees either (ii) appointed organizations have a significant voice in the organization is were the organization is an 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. Section E. Type III Functionally Integrated Supporting Organizations. Comple		describe how the powers to appoint and/or remove directors or trustees were allocated among 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 organizations. 2 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 managem of the supporting organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization supported organizations. Section D. All Type III Supporting Organizations 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 copy of the Form 990 that was most recently filed as of the date of notification, and (ii) copies of the organization's poverning documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization maintenance a close and continuous working relationship with the supported organizations in Part VI how the organization maintenance a close and continuous working relationship with the supported organizations is income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations between the organizations is lated to a satisfy the Integral Part Test during the year (see instructions). 3 Practice of programization is the parent of each of its supported organizations. Complete line 3 below. 5 Did the organization is upported organization's activities during the tax year directly further the exempt purposes, ho		organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supported, or controlled the supporting Organizations. 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 was vested in the same persons that controlled or managed the supported organization(s). 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 flied 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? 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,' replain in Part VI how the organization ministend a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organization's supported organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organization's supported organization's and substantially all of the organization used to satisfy the Integral Part Test during the year (see instructions). 3 Cection 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). 2 Activities Test. Answer (a)	2	Did the organization operate for the benefit of any supported organization other than the supported			1
Section C. Type II Supporting Organizations 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 progranization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 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? 2 Were an anjority of the organization is officers, cirectors, or trustees either (ii) 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) or (ii) serving on the governing body of a supported organization in Part VI how the organization maintained a close and continuous working relationship with the supported organization (s) or (ii) serving on the governing body of a supported organizationship and the relationship described in (2), did the organization's supported organizations have a significant voice in the organization sinvestment policies and in directing the use of the organization's income or assests at all times during the tax year? If *Yes," describe in Part VI the role the organization's investment policies and in directing the use of the organization's investment organizations and explain how the organization.		organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			1
Section C. Type II Supporting Organizations 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 progranization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 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? 2 Were an anjority of the organization is officers, cirectors, or trustees either (ii) 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) or (ii) serving on the governing body of a supported organization in Part VI how the organization maintained a close and continuous working relationship with the supported organization (s) or (ii) serving on the governing body of a supported organizationship and the relationship described in (2), did the organization's supported organizations have a significant voice in the organization sinvestment policies and in directing the use of the organization's income or assests at all times during the tax year? If *Yes," describe in Part VI the role the organization's investment policies and in directing the use of the organization's investment organizations and explain how the organization.		Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			1
Section 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)? "It "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). Section 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? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or rejected 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 is maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in (2), did the organization's purported organization's a significant voice in the organization's investment policies and in directing the use of the organization's supported organization's properted organization's provide d			2		
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 managed the supported organization was vested in the same persons that controlled or managed the supported organization(s). 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, (i) a copy of the Form 990 that was most recently flied 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? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization organization in surported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organizationship described in (2), did the organization's supported organizationshave a significant vice in the organization is the parent of each of its supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's and in the complex of the supported organization's and in directing the use of the organization's and in the complex of the organization satisfied the Activities Test. Complete line 2 below. 1 The organization satisfied the Activities Test. Complete line 2 below. 2 Act	Sec				
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). Section D. All Type III Supporting Organizations 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? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's 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 have a significant voice in the organization in (2), did the organization's supported 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. Section 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) and The organization satisfied the Activities Test. Complete line 2 below. 5 Line organization satisfied the Activities Test. Complete line 2 below. 6 Line organization satisfied the Activities Test. Complete line 2 below. 7 Line organization satisfied the Activities Test. Complete line 2 below. 8 Line organization satisfied the Activities Test. Complete line 2 below. 9 Line organization satisfied the Activities Test. Complete line 2 below. 1 Line organization satisfied to the organization was responsive?				Yes	No
or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 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 organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's 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's picescribed in (2), did the organization's purported organization's a significant voice in the organization's investment policies and in directing the use of the organization's supported organization's played in this regard. Section 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). 3 Section E. Type III Functionally Integrated Supported organizations. Complete line 3 below. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) the supported organization's activities during the tax year directly further the exempt purposes of the supported organization's below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization was responsive? If "Yes," explain in Part VI the reasons for the organization was position that its supported organizations, and how the organization have the power to regularly appoint or elect a majority of the office	1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 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 organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's 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's picescribed in (2), did the organization's purported organization's a significant voice in the organization's investment policies and in directing the use of the organization's supported organization's played in this regard. Section 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). 3 Section E. Type III Functionally Integrated Supported organizations. Complete line 3 below. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) the supported organization's activities during the tax year directly further the exempt purposes of the supported organization's below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization was responsive? If "Yes," explain in Part VI the reasons for the organization was position that its supported organizations, and how the organization have the power to regularly appoint or elect a majority of the office		or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control			
Section D. All Type III Supporting Organizations 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? 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). 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. Section 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). a The organization is the parent of each of its supported organizations. Complete line 3 below. b The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly furthered their exempt purposes of the 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 in Part VI the reasons for th		, ,			
Section 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? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's of (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 By reason of the relationship described in (2), did the organization's supported organization's 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. Section 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). 3 The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization susported a governmental entity. Describe in *Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. 3 Did substantially all of the organization was responsive? If *Yes,* then in *Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was respon			1		
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? 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 and colors and continuous working relationship with the supported organization(s). 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. Section 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). a The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization is the parent of each of its supported organizations, and how the organization determined that these activities of the organization's activities during the tax year directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities described in (a) constitute activiti	Sec	tion D. All Type III Supporting Organizations			
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? 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 aclose and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported 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. Section 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). a The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization and explain how these activities described in (a) constitute during the substantially all of the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities described in (a) constitute activities that, but for the organization in Part VI the reasons for the organization's position that its supported organization's involvement.				Yes	No
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? 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 aclose and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported 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. Section 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). a The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization and explain how these activities described in (a) constitute during the substantially all of the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities described in (a) constitute activities that, but for the organization in Part VI the reasons for the organization's position that its supported organization's involvement.	1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
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? 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). 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 Section 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). a The organization satisfied the Activities Test. Complete line 2 below. b The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the 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 or or more of the organization's position that its supported organizations, and how the organization in Part VI the reasons for the organization's position that its supported organizations, and how the organization or or more of the organization's position that its supported organization's position that its supported organization's p					
organization's governing documents in effect on the date of notification, to the extent not previously provided? 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). 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. Section 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). a The organization satisfied the Activities Test. Complete line 2 below. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization's and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported 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 involvement, one or more of the organization's position that its supported organization's would have engaged in these activities but for the organization's position that its supported organization's position that its supported organization's position that its supported organi					
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). 3 By reason of the relationship described in (2), did the organization's supported organization's 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. Section 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). a 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. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the 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 dustantially all of its activities. b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's position that its 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 position that its supported organization's position that its supported organization			1		
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). 3 By reason of the relationship described in (2), did the organization's supported organization's involve in the organization's involve in the organization's involvement, one or assets at all times during the tax year? If "Yes," describe in Part VI the relet the organization's supported organizations played in this regard. Section 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). a 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. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization's organization was responsive to those supported organization determined that these activities constituted substantially all of its activities. b Did the activities described in (a) constitute activities that, but for the organization determined that these activities during the supported 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 involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a 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. b Dild the organization exercise a substantial degree of direction ov	2				
the organization maintained a close and continuous working relationship with the supported organization(s). By creason of the relationship described in (2), did the organization's supported organizations have a significant voice in 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. Section 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). a 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. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization, and how the organization determined that these activities described in (a) constituted substantially all of its activities. b Did the activities described in (a) constitute activities that, but for the organization have the organization's involvement, one or more of the organization's position that its supported organization(s) would have engaged in these activities but for the organizations. Answer (a) and (b) below. 3 Parent of Supported Organizations. Answer (a) and (b) below. a 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. b Did the organization e					
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. Section E. Type III Functionally Integrated Supporting Organizations 1		, ,	2		
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. Section 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). a 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. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization 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 obstantially all of its activities. b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's position that its supported organization(s) would have engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a 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. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3				
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. Section 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). a 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. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a 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 described in (a) constitute activities that, but for the organization determined that these activities described in (a) constitute activities that, but for the organization is involvement, one or more of the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a 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. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
Section 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). a					
Section E. Type III Functionally Integrated Supporting Organizations 1			3		
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a	Sec	capported organizations played in this regard.			
a 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. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization's how the organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive? If "Yes," explain in Part VI the organization's involvement activities that, but for the organization's involvement, or the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a 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. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). Activities Test. Answer (a) and (b) below. 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. 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 organizations. Answer (a) and (b) below. Parent of Supported Organizations. Answer (a) and (b) below. 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. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). Activities Test. Answer (a) and (b) below. 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. 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. Parent of Supported Organizations. Answer (a) and (b) below. 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. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	_				
Activities Test. Answer (a) and (b) below. A Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations) 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. 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. A Parent of Supported Organizations. Answer (a) and (b) below. 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. B Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		· ·	ructions		
a 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. 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. a 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. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			<i>action 10</i>		No
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. 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 organizations. Answer (a) and (b) below. Parent of Supported Organizations. Answer (a) and (b) below. 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. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
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. a 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. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 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. a 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. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		·			1
that these activities constituted substantially all of its activities. 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. a 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. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		•			
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. a 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. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			2a		
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. 3 Parent of Supported Organizations. Answer (a) and (b) below. a 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. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	b	,			
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. a 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. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
activities but for the organization's involvement. 2b 3 Parent of Supported Organizations. Answer (a) and (b) below. a 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		• •			1
 3 Parent of Supported Organizations. Answer (a) and (b) below. a 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. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each 			2b		
 a 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? <i>Provide details in Part VI.</i> b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each 	3	•			
trustees of each of the supported organizations? Provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	-		За		
	h				
	-		3b		

Part V	Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must	complete Sec	tions A through E.	
Section	A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Ne	t short-term capital gain	1		
2 Re	coveries of prior-year distributions	2		
3 Oth	ner gross income (see instructions)	3		
4 Ad	d lines 1 through 3	4		
5 De	preciation and depletion	5		
6 Po	rtion of operating expenses paid or incurred for production or			
col	lection of gross income or for management, conservation, or			
ma	intenance of property held for production of income (see instructions)	6		
7 Oth	ner expenses (see instructions)	7		
8 Ad	justed Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section I	B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Ag	gregate fair market value of all non-exempt-use assets (see			
ins	tructions for short tax year or assets held for part of year):			
a Av	erage monthly value of securities	1a		
b Ave	erage monthly cash balances	1b		
c Fai	r market value of other non-exempt-use assets	1c		
	tal (add lines 1a, 1b, and 1c)	1d		
e Dis	scount claimed for blockage or other			
fac	tors (explain in detail in Part VI):			
2 Ac	quisition indebtedness applicable to non-exempt-use assets	2		
3 Su	btract line 2 from line 1d	3		
4 Ca	sh deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	e instructions)	4		
5 Ne	t value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Itiply line 5 by .035	6		
	coveries of prior-year distributions	7		
8 Mi	nimum Asset Amount (add line 7 to line 6)	8		
Section	C - Distributable Amount			Current Year
1 Ad	iusted net income for prior year (from Section A, line 8, Column A)	1		
	ter 85% of line 1	2		
3 Mir	nimum asset amount for prior year (from Section B, line 8, Column A)	3		
	ter greater of line 2 or line 3	4		
5 Inc	ome tax imposed in prior year	5		
	stributable Amount. Subtract line 5 from line 4, unless subject to			
	ergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2017

instructions).

Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	inizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
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 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
с	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
<u>i</u>	Carryover from 2012 not applied (see instructions)			
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			
b	Excess from 2014			
c	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

Part VI

2013 AMOUNT: \$ 442,548.

2014 AMOUNT: \$ 207,369.

2015 AMOUNT: \$ 158,982.

2016 AMOUNT: \$ 37,266.

2017 AMOUNT: \$ 18,955.

304B PHARMACY

2014 AMOUNT: \$ 339,465.

2015 AMOUNT: \$ 674,151.

2016 AMOUNT: \$ 1,348,959.

2017 AMOUNT: \$ 1,967,063.

MEANINGFUL USE

2014 AMOUNT: \$ 208,250.

2015 AMOUNT: \$ 170,000.

2016 AMOUNT: \$ 195,500.

2017 AMOUNT: \$ 42,500.

CONTRACTS

2014 AMOUNT: \$ 30,259.

2015 AMOUNT: \$ 11,144.

2016 AMOUNT: \$ 13,949.

2017 AMOUNT: \$ 22,197.

INCENTIVE BONUSES

Part V	Part IV, Se	ction A, IV, Sect	lines 1, 2, 3b, 3c, 4 tion D, lines 2 and	Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; , 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, d 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, (See instru	lines 5, ctions.)	6, and 8; and Part	t V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
2016	AMOUNT:	\$	563,397.	,
2017	AMOUNT:	\$	867,436.	•

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

FAMILY FIRST HEALTH CORPORATION

Employer identification number 23-7118262

Pa			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	(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 w		ed funds
_	are the organization's property, subject to the organization's e	_	
6	Did the organization inform all grantees, donors, and donor ac		
_	for charitable purposes and not for the benefit of the donor or		
	• •		
Pa	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organization		, , , , , , , , , , , , , , , , , , ,
	Preservation of land for public use (e.g., recreation or ed		orically important land area
	Protection of natural habitat	Preservation of a cert	•
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.		Held at the End of the Tax Year
а			
b			
c	Number of conservation easements on a certified historic stru		
	Number of conservation easements included in (c) acquired at		
	listed in the National Register	,	I
3	Number of conservation easements modified, transferred, rele		
_	year ▶	acca, changaichea, ch teirimiatea 2, the	organization dailing the tax
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the peri	•	
	violations, and enforcement of the conservation easements it	0, . ,	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
	>	, ,	5 ,
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conservat	ion easements during the year
	▶\$		Ç ,
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservatio		
	include, if applicable, the text of the footnote to the organizati	on's financial statements that describes t	he organization's accounting for
	conservation easements.		
Pai	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi	bition, education, or research in furtherar	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	C 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of pub	olic 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 trea		
	the following amounts required to be reported under SFAS 11		
а	Revenue included on Form 990, Part VIII, line 1		> \$
b			L .
LHA	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2017

732051 10-09-17

		IRST HEALTH C				18262	
Par	rt III Organizations Maintaining Co					,	,
3	Using the organization's acquisition, accession	n, and other records, check	any of the following that	t are a signif	icant use of its c	ollection ite	ems
	(check all that apply):						
а	Public exhibition	d 🖳	Loan or exchange progra				
b	Scholarly research	e	Other				
С	Preservation for future generations						
4	Provide a description of the organization's coll	ections and explain how th	ney further the organization	on's exempt	purpose in Part	XIII.	
5	During the year, did the organization solicit or					_	
	to be sold to raise funds rather than to be main					Yes	No
Pai	t IV Escrow and Custodial Arrang		e organization answered	"Yes" on For	rm 990, Part IV,	line 9, or	
	reported an amount on Form 990, Part	X, line 21.					
1a	Is the organization an agent, trustee, custodian	n or other intermediary for	contributions or other as	sets not incl	uded	_	
	on Form 990, Part X?				L	Yes	No
b	If "Yes," explain the arrangement in Part XIII ar	nd complete the following	able:				
						Amount	
С	Beginning balance				1c		
d	Additions during the year				1d		
	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on For					Yes	No
b	If "Yes," explain the arrangement in Part XIII. C	heck here if the explanation	n has been provided on	Part XIII			
Pai	rt V Endowment Funds. Complete if	the organization answered	"Yes" on Form 990, Part	t IV, line 10.			
		(a) Current year (b) F	Prior year (c) Two yea	ers back (d)	Three years back	(e) Four ye	ears back
1a	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the current	nt year end balance (line 1	g, column (a)) held as:				
а	Board designated or quasi-endowment	%					
b	Permanent endowment	%					
С	Temporarily restricted endowment	 %					
	The percentages on lines 2a, 2b, and 2c shoul	d equal 100%.					
За	Are there endowment funds not in the possess	sion of the organization tha	t are held and administe	red for the o	rganization		
	by:	Ü			· ·	Y	es No
	(i) unrelated organizations					3a(i)	
	700					3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization					3b	
4	Describe in Part XIII the intended uses of the o					~_	
Par	rt VI Land, Buildings, and Equipme						
	Complete if the organization answered		/, line 11a. See Form 990), Part X, line	10.		
	Description of property	(a) Cost or other	(b) Cost or other	(c) Accu		(d) Book v	/alue
		basis (investment)	basis (other)	depred		(2) 2001()	
			150 000	<u> </u>		1 - 0	000

		,	, , a. , , , , , , , , , , , , , , , , ,	
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		150,000.		150,000.
b Buildings		5,916,594.	2,757,037.	3,159,557.
c Leasehold improvements				
d Equipment		1,612,595.	1,258,967.	353,628.
e Other		194,306.	17,132.	177,174.
Total. Add lines 1a through 1e. (Column (d) must equa	I Form 990 Part X colum	nn (B) line 10c)	•	3,840,359.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 FAMILY FIRST	г неат.тн сс	R P O R A T T O N	23-	-7118262	Dogo
Part VII Investments - Other Securities.	111111111111111111111111111111111111111	111 011111 1011		7110202	raye
Complete if the organization answered "Yes" of	on Form 990 Part IV	line 11b See Form 990	Part X line 12		
(a) Description of security or category (including name of security)	(b) Book value		aluation: Cost or end-	of-vear market v	alue
70 = 111111		(1)		<u> </u>	
(1) Financial derivatives (2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes" of					
(a) Description of investment	(b) Book value	(c) Method of v	aluation: Cost or end-	of-year market v	alue
(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" of	on Form 990, Part IV,	line 11d. See Form 990,	Part X, line 15.		
(a) [Description			(b) Book va	alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	15)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	<u> 15.)</u>				
	on Form QQQ Dort IV	line 11e or 11f Coe Farm	000 Part V line 05		
Complete if the organization answered "Yes" of a Description of liability	THORITISSU, Part IV,	(b) Book value	1 990, Fait A, IIIIe 25.		
11 (7)		(b) Dook value			
(1) Federal income taxes					
(2)					

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

Pa	t XI Reconciliation of Revenue per Audited Financial State	ements With I	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	e 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	22,092,491.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	23,383.		
b	Donated services and use of facilities	2b	35,060.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-253,369.		
е	Add lines 2a through 2d			2e	-194,926.
3	Subtract line 2e from line 1			3	22,287,417.
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			
b	Other (Describe in Part XIII.)	4b	-62,242.		
С	Add lines 4a and 4b			4c	-62,242.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12. rt XII Reconciliation of Expenses per Audited Financial Sta)		5	22,225,175.
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	itements With	Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	e 12a.			
1	Total expenses and losses per audited financial statements			1	21,922,771.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	35,060.		
b	Prior year adjustments	2b			
С	Other losses				
d		2c			
	Other (Describe in Part XIII.)		62,242.		
е		2d	-	2e	97,302.
е 3	Other (Describe in Part XIII.) Add lines 2a through 2d	2d		2e 3	97,302. 21,825,469.
	Other (Describe in Part XIII.)	2d			97,302. 21,825,469.
3	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2d			97,302. 21,825,469.
3 4	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2d 4a			21,825,469.
3 4 a b	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2d 4a 4b	253,369.		97,302. 21,825,469. 253,369. 22,078,838.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information.

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 X, LINE 2:

2018. THE THE CENTER HAS NO UNRECOGNIZED TAX BENEFITS AT MARCH 31, CENTER'S FEDERAL, STATE AND CITY INFORMATION TAX RETURNS PRIOR TO 2015 ARE CLOSED. THE BOARD OF DIRECTORS CONTINUALLY EVALUATES EXPIRING STATUTES OF LIMITATIONS, AUDITS, PROPOSED SETTLEMENTS, CHANGES IN LAW AND NEW AUTHORITATIVE RULINGS.

IF APPLICABLE, THE CENTER WOULD RECOGNIZE INTEREST AND PENALTIES ASSOCIATED WITH TAX MATTERS AS PART OF OTHER THAN PERSONNEL SERVICES IN THE STATEMENT OF ACTIVITIES AND CHANGE IN NET ASSETS AND INCLUDE ACCRUED INTEREST AND PENALTIES IN ACCRUED EXPENSES IN THE STATEMENT OF FINANCIAL THE CENTER DID NOT RECOGNIZE ANY INTEREST OR PENALTIES POSITION.

Schedule D (Form 990) 2017

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

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

2017
Open to Public

Inspection

Name of the organization FAMILY FI	RST HEALT	H CORPORATI	ON				Employer identification number 23-7118262
Part I General Information on Grants a							
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pr 	stance?					stance, and the selecti	on X Yes No
Part II Grants and Other Assistance to	Domestic Organiz	zations and Domesti	ic Governments.	Complete if the org	anization answered "	Yes" on Form 990, Par	t IV, line 21, for any
recipient that received more than 1 (a) Name and address of organization or government	\$5,000. Part II can (b) EIN	be duplicated if addit (c) IRC section (if applicable)	(d) Amount of cash grant	ed. (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	
WELLSPAN HEALTH 45 MONUMENT RD. SUITE 200							MEDICAL VISITS AND PHARMACEUTICAL / NUTRITIONAL HEALTH /
YORK, PA 17406	17-0199413	501(C)(3)	208,690.	0.			COUNSELING FOR HIV
2 Enter total number of section 501(c)(3) a3 Enter total number of other organization	-						

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2017)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
t IV Supplemental Information. Provide the information	n required in Part I, lin	e 2; Part III, columr	n (b); and any other ad	ditional information.	
RT I, LINE 2:					
H AND WELLSPAN STAFF MEET QUAR	TERLY TO RE	VIEW CLIN	ICAL AND FI	NANCIAL	
SULTS / OUTCOMES RELATING TO T	HE SUBRECIP	IENT AGRE	EMENT. MON	THLY	
OICES REQUESTING A DRAW DOWN	OF GRANT FU	NDS IS SEI	NT BY WELLS:	PAN AND	
/IEWED AND APPROVED BY FFH FIS	CAL STAFF F	OR DISBUR	SEMENT. AN	NUALLY, KEY	
ADERS FROM EACH ORGANIZATION P	ARTICIPATE	IN A FORM	AL AUDIT AN	D MONITORING	
/IEW UTILIZING THE HRSA MONITO	RING TOOL A	S A GUIDE	LINE.		

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

Open to Public

Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

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

FAMILY FIRST HEALTH CORPORATION

Questions Regarding Compensation

 $Employer\ identification\ number \\ 23-7118262$

			Yes	No
1a	Check the appropriate box (es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal us			
	Travel for companions Payments for business use of personal residence	ce		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, ch	ef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	${\sf CEO/Executive\ Director.\ Check\ all\ that\ apply.\ Do\ not\ check\ any\ boxes\ for\ methods\ used\ by\ a\ related\ organization\ to}$			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation commi	ttee		
1	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?			X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
	Any related organization?	l Ch		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
9	in 163 of the of the organization also follow the reputtable presumption procedure described in			

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

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

					(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(I)-(U)	reported as deferred on prior Form 990	
(1) JENNIFER ENGLERTH	(i)	167,593.	7,175.	0.	1,806.	17,686.	194,260.	0.	
PRESIDENT & CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) ASCELINE GO	(i)	221,667.	10,175.	0.	2,277.	9,592.	243,711.	0.	
VP OF MEDICAL SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) JOSEPH MOUNTAIN	(i)	165,168.	15,675.	0.	943.	41.	181,827.	0.	
VP OF DENTAL SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) LAJUAN MOUNTAIN	(i)	154,722.	13,675.	0.	933.	21,879.	191,209.	0.	
VP OF DENTAL SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) DEBRA BELL	(i)	169,975.	175.	0.	1,855.	7,144.	179,149.	0.	
DIR OF CLINICAL QUALITY IMPROV.	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) HETAL PATEL	(i)	220,489.	175.	0.	499.	9,525.	230,688.	0.	
PHYSICIAN	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) LISA SMITH	(i)	160,473.	0.	0.	1,556.	6,257.	168,286.	0.	
PHYSICIAN	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) LUIS GARCIA	(i)	173,141.	3,175.	0.	1,817.	20,009.	198,142.	0.	
PHYSICIAN	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) NICOLE TOTH	(i)	160,200.	175.	0.	1,611.	41.	162,027.	0.	
PEDIATRICIAN	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. PART I, LINE 7:
DADM T ITNE 7.
FART 1, DINE /:
INCLUDED ON SCHEDULE J, PART II COLUMN B(II) ARE AMOUNTS REPRESENTING
BONUSES AND INCENTIVE PAYMENTS. THESE AMOUNTS WERE APPROVED BY THE BOARD
AND INCLUDED IN THE INDIVIDUALS 2017 W2'S.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

FAMILY FIRST HEALTH CORPORATION

Employer identification number 23-7118262

Par	rt I Types of P	roperty								
			(a)	(b)	(c)			(d)		
			Check if	Number of contributions or	Noncash contrib amounts reporte			of determini	•	
			applicable		Form 990, Part VIII		noncash con	tribution an	nounts	,
1	Art - Works of art									
2		res								
3		sts								
4		ns								
5		old goods								
6		es								
7										
8	Intellectual property									
9		raded								
10		eld stock								
11	Securities - Partnersh									
12		eous								
13	Qualified conservatio									
	Historic structures									
14		n contribution - Other								
15	Real estate - Residen	tial								
16	Real estate - Comme	rcial								
17	Real estate - Other									
18										
19										
20	Drugs and medical su	upplies	X	1	759,	583.	FMV			
21	Taxidermy									
22	Historical artifacts									
23										
24	Archeological artifact	s								
25)								
26)								
27)								
28	Other ()								
29		33 received by the organiz	-	•						
	for which the organiz	ation completed Form 828	33, Part IV, D	Oonee Acknowledg	ementL	29			1	
	5								Yes	No
30a		he organization receive by								
		three years from the date		,	•			00-		v
		the entire holding period?	'					30a		<u>X</u>
		arrangement in Part II.	aliou that ra	auiroa tha ravious	of any panetandard	oontribust	iono?	04		X
31		n have a gift acceptance p						31		
o∠d		n hire or use third parties of	,					32a		Х
h	If "Yes," describe in F	 Part II						324		
33	·	ran II. In't report an amount in co	olumn (c) for	a type of property	for which column (a) is chec	ked			
55	describe in Part II.	an creport an amount in C	51411111 (C) 101	a type or property	ioi willon columni (a	a) 13 CHEC	ncu,			
	accombo in rait ii.									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. 2017 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

FAMILY FIRST HEALTH CORPORATION

Employer identification number 23-7118262

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

HEALTHY LIFESTYLES; TO COLLABORATE WITH OTHERS TO IMPROVE ACCESS AND

BREAK DOWN BARRIERS OF AFFORDABILITY, LANGUAGE AND CULTURE; AND TO

ADVOCATE FOR OUR PATIENTS AND THE MEDICALLY UNDERSERVED.

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

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM, AND IS THEN
REVIEWED BY THE CFO AND CEO. PRIOR TO FILING, A COPY OF FORM IS MADE
AVAILABLE TO ALL BOARD MEMBERS.

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

THE BOARD OF DIRECTORS WITH REVIEWING AND ENFORCING COMPLIANCE AT THEIR

MONTHLY MEETINGS, THE BOARD OF DIRECTORS HAS A STANDING TIME ASKING IF ANY

ATTENDEES HAVE A CONFLICT OF INTEREST WITH ANY OF THE AGENDA ITEMS THE

BOARD THEN VOTES TO ACCEPT THE AGENDA WITHOUT ANY CONFLICTS OF INTEREST.

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

AT THE TIME OF EVALUATION, COMPENSATION INFORMATION IS GATHERED BY THE

HUMAN RESOURCE DIRECTOR FROM THE NATIONAL ASSOCIATION OF COMMUNITY HEALTH

CENTERS AND THE LOCAL MARKET. THIS IS THEN MATCHED WITH PERFORMANCE TO

ESTABLISH COMPENSATION.

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization FAMILY FIRST HEALTH CORPORATION	Employer identification number 23-7118262
FORM 990, PART VI, SECTION C, LINE 19:	
THIS INFORMATION IS PROVIDED UPON REQUEST MADE TO THE CHIE	F FINANCIAL
OFFICER.	
FORM 990, PART XII, LINE 2C:	
THE ORGANIZATION HAS A COMMITTEE RESPONSIBLE FOR THE OVERS	GIGHT OF THE
AUDIT AS WELL AS THE SELECTION OF THE INDEPENDENT ACCOUNTA	NT.

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

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/efile, click on Charities & Non-Profits, and click on 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	number		
Type or	Name of exempt organization or other filer, see instruc	ctions.		Employer	ridentification i	number (EIN) or		
print			00 844	2050				
File by the	FAMILY FIRST HEALTH CORPORA		23-7118					
due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, so 116 SOUTH GEORGE STREET	Social se	curity number	(SSN)				
instructions.								
Enter the	Return Code for the return that this application is for (file	e a separat	e application for each return)			0 1		
Applicati	on	Return	Application			Return		
ls For		Code	Is For			Code		
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07		
Form 990	-BL	02	Form 1041-A			08		
Form 472	0 (individual)	03	Form 4720 (other than individual)			09		
Form 990	-PF	04	Form 5227			10		
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11				
Form 990	orm 990-T (trust other than above) 06 Form 8870 BECKY SHEARER, CFO					12		
Teleph If the c If this is box ▶ [1 I reform	poks are in the care of ▶ 116 SOUTH GEORGE from No. ▶ 717-801-4809 Degranization does not have an office or place of business is for a Group Return, enter the organization's four digit (If it is for part of the group, check this box ▶ Quest an automatic 6-month extension of time until the organization named above. The extension is for the companization of the companization named above. The extension is for the companization of the companization of the companization named above. The extension is for the companization of the companization named above. The extension is for the companization of the companization of the companization named above. The extension is for the companization of the	in the Uni Group Exe and atta FEBRU Organizatio	Fax No. ted States, check this box mption Number (GEN) . I ch a list with the names and EINs of JARY 15, 2019 , to file on's return for: d ending MAR 31, 2018	f this is for	r the whole gro ers the extension opt organization	on is for.		
3a If th	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069 <i>e</i>	enter the tentative tax less any					
	nrefundable credits. See instructions.	5, 5555, 6	site the terrative tax, 1000 arry	За	\$	0.		
	nis application is for Forms 990-PF, 990-T, 4720, or 6069	. enter any	refundable credits and	"	-	3.0		
	imated tax payments made. Include any prior year overpa	•		3b	\$	0.		
	ance due. Subtract line 3b from line 3a. Include your pa			1	Ť			
	using EFTPS (Electronic Federal Tax Payment System). S	•	, , ,	3c	\$	0.		
	If you are going to make an electronic funds withdrawal				<u> </u>			

instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)