BRICK BY BRICK PARTNERS & SUBSIDIARY

Consolidated Financial Statements with Independent Accountants' Review Report

For the year ended December 31, 2018

Consolidated Financial Statements

December 31, 2018

Table of Contents	Page
Independent Accountants' Review Report	1-2
Consolidated Statement of Financial Position	3
Consolidated Statement of Activities	4
Consolidated Statement of Functional Expenses	5
Consolidated Statement of Cash Flows	6
Notes to Consolidated Financial Statements	7-10
Supplementary Information	
Consolidating Schedule of Financial Position	11
Consolidating Schedule of Activities	12



40 Wall Street, 32nd Floor New York, NY 10005 T212 785 0100 F 212 785 9168 www.ncheng.com

Independent Accountants' Review Report

To the Board of Directors of Brick by Brick Partners and Subsidiary Brooklyn, New York

We have reviewed the accompanying consolidated financial statements of Brick by Brick Partners and Subsidiary, which comprise the consolidated statement of financial position as of December 31, 2018 and the related consolidated statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of company management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as whole. Accordingly, we do not express such an opinion.

Management's responsibility for the financial statements

Management is responsible for the preparation and fair presentation of the consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of the consolidated financial statements that are free from material misstatement whether due to fraud or error.

Accountants' responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the consolidated financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion.

Accountants' conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying consolidated financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

Supplementary information

The supplementary information included in the consolidating schedule of financial position and the consolidating schedule of activities are presented for purposes of additional analysis and is not a required part of the basic consolidated financial statements. Such information is the responsibility of management and was derived from, and relates directly to, the underlying accounting and other records used to prepare the financial statements. The supplementary information has been subjected to the review procedures applied in our review of the basic consolidated financial statements. We are not aware of any material modifications that should be made to the supplementary information. We have not audited the supplementary information and do not express an opinion on such information.

NChing LLP

New York, New York November 12, 2019

BRICK BY BRICK PARTNERS & SUBSIDIARY

Consolidated Statement of Financial Position

As of December 31, 2018

Assets Cash Accounts receivables Equipment, net of depreciation — Note 3 Total assets	\$ 159,743 4,397 9,830 \$ 173,970
Liabilities and Net Assets Liabilities Accounts and accrued expenses payable Due to related parties Total liabilities	\$ 14,372 3,479 17,851
Net assets Net assets without restriction Members capital, noncontrolling interest Controlling interest	.336 155,783
Total net assets without restrictions Total liabilities and net assets without restrictions	156,119 \$ 173,970

BRICK BY BRICK PARTNERS & SUBSIDIARY

Consolidated Statement of Activities For the year ended December 31, 2018

Revenue and support		
Sales	\$	97,597
Less: cost of goods sold		(34,739)
Gross profit		62,858
Contributions		583,042
Special events		55,032
Less: direct special events expenses		(24,027)
Other revenue		4,383
Interest income		123
Total revenue and support	_	681,411
Expenses		
Program services		
Brick by Brick Uganda		577,502
Brick by Brick Construction		74,937
Total program services expenses		652,439
Supporting services:		
Management and general		35,861
Fund raising		10,691
Total supporting services expenses		46,552
Total program and supporting services expenses		698,991
Other item		
Foreign currency exchange gain		(126)
Total expenses		698,865
Change in net assets		(17,454)
Net assets without restrictions, beginning of year		173,573
Net assets without restrictions, end of year	\$	156,119

See accompanying notes and independent accountants' review report.

BRICK BY BRICK PARTNERS
Consolidated Statement of Functional Expenses
For the year ended December 31, 2018

			Pro	gram	Program services			Supp	ortin	Supporting services	T	Total Program
	m	Brick by Brick	Brick by Brick Construction	-y -	Total	Mar	Management and general	Fund	1 2 2	Total	and	and Supporting Services exnense
		Semen		_			Parage	7	id id			agradua caar
Salaries	69	49,891	\$ 11,532	8	61,423	6/3	10,691	\$ 10,691	\$	21,382	69	82,805
Grants		493,440	•	1	493,440		1	:	í			493,440
Legal		t	4,442	2	4,442		•		1	1		4,442
Accountant		1		ı			12,050		1	12,050		12,050
Insurance		ı	•		1		2,206		ļ	2,206		2,206
Office expenses		å	3,343	m	3,343		•			í		3,343
Travel		3,506	4,432	2	7,938		•1		,	1		7,938
Meals and entertainment		t	2,322	~	2,322		1		ı	1		2,322
Materials consumed		1	40,490	0	40,490		1		1	1		40,490
Taxes and licenses		ı	69	6	69		1,400		,	1,400		1,469
Dreams Program expense		30,665	•	ı	30,665		•		ŀ	i		r
Reimbursable expense		1	•	1	.1		7,781			7,781		7,781
Other expenses		•	3,788	90	3,788		262		ı.	262		4,050
Bank charges and fees		1	371		371		1,47]			1,471		1,842
Depreciation			4,148	001	4,148		1		-	1		4,148
Total	⇔	577,502	\$ 74,937		\$ 652,439	↔	35,861	169'01 \$		46,552	÷	668,326

See accompanying notes and independent accountants' review report.

Consolidated Statement of Cash Flows

For the year ended December 31, 2018

Cash flows from operating activities Change in net assets	\$	(17,454)
Adjustments to reconcile change in net assets to cash flows provided by operating activities:		
Depreciation		4,148
Change in accounts receivable		3880
Change in accrued revenue		4,501
Change in inventory		(262)
Change in related parties		688
Change in other receivables		(108)
Change in accounts and accrued expenses payable		(828)
Change in deferred revenue		13,821
Change in due to related party	_	(3,479)
Cash flows provided by operating activities		4,908
Cash flows from investing activities		
Purchase of fixed assets		(3,616)
Cash flows used in investing activities		(3,616)
Cash flows from financing activities		
Repayment of directors' loan		(2,481)
Cash flows used in financing activities	_	(2,481)
Net decrease in cash		(1,189)
Cash balance, beginning of year		160,932
Cash balance, end of year	\$	159,743

See accompanying notes and independent accountants' review report,

Notes to the Consolidated Financial Statements

December 31,2018

Note 1 Organization

Brick by Brick Partners ("Brick by Brick") is a nonprofit organization, incorporated in the State of New York on July 9, 2004. Brick by Brick is an innovative partnership that develops and tests entrepreneurial, inventive approaches to business, healthcare and education. Brick by Brick's major program is to provide on-going support to Brick by Brick Uganda (BBBU), a Ugandan non-governmental organization whose mission is to create vital partnerships with Ugandan communities that improve education, health and economic opportunities. BBBU improves the quality of maternal and newborn care at 25 public health facilities, improves education by rebuilding primary schools and building the capacity of school libraries and keeps girls in school through comprehensive sexual and reproductive health education.

Brick by Brick Construction Ltd. ("BBBC") was incorporated in Uganda on August 16, 2012 and carries out construction business using environmentally friendly technology. Brick by Brick has a 99.99% ownership interest in BBBC. The remaining .01% interest is owned by the Executive Director of Brick by Brick.

From here on, Brick by Brick and BBBC will be referred to as the "Organization".

Note 2 Summary of significant accounting policies

Principles of consolidation. The financial statements are consolidated to include the accounts of Brick by Brick and BBBC. All significant intercompany transactions and balances have been eliminated in the consolidation.

Basis of accounting. The consolidated financial statements of Brick by Brick are prepared on the accounting in accordance with accounting principles generally accepted in the United States of America.

Financial statement presentation. Brick by Brick reports information regarding its consolidated statement of financial position and consolidated statement of activities according to the following classes of net assets based upon the existence or absence of restrictions on use placed by its donors:

Without restriction – represents all activity without donor-imposed restrictions.

With restriction – represents contributions with donor stipulation that make clear the asset's restriction either be met by the actions of the organization or the passage of time. Net assets released from restriction represent the satisfaction of the restricted purposes specified by the donors.

Use of estimates. The preparation of consolidated financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the amounts reported in the consolidated financial statements and the

Notes to the Consolidated Financial Statements

December 31,2018

Note 2 Summary of significant accounting policies – (continued)

accompanying notes. On an ongoing basis, management evaluates the estimates and assumptions based on new information. Management believes that the estimates and assumptions are reasonable in the circumstances; however, actual results could differ from those estimates.

Functional allocation of expenses. The costs of providing the various programs and supporting services have been summarized on a functional basis in the consolidated statement of activities and in the consolidated statement of functional expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited. Management and general expenses include those expenses that are not directly identifiable with any other specific function but provide for the overall support and direction of management.

Foreign currency. The U.S. dollar is the functional currency of Brick by Brick. Transactions in currencies other than dollars are translated into dollars at the rates of exchange in effect during the month of the transaction. Property and equipment purchases with non-U.S. currency are translated into dollars at the exchange rate in effect at the time of purchase.

Assets and liabilities denominated in non-U.S. currency are translated into dollars at the exchange rate in effect at the date of the balance sheet. The net exchange gain from foreign currency totaled \$126 for the year ended December 31, 2018.

Concentrations of credit risk. Brick by Brick maintains cash in bank deposits which, at times, may exceed the current insured amount under the Federal Deposit Insurance Corporation (FDIC). At December 31, 2018, Brick by Brick's cash balances did not exceed the current insured amount under. Brick by Brick has not experienced any losses in such accounts and believes it is not exposed to any significant financial risk therein.

BBBC has cash and cash equivalents of \$8,034 equivalents held in Ugandan bank accounts as of December 31, 2018. Such amounts are not subject to FDIC coverage.

Accounts receivable. Receivables are discounted using the effective interest rate, less any impairment. Interest income is recognized by applying the effective interest rate, except for short-term receivables when the recognition of interest would be immaterial. When a receivable is considered uncollectable, it is written-off against the allowance account. Subsequent recoveries of amounts previously written-off are credited against the allowance account. Changes in the carrying amount of the allowance account are recognized in the profit or loss. As of December 31, 2018, BBBC has determined that no allowances were need for the receivable.

Equipment. Equipment is stated at historical cost less accumulated depreciation and any impairment in value. Repairs and maintenance are expensed during the financial period in which they are incurred. Depreciation is calculated using the straight-line method using the following useful life:

Notes to the Consolidated Financial Statements

December 31,2018

Note 2 Summary of significant accounting policies - (continued)

	Useful life
Computer	3 years
Press machine	5 years
Motor vehicles & motor cycles	3 years
Equipment	3 years
Furniture	5 years

Deferred revenue. Represents amounts received from customers before the Organization performs on the contracts.

Contributions. Unconditional contributions, including promises to give cash and other assets, are reported at fair value at the date the contribution is received. The gifts are reported as temporarily restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the consolidated statement of activities as net assets released from restrictions.

Uncertainty in income taxes. Brick by Brick is exempt from federal and state income tax under the provisions of Section 501(c)(3) of the Internal Revenue Code; therefore, no provision for income taxes has been made in these financial statements. Brick by Brick has also been classified as an entity that is not a private foundation within the meaning of Section 509(a) and qualifies for deductible contributions as provided in Section 170(b)(1)(A)(vi). Brick by Brick applies the provision of FASB ASC 740, on Income Taxes, which provides standards for establishing and classifying any tax provisions for uncertain tax positions. Tax filing periods December 31, 2015 and later are subject to examinations by appropriate tax authorities. BBBC, as a Ugandan commercial entity, pays taxes when deemed necessary, BBBC is not subject to U.S. taxes.

Change in accounting principle. On August 18, 2016, FABS issued Accounting Standards Update (ASU) 2016-14, Not-for-Profit Entitles (Topic 958) — Presentation of Financial Statements of Not-for Profit Entities. The update addresses the complexity and understandability of net asset classification, efficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. We have implemented ASU 2016-14 and have adjusted the presentation in these consolidated financial statements accordingly.

Note 3 Liquidity and availability

As of December 31, 2018, financial assets available for general expenditure, within one year of the balance sheet date, comprise the following:

Cash \$ 159,743

Notes to the Consolidated Financial Statements

December 31,2018

Note 4 Equipment

Equipment consist the following:

Equipment	\$ 32,748
Accumulated depreciation	 (22,918)
Equipment – net	\$ 9,830

Note 5 Deferred revenue

The amounts under contract liabilities represent balances due to customers under construction contracts. These liabilities arise when a particular milestone exceeds the revenue recognized.

Note 6 Foreign operations

BBBC operates outside the United States in Uganda. Foreign operations are subject to risks inherent in operating under different legal systems and various political and economic environments. Among the risks are changes in existing tax laws, possible limitations on foreign investment and income repatriation, government price or foreign exchange controls, and restrictions on currency exchange.

Note 7 Subsequent events

Management evaluated its December 31, 2018 consolidated financial statements for subsequent events through November 12, 2019, which is the date when the consolidated financial statements were available to be issued. Management has determined that there are no subsequent events that require additional recognition or disclosures in the consolidated financial statements.

BRICK BY BRICK PARTNERS & SUBSIDIARY Consolidating Statement of Financial Position December 31, 2018

Brick by Brick Eliminations Consolidated	\$ 151,709 \$ 8,034 \$ - \$ 159,743 - 4,397 - 33,282 - (33,282) - 9,830	<u>\$ 184,991</u> <u>\$ 22,261</u> <u>\$ (33,282)</u> <u>\$ 173,970</u>	\$ 7600 \$ 6,772 \$ - \$ 14,372 - 3,479 - 3,479	7,600 10,251	- 33,282 (33,282) - 336 - 336 177,391 (21,608)	177,391 12,010 (33,282) 156,119	\$ 184.001 € 72.070 \$ 173.070
	Assets Cash Accounts receivables Investment in subsidiary Equipment, net of depreciation	Total assets	Liabilities and Net Assets Liabilities Accounts and accrued expenses payable Due to related parties	Total liabilities	Net assets Net assets – without restrictions Members capital, controlling interest Members capital, noncontrolling interest Controlling interest	Total net assets without restrictions	Total liabilities and net assets without restrictions

BRICK BY BRICK PARTNERS & SUBSIDIARY Consolidating Statement of Activities December 31, 2018

	Brick by Brick	BBBC	Eliminations	Cons	Consolidated
Revenue and support					
Sales	· 69	\$ 97,597	· ↔	. \$∕3	97,597
Less: cost of goods sold	.*	(34,739)	*		(34,739)
Gross profit	ı	62,858)		62,858
Contributions	583,042	1	,		583,042
Special events	55,032	•	•		55,032
Less: direct special events expenses	(24,027)		;		(24,027)
Other revenue	2,600	1,783			4,383
Interest income	32	91			123
Total revenue and support	616,679	64,732			681,411
Expenses					
Program services					
Brick by Brick Uganda	577,502	•	1		577,502
Brick by Brick Construction	ż	74,937	1		74,937
Total program services	577,502	74,937	Ē		652,439
Supporting services:					
Management and general	35,861	•	ľ		35,861
Fund raising	10,691	ľ	r		10,691
Total supporting services	46,552	1	ſ		46,552
Total program and supporting services expenses	624,054	74,937	,		698,991
Other item					
Foreign currency exchange gain	3	(126)			(126)
Total expenses and losses	624,054	74,811	*		698,865
Change in net assets	(7,375)	(10,079)	1		(17,454)
Net assets without restrictions, beginning of year	184,766	(11,193)	1		173,573
Net assets without restrictions, end of year	\$ 177,391	\$ (21,272)	→	€⁄3	156,119

Extended to November 15, 2019

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service Go to www.lrs.gov/Form990 for instructions and the latest information.

A	For th	e 2018 calendar year, or tax year beginning ar	id ending		
В	Check à applicat	C Name of organization		D Employer Identific	ation number
Г	Addr	Brick by Brick Partners		•	
广	Nam	Doing business as		56-24	170061
Ē	fritie	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	5 1 0 0 0 T
	Final	232 7th Street	TOUTE		153-8868
-	termi stedi	-1.3 -1 1-11.11 annua at brasiliani agenti 11 este mit attici di la partir doce		G. Gross receipts \$	640,706.
느	retun	BIODRIYN, NI 11215		H(a) Is this a group ret	
L	ton pand	F Name and address of principal officer:Malc Skilal		for subordinates?	
		same as C above		H(b) Are all subordinates inc	luded? Yes No
1	Tax-ex	empt status: X 501(c)(3)) or 527	if "No," attach a li	ist. (see instructions)
		te: > www.Brickbybrick.org		H(c) Group exemption	
		forganization: X Corporation Trust Association Other	L Year	of formation: 2004 M	State of legal domicile: NY
P	art I			·	
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: Bri- partnership that develops and tests ent	ck by B reprene	rick is an i urial, inven	.nnovative
Ē	2	Check this box if the organization discontinued its operations or disp	osed of more	than 25% of its net ass	iets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	9
g	4	Number of independent voting members of the governing body (Part VI, line 1b	ስ	4	8
ž	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	F man appearaged a	5	0
荽	6	Total number of volunteers (estimate if necessary)	Titter orbites and and	6	0
夏	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
-	b	Net unrelated business taxable income from Form 990-T, line 38		7b	0.
	I			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		596,553.	614,047.
	9	Program service revenue (Part VIII, line 2g)		0.	0.
چ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		54.	32.
ijĽ.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-2,882.	2,600.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		593,725.	616,679.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		439,920.	493,440.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
絲	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	80,001.	71,273.
Expenses	1 6 a	Professional fundraising fees (Part IV column (A) fine 11a)		0.	0
ě	b	Total fundraising expenses (Part IX, column (D), line 25)	591.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		18,125.	59,341.
	18	Total expenses: Add lines 13-17 (must equal Part IX, column (A), line 25)		538,046.	624,054.
	19	Revenue less expenses. Subtract line 18 from line 12		55,679.	-7,375.
Sats or Batances				Jinning of Carrent Year	End of Year
鹽	20	Total assets (Part X, line 16)		192,366.	184,991.
Line As	27	Total liabilities (Part X, line 26)		7,600.	7,600.
堊	22	Net assets or fund balances. Subtract line 21 from line 20		184,766.	177,391.
		Signature Block			
Und -	er peni	itles of perjery, I declare that I have examined this return, including accompanying schedu	les and stateme	ents, and to the best of my i	knowledge and belief, it is
lfue,	, corre	t, and complete. Declaration of preparer (other than officer) is based on all information of	vhich preparer	has any knowledge.	44/44/40
		Stangeure un brucer			11/11/19
Sig				Date	
Her	6	Marc Sklar, Executive Director			
_		to the second	· · · · · · · · · · · · · · · · · · ·	ata .	
Pale		Print/Type preparer's name Preparer's signature		ate Cank [_	PTIN
	a Deret	Alwayne Burke	<u>~ ~ ⊕</u>	1/11/19 ser-moloyed	P01623706
		Firm's name NCHENG LLP		Firm's EIN	81-0926770
U30.	Only	Firm's address 40 Wall Street, 32nd Floor			7050160
		New York, NY 10005		Phone no.212	
IVID	/ (NB II	RS discuss this raturn with the preparer shown above? teas instructions)			IX Von I No

Form 990 (2018) Brick by Brick Partners
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			x
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		-41-
7	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		Х
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		<u>X</u>
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	look kinaani	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable:	10000		estable.
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D, Part VI	44-		Х
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part 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
0	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		47	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes;" complete Schedule D, Part X	11f	X	.
	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	<u> </u>	X
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
D	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,			4,5
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>x</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	20	X	
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	27	<u> </u>
13	complete Schedule G, Part III	19		X,
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

832003: 12-31-18

Form 990 (2018)

E COL	ENA CHECKIEL OF Medicined Schedules (commed)			
	Policies of the Control of the Contr		Yes	Νo
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			x
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes," to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		<u> </u>
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
,,	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If *No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		, ,,
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	1		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	1		
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	nisanotniet	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	(Sec.)	W.	
	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		<u> </u>
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			ų.
	director, trustee, or direct or indirect owner? If *Yes,* complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			х
	contributions? If "Yes," complete Schedule M	30	· -	_
.31	Did the organization liquidate, terminate, or dissolve and cease operations?	34		x
	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?// "Yes," complete	31		1 22
32		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		1
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R; Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes, " complete Schedule R; Part II, III, or IV, and	33		
•	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	<u> </u>
	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		X
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	X	ļ
Pa	Statements Regarding Other IRS Filings and Tax Compliance			 ,
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
	1 1		Yes	No
	Enter the number reported in Box 3 of Form 1096, Enter -0-if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	00=	<u> </u>
93200.	4 12-31-18	Form	990	(2018)

	Contention regarding Other Rig Fairings and tax Compilative (continued)					
25	Enter the number of employees reported by Found M.O. Transmitted of Many and Tou Statements	Hassassa	Yes	No		
28	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.					
1-	The state of the s	7A2358660				
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	0.996509	37448888		
٥.	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			X		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		 ^		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b; provide an explanation in Schedule O	3b		├──		
44	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	۱		x		
ь	If "Yes," enter the name of the foreign country;	4a	*****	99866		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	JA 68-1940	X		
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X		
С	If "Yes" to line 5a or 5b, did the organization file Form 8885-T?	5c		<u> </u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	<u> </u>		一		
	any contributions that were not tax deductible as charitable contributions?	6a		x		
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			\vdash		
	were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).			73.75		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х			
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		·····	<u> </u>		
	to file Form 8282?	7c		X		
d	If "Yes;" indicate the number of Forms 8282 filed during the year 7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
Ь	· · · · · · · · · · · · · · · · · · ·					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		988			
	sponsoring organization have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.		機能			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>		
Þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12					
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b					
11	Section 501(c)(12) organizations, Enter:					
а	Gross income from members or shareholders 11a					
Þ	Gross income from other sources (Do not net amounts due or paid to other sources against					
40	amounts due or received from them.)					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	700000	16043780		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year					
13	Section 50 f(c)(29) qualified nonprofit health insurance issuers.	42-	() (1 to 10 to	10092905147		
d	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.	13a	elektrolek Ekstrolek	.50935%		
	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					
_	Enter the amount of reserves on hand 13c					
14a	model and the second of the se	14a	018/00Pm	X		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-10		\vdash		
.~		15		x		
	excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	35000	35955	98/8488		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	ente plantify.	X		
	If "Yes," complete Form 4720, Schedule O.	-8888Y	1981AS			
		Form	990	(2018)		

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.

	Check if Schedule O contains a response or note to any line in this Part VI		4.4.4.	X
Sec	tion A. Governing Body and Management			
	! !	Lana Santana	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	\Box	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
ь	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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9.		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	X	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	(888)	73.2233	985005S
12a	Did the organization have a written conflict of interest policy? If *No," go to line 13	12a	X	0200000
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12.33		
·		12c	х	
13	In Schedule C now this was done Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	483302	3844683	ASSESSES
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official			X
		15a		X
D	Other officers or key employees of the organization	15b	02802	42 3762762
46-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
юа	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	5885A	3868	y V
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a	8585086	X,
b				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		William	
	exempt status with respect to such arrangements?	16b		
_	tion C. Disclosure		·	
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only	availa	ble
	for public inspection, indicate how you made these available, Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule 0).			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	The Organization - 347-453-8868			
	232 7th Street, Brooklyn, NY 11215			
язэпп	3. 79.91-18	Form	990	2012

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations,
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organiz (A)	(B)			(0	2)			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check mo			l than-	ene	Reportable	Reportable	Estimated
	hours per	box	, unle cer en	95 þ@	rson	ls bot	h an	compensation	compensation	amount of
	week (list any	⊢				T -		from the	from related organizations	other compensation
	hours for	girec				波.		organizațion	(W-2/1099-MISC)	from the
	related	Step 0	rustee		l	ensat		(W-2/1099-MISC)		organization
	organizations	in le	oneal to		loyee	D S				and related
	below line)	Individual tustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Буте			organizations
(1) Marc Sklar	10.00	-	<u></u>	0	≥≥.	# E	证			
Executive Director	1.00	x		X				65,000.	0.	0-
(2) Adam Rabinovitch	1.00							,		
Chair		х		X				0.	0.	0:
(3) Alison Amdur	1.00						~~~			
Vice Chair		X		X				0.	0.	.0
(4) Benjamin Zukerman	1.00							<u> </u>	_	
Treasurer		X		Х				0.	0.	.0
(5) Kadddu Luyombya	1.00								,	
Fundralsing Chair	1.00	X	_	_	_			0.	0.	. 0
(6) Delvida Falherty Member	1.00	х						0.	0.	0
(7) Robert Jefferson	1.00		ļ	Щ		\vdash		0.	υ,	. 0
Member	1.00	ł	:	х				0.	0.	Ò
(8) Ron Sarubbi	1.00			27				0.	0 •	
Member		ł		x				0.	0.	0
(9) Julia Hoagland	1,00	H								
Member	,	1		X				0.	0.	0
(10) Leslie Gruss	1.00									
Member			<u> </u>	X				0.	0.	0.
		[
		<u> </u>								
									,	
		<u> </u>		·						
		ĺ								
		\vdash	\vdash		_	 				
		İ								
								· · · · · · · · · · · · · · · · · · ·		•
		1					i	:		

832007 12-31-18

Form 990 (2018)

(A) Name and title (A) Average hours per week		e (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					one nen	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(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)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
WW.										
A - MANAGEMENT - · · ·										
MA A MESONATION		_				•				
· · · · · · · · · · · · · · · · · · ·										
							·			
		_				_				
1b Sub-total		<u></u>	<u> </u>	<u></u>	<u> </u>	<u> </u>		65,000.	0	. 0.
c Total from continuation sheets to Part V	II, Section A			ب مند وج	4****		>	0. 65,000.	0	
Total number of individuals (including but compensation from the organization								eceived more than \$100	,000 of reportable	0
3 Did the organization list any former officer	director or to	uste	e. ke	v en	nolo	vee	or	highest compensated e	mplovee on	Yes No
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the s	such individual	,	*****				la eper	ed dan er bega he dalbh sha edha admena qua a be en	********************	3 X
and related organizations greater than \$15 Did any person listed on line 1a receive or	50,0007 If "Yes,	• co	mple	ete S	Sche	edule	JI	or such individual		4 X
rendered to the organization? If "Yes," cor Section B. Independent Contractors								· · · · · · · · · · · · · · · · · · ·	**********************	5 X
Complete this table for your five highest of the organization. Report compensation for	No. 1								A Company of the Comp	sation from
(A)							(B) Description of s		(C) Compensation	
					•					
	(including but r									

Page 9

		Check if Schedule O cont	tains a resnone	e of note to any lif	ie in this Part VIII			
		Gilleck II Galleddie G Gant	диз а гезропа	S OF STOLE TO ALTY III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
ts, Gra Amou	ь	Membership dues	1b					
	c	Fundraising events		31,005.				
ぎゅ	d	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (contribut						
	f	All other contributions, gifts, gran	its, and					
E e		similar amounts not included abo		583,042.				
声	g	Noncash contributions included in lines		<u> </u>				
9.6		Total. Add lines 1a-1f			614,047.			
				Business Code				
8	2 a							
اه څ	ь							
SE	c							
EVE EVE	d							
Program Service Revenue	е							
₽.	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f			·			
	3	Investment income (including						
		other similar amounts)			32.			32.
	4	Income from investment of ta	x-exempt bond	proceeds.			<u></u>	
	5	Royalties		<u></u>			<u></u>	
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
		Rental income or (ioss)	L					
	d	Net rental income or (loss)	***************************************					
	7 a	Gross amount from sales of	(i) Securities.	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
		Net gain or (loss)						
ري ا	8 a	Gross income from fundraisin						
venue		including \$ 31,0	05. of	1				
41. 1		contributions reported on line	1c). See					
× =		Part IV, line 18		24,027.				
Other Re	b	Less: direct expenses		24,027.				
٦	1	Net income or (loss) from fund			0.			
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19		a				
	b	Less: direct expenses		5				
	c	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances		a				
į	b	Less: cost of goods sold		3				
		Net income or (loss) from sale						
		Miscellaneous Revenu	18	Business Code				
	11 a	Miscellaneous		900099	2,600.	2,600.		
	b							
	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d			2,600.			station property
	12	Total revenue. See instructions			616,679.	2,600.	0.	32.

792___1

Secti	on 501(c)(3) and 501(c)(4) organizations must com	olete all columns. All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	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				
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	493,440.	493,440.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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: 001		40.00
7	Other salaries and wages	71,273.	49,891.	10,691.	10,691.
8	Pension plan accruais and contributions (include				
	section 401(k) and 403(b) employer contributions)			****	
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b			· · · · · · · · · · · · · · · · · · ·	45 050	
¢	Accounting	12,050.		12,050.	
đ			Nama yang manung kang kang kang kang kang kang		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
ā	Other. (If line 11g amount exceeds 10% of line 25,	·			
	column (A) amount, list line 11g expenses on Sch (I.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	3,506.	3,506.		
17	Travel	3,300.	37.3.00 +		
18	Payments of travel or entertainment expenses				
ari	for any federal, state, or local public officials				
19 20		•			
20 21	Payments to affiliates				
21 22	Depreciation, depletion, and amortization			·····	
23	· · · · · · · · · · · · · · · · · · ·	2,206.		2,206.	
24	Other expenses, Itemize expenses not covered				
-1	above. (List miscellaneous expenses in line 24e. If line l				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule (C.)				
a	Dream Program expense	30,665.	30,665.		
b	Reimbursable Expense	7,781.	-,	7,781.	
c	Bank Charges and Fees	1,471.		1,471.	
d	Taxes and Licenses	1,400.		1,400.	
e	All other expenses	262.		262.	
25	Total functional expenses. Add lines 1 through 24e	624,054.	577,502.	35,861.	10,691.
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)				

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year **(B)** End of year 26,154. 6,245. Cash · non-interest-bearing 1 132,930. 145.464. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete: Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment; cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation ______10b 10c Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 33,282. 33,282. Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 192,366. 184,991. Total assets. Add lines 1 through 15 (must equal line 34) 16 7,600. 7.600. 17 Accounts payable and accrued expenses 17 18 18. Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 7.600. 7,600. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 184,766. 177,391. 27 Unrestricted net assets Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 177,391. 184,766. 33 33 Total net assets or fund balances 184,991. 192,366. Total liabilities and net assets/fund balances 34

Form	990 (2018) Brick by Brick Partners	56-2470	061	Pag	je 12
Pa	TEXT Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	*******************			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	616		
2	Total expenses (must equal Part IX, column (A), line 25)	2	624		
3	Revenue less expenses. Subtract line 2 from line 1	3			75.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	184	.,7	66.
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	-6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9:			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	177	, 3	91.
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		*******		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	<u>.</u>			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	*******	2b		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	***	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?	,	За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	990 (2018)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service:

Name of the organization

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.

2018

Open to Public Inspection

Employer identification number

Brick by Brick Partners 56-2470061 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 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 5 ___ 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). 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.) 8 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 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. 🔟 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in vour governing document (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990 EZ) 2018 Brick by Brick Partners 56-2470 (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	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
-1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	82,346.	319,756.	469,215.	565,219.	552,377	1988913.	
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	82,346.	319,756.	469,215.	565,219.	552,377.	1988913.	
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)						896,641.	
6	Public support. Subtract line 5 from line 4.						1092272.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) ➤	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
7	Amounts from line 4	82,346.	319,756.	469,215.	565,219.	552,377.	1988913.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources			40.	54.	32.	126.	
9	Net income from unrelated business		į					
	activities, whether or not the	-						
	business is regularly carried on				_		<u></u>	
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)			600.	4,022.	2,600.	7,222.	
11	Total support. Add lines 7 through 10						1996261.	
12	Gross receipts from related activities,	, etc. (see instructi	ons)			12		
13	First five years. If the Form 990 is for	-		•				
~	organization, check this box and stor	here			********************	·	<u></u>	
	ction C. Computation of Publ	*.*						
	Public support percentage for 2018 (14	54.72 %	
	Public support percentage from 2017					15	39.13 %	
1 6 a	33 1/3% support test - 2018. If the o			The state of the s			***************************************	
	stop here. The organization qualifies							
b	33 1/3% support test - 2017. If the							
4=	and stop here. The organization qual							
17a	10% -facts-and-circumstances tes			and the second second		The second secon		
	and if the organization meets the "fac			_	•	.,-		
	meets the "facts-and-circumstances"							
b	10% -facts-and-circumstances tes							
	more, and if the organization meets the							
4	organization meets the "facts and circ			·				
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b			······································	
					Sche	idule A (Form 990	or 990-EZ) 2018	

832022 10-11-18

Schedule A (Form 990 or 990 EZ) 2018 Brick by Brick Partners 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

Detecting year (or fixed lyear beginning in) ► (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total membership free received, IOB not include any "uncaud grants," or line of the production	Sec	guality under the tests listed be ction A. Public Support	low, please com	plete Part II.)				
1 Gifts, grants, contributions, and membranish piese received. (Do not include any "unissual grants.") Gross soceipts from admissions, formation and provided in any activity that it included in any activity that it included to the organization's tax-exempt purpose 3 Gross soceipts from admissions while that are not an unwellad trade on the increase under section 513 4 Tax revenues wheat for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities turnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities turnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 Amounts included on lines 1, 2, and 3 received from disqualified persone by Amounts and the properties of the propert		····	(a) 2014	(b) 2015	(c) 2016	(4) 2017	(e) 2018	(fl)Total
membership frees received. (On not include any "Inclusional grants.") 2. Gross receipts from admissions, membrandine sold or services performed, or facilities furnished in any activity that is related to the originization's tax-exempt purpose. 3. Tax revenues leved for the organization is tax-exempt purpose. 4. Tax revenues leved for the organization is tox-exempt purpose. 5. Thro value of exercision of 3. 4. Tax revenues leved for the organization is tox-exempt purpose. 5. Thro value of exercision from admission in the part of the organization is behalf. 5. Thro value of exercision of racitides furnished by a governmental unit to the organization without charge. 6. Total. Add lines it through 5. 7. Amounts included on lines 1, 2, and 3 received free metitate designating services in the complete services or facilities for the organization without charge free metitate designating services in the complete services free metitate designating services in the complete services or facilities for services in the complete services free metitate designating services in the complete services free metitate designation services in the complete services free metitate designation services in the complete services free metitate designation services in the complete services			10/2014	(6) 20.5	(0) 2010	1 (4)2011	(0) 2010	(i) rotal
include any "unioual grants.") Gross needpits from admissions, merchandise sold or services performed, or admissions, and and any activity that is plated to the organization is travewerely tupopee. 3 Gross needpits from activities that are not an unrelated trade or business under section 513. 4 Tex revenues level for the organization's benefit and either paid to or expended on its behalf. 5 The value of services or facilities furnished by a governmental unit to the organization without charge. 6 Total. Add lines 1 through 5. 7 a Amounts included on lines 1, 2, and 3 received on the services of the patent of \$0.00 or merchandis on the services of the patent of \$0.00 or merchandis or mercha	-	, -						
2 Gross receipts from admissions, merchandles each of services parformed, or facilities furnished in any activity that is related to the organization's tow-exempt purpose of Gross receipts from activities that are not an unrelated trade of business from section 513 and the services of facilities furnished in a service of the organization's benefit and either paid to or expended on its behalf of the organization's benefit and either paid to or expended on its behalf of the organization's benefit and either paid to or expended on its behalf of the organization's without charge of Total Add lines 1 through 5 7 A mounts included on lines 1, 2, and 3 received from disqualified persons between the value and services of facilities furnished by a governmental unit to the organization without charge of Total Add lines 1 through 5 8 Public support disqualified persons between whether bear qualified persons between the value and services of the organization in the 15 for the year. Add lines 1 and 17 is not the 15 for the year of the organization in the 15 for the year of the organization organization organization organization organization organizati								
metchandise 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- insess under section 513. 4. Tax rovenues levied for the organi- 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. 7. A mount is furnished on lines 12, and 3. received from disqualified persons b. Account levelage in line 2 and 7 reviewd from effect use engaglied persons b. Account levelage in line 2 and 7 reviewd from effect use engaglied persons b. Account levelage in line 2 and 7 reviewd from effect use engaglied persons b. Account levelage in line 2 and 7 reviewd from effect use engaglied persons b. Account levelage in line 2 and 7 reviewd from effect use engaglied persons b. Account levelage in line 2 and 7 reviewd from effect use engaglied persons b. Account levelage in line 2 and 7 reviewd from effect use engaglied persons b. Account levelage in line 2 and 7 reviewd from effect use engaglied persons b. Public support. Saturities Interiors. 10 a Gross income from interest. 10 a Gross income fr	.2		•		1			
any activity that is related to the organization is trave-ment purpose 3 Gross receipts from activities that are not an unrelated trade of the- iness under section 513 4 Tax revenues levide 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 7 A Amounts included on lines 1, 2, and 3 acceived from disqualified persons b Amounts included on lines 1, 2, and 3 acceived from disqualified persons b Amounts included on lines 1, 2, and 3 acceived from disqualified persons b Amounts included on lines 1, 2, and 3 acceived from disqualified persons b Amounts which a service of the	_				1		1	
originization's tax-exempt purpose \$ Gross receipts from activities that are not an unrelated trade or business under section \$13 interest or section \$13 interest or expended on its behalf or expended								
3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levide for the organization's benefit and either paid to or expanded on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add incise 1 through 5 7 An Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from disqualified persons that severe disputation without charge on the services of the s								
are not an unrelated trade or business under section 513 1 Tax revenues levided for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualitied persons behalf of the property of	3	· · · ·						
iness under section 513 4 Tax revenues levided for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization's benefit on distributed on its behalf 6 Total. Add lines 1 through 5 7 A Amounts included on lines 1, 2, and 3 review from disqualified persons 9 Amounts included on lines 1, 2, and 3 review from disqualified persons 9 Amounts included on lines 1 and 3 review from distributed by the first first several to the past of \$2,000 or 110 of the several consists included as lines 2 and 3 review from distributed for inside 1 first first several to the several to the several several to the several of \$2,000 or 110 of the several consists included to lines 2 and 3 review from distributed for the several consists included to lines 2 first first several to the several consists included as lines 2 several se	~							
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5. 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 9 Anomalis hauded in lines 2 and 1 are revived from other training the persons of the second lines and the persons of the second lines and the persons of the second lines are 4 36,00 or 1% of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from other training the persons of the second lines 2 and 1 are revived from the second lines 2 and 1 are revived from the second lines 2 and 1 are revived from the second lines 2 and 1 are revived from similar sources. b Unrelated business taxable income (less section 51 taxes) from businesses acquired dark June 30, 1975 c Add lines 1 ba and 10b 1 Net income from unrelated businesses acquired after June 30, 1975 c Add lines 1 ba and 10b 1 Net income from unrelated businesses acquired after June 30, 1975 c Add lines 1 ba and 10b 1 Net income from unrelated businesses acquired after June 30, 1975 c Add lines 1 ba and 10b 1 Net income non unrelated businesses acquired after June 30, 1975 c Add lines 1 ba and 10b 1 Net income from unrelated businesses acquired after June 30, 1975 c Add lines 1 ba and 10b 1 Net income from unrelated businesses acquired after June 30, 1975 c Add lines 1 ba and 10b 1		iness under section 512						
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 ciganization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons by amounts included on lines 3, 2, and 3 received from disqualified persons by amounts included on lines 3 and 3 received from other than disqualified persons that services the greater of \$5.00 or 1% of the amounts included on lines 3 and 3 received from other than disqualified persons that services the greater of \$5.00 or 1% of the amounts included on lines 3 and 3 received from other than 15 at the year. Add lines 7 and 7b 9 Amounts from line 6 10a Gross income from interest, dividenting, payments received on securities learns, rents, royalities, and income from similar sources. 5 Unriedated usuriess faitable income (less section 3 if 1 tages) from businesses and income from included pain line 10b, whether or not the businesses arctivities not included an line 10b, whether or not the businesse is regularly carried on 1 received pain or loss of the section of the common person included gain or loss from the sale of capital assasts (Explain in Part VI). 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage form 2017 Schedule A, Part III, line 15 9 Audilians 10 km and 10 hours than 10 hours	A	4***********						
or expended on its behalf for value of services or facilities furnished by a governmental unit to the organization without charge for Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 roceived from disqualified persons but and the service of the servic	4	_						
5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5. 7 A Amounts included on lines 1,2, and 3 received from disqualified persons b Amounts throulded on lines 2 and 3 received services designator of \$5.00 or 75 of 24 amounts on line 13 for the year of \$5.00 or 75 of 24 amounts on line 13 for the year of \$5.00 or 75 of 24 amounts on line 13 for the year of \$5.00 or 75 of 24 amounts on line 13 for the year of \$5.00 or 75 of 25 amounts on line 13 for the year of 25 o								
furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5. 7a Amounts included on lines 1, 2, and 3 roceived from disqualified persons by mounts included on lines 1, 2, and 3 roceived from disqualified persons by mounts included on lines 2, and 3 roceived from disqualified persons by mounts included on lines 2 and 3 roceived from disqualified persons that are developed from the designation of section 3. Total Support control of the developed from the section of the section 5. Total Support Calendar year (or fiscal year beginsing in) to 2. 9 Amounts from line 6. 10 Cal Gross income from interest, dividends, payments received on securifies loans, rents, royallies, and income from similar sources, dividends, payments received on securifies loans, rents, royallies, and income from similar sources. 10 Unrelated business istable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in his 10b, regularly carried on control of the companies to th	_			 				
the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 7 receiver from other tran desqualified persons b b Amounts included on lines 1 and 7 receiver from other tran desqualified persons that exceed the purport. (Spharter 15 each by sar. Add lines 7 and 7 b Public support. (Spharter 15 each by sar. Add lines 7 and 7 b Amounts from line 8 9 Amounts from line 8 9 Amounts from line 8 9 Linestand business stable income (less section 5.1 from 15 cm, received on securities loans; tents, royalties, and income from similar sources b Unrelated business stable income (less section 5.1 from 15 cm, received on securities loans; tents, royalties, and 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 ergularly carried on 13 Total support percentage from 2017 Schedule A, Part III, line 15 16 Public support percentage from 2017 Schedule A, Part III, line 15 17 Investment income percentage from 2017 Schedule A, Part III, line 15 18 3 13% support percentage from 2017 Schedule A, Part III, line 15 19 3 3 1/3% support percentage from 2017 Schedule A, Part III, line 17 19 a 33 1/3% support percentage from 2017 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2018. If the organization indic not check the box on fine 14, and line 15 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported on share in the organization percentage 20 Private Foundation, If the organization line 17, line 190, check this box and stop here. The organization qualifies as a publicly supported or han 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.	9							
6 Total. Add lines 1 though 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included an lines 3 me3 received from disqualified persons b Amounts included an lines 3 me3 received from disqualified persons b Amounts included an lines 3 me3 received from disqualified persons that exceed the greater of \$2,000 oc 1% of the amount on line 13 for file years c Add lines 7a and 7b 8 Public support. (a) purport in 10 me3 for means section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from Similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business sactivities not included in line 10b, whether or not the business is regularly carried on on floude gain or loss from the sale of capital assatis (Explain in Part VI). 13 Total support, (Add lines 0, 10a, 11, and 12) 14 First five years, if the Form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 15 18 Public support percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 Agd 33 1/3% support percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 19 Public support percentage from 2017 Schedule A, Par							}	•
7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from disqualified persons that exceed the pract of \$3.000 or 10 of the survival department of the 13 for the year. Add lines 73 and 75 8 Public support. Spirating 7 testinatis Section B, Total Support Calendar year (or fiscal year beginning in)	_	***					 	
S received from disqualified persons be American Exercised Support (and a service the content of the content o				<u> </u>	 	ļ .		
b Amounts included on lines? 2 and 3 received from district indeputible placements that exceed the greater of \$5.000 or 1% of the amount on line 15 fet the year. c. Add lines 7a and 7b 8 Public support, (sphartist / temmiles) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, pertage the construction of the securities loans, pents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 oc Add lines 10a and 10b whether or not the business is regularly carried on or loss from the sale of capital assasts (Explain in Part VI). 11 Net income from unrelated business in regularly carried on or loss from the sale of capital assasts (Explain in Part VI). 13 Total support, (Add lines 9, 10a, 11, and 12b) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage from 2018 (line 8, column (f), divided by line 13, column (f)) 15 90 90 90 90 90 90 90 90 90 90 90 90 90	7 a							
troon office than designatived pressine that exceed the project of \$5.00 or 15 of the amount on fine 1 for the year of \$6.00 or 15 of the amount on fine 1 for the year of Add lines 7 a and 7 b 8 Public support _separative / temiline		, , , , , , , , , , , , , , , , , , ,		<u> </u>				
secution B. 7 and 7 b. 8 Public support. (system for System for S	r	The state of the s					1	
a Public support. Supporting 7, top least 5. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Observation interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 C Add lines 10a and 10b 11 Net income from unrelated business softwities 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 assasts (Explain in Part VI.) 13 Total support, fedulines 9, 10a, 11, and 12) 14 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 6, column (f), divided by line 13, column (f)) 18 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 19 33 1/3% support tests - 2018, lift the organization cid not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017, if the organization cid not check the box on line 14 or line 18a, and line 15 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization line 18 is not more than 33 1/3%, check this box and stop		exceed the greater of \$5,000 or 1% of the		1				•
Section B. Total Support Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from Smillar sources burned from Smillar sources and income from Smillar sources and income from Smillar sources and income from Smillar sources acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 13 Total support, ized lines 9, roc. 17, and 12) 14 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2018. (fit he organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 15 b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization in fine 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization in fine 18 is not more than 33 1/3%, check this box and stop here.							ļ	
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (e) 2016 (d) 2017 (e) 2018 (f) Total Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, payments received on general for the securities loans, payments received on general for the securities loans, payments received on general for the securities and to business acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on general for the securities of t							<u> </u>	· · · · · · · · · · · · · · · · · · ·
Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 10a Gloss income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage from 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 19 a 33 1/3% support tests - 2018, if the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 10 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	8	Public support. (Subtract line 7c from line 6.)						
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business sactivities not included in line 10b, whether or not the business is 12 guilarly carried on 12 Cither income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support, (Add lines 9, 10s, 11, and 12) 14 First five years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 Section D. Computation of Investment Income Percentage 19 Investment income percentage from 2017 Schedule A, Part III, line 17 19 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Private foundation. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions					· · · · · · · · · · · · · · · · · · ·	.,	.,	
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or included in line 10b, whether or not the business is regularly carried on 12 Cther income. Do not include gain or loss from the sale of capital sasets (Explain in Part VI.) 13 Total support, (Add lines 9, 10a, 11, and 12b) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage from 2018 (line 10c, column (f), divided by line 13, column (f)) 19 a 33 1/3% support tests - 2018. If the organization cid not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization cid not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 37 Private foundation. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, check this box an		· · · · · · · · · · · · · · · · · · ·	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 13 Total support, fadd lines 9, 10c, 11, and 12) 14 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check he box on line 14, and line 16 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check he box on line 14, or line 19a, and line 16 is more than 33 1/3%, and line 16 is mor			··					
securities loans, rents, royalties, and income from Similar sources	10a			ļ				
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support, (Add lines 9, 10c, 11, and 12.) 14 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 as 3 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		securities loans, rents, royalties.						
(less section 511 taxes) from businesses acquired after June 30, 1975 c. Add lines 10a and 10b 1 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 the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage from 2017 Schedule A, Part III, line 15 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 3 33 1/3% support tests - 2018, (if the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on fine 14 or line 19a, and line 16 is more than 31 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 31 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 31 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		and income from similar sources					<u> </u>	
acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support, (Add lines 9, 10c, 11, and 12.) 14 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2018. (if the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	t							
c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 19a 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 19 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		•						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on grain or loss from the sale of capital assets (Explain in Part VI). 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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)). 16 Public support percentage from 2017 Schedule A, Part III, line 15. 16 96 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)). 18 Investment income percentage from 2017 Schedule A, Part III, line 17. 19 33 1/3% support tests - 2018. If the organization clid not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. b 37 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. b 39 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. b 39 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.		acquired after June 30, 1975						
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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2018, if the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 31 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 31 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization D Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	c	Add lines 10a and 10b						
whether or not the business is regularly carried on 20 ther income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 14 First five years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	11							
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 the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								
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 the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 50 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.		regularly carried on						
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 the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	12	Other income. Do not include gain	, , , , , , , , , , , , , , , , , , , ,					
13 Total support, (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.					1			
First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	13	Total support. (Add lines 9, 10c, 11, and 12.)					<u> </u>	·····
Check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions			the organization	s first, second, thi	rd, fourth, or fifth t	ax vear as a secti	on 501(c)(3) organiz	ation,
Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.								
16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f); divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	Sec	ction C. Computation of Public	Support Pe	rcentage				****
16 Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f); divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	15	Public support percentage for 2018 (fir	te 8, column (f),	divided by line 13,	column (f))		15	%
17 Investment income percentage for 2018 (line 10c, column (f); divided by line 13, column (f)) 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	16	Public support percentage from 2017 8	Schedule A, Part	t III, line 15			16	96
18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	Sec	tion D. Computation of Invest	tment incom	ie Percentage				
19a 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	17	Investment income percentage for 201	8 (line 10c, colu	mn (f), divided by l	ine 13, column (f))	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	17	%
19a 33 1/3% support tests - 2018. If the organization did not check the box on fine 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	18.						18	%
more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							33 1/3%, and line 1	7 is not
b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.			· ·					▶□
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	ł				· -,			and
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								
	20				-			
	-				· · · · · · · · · · · · · · · · · · ·	 		

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 C. If you checked 12c 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).
- 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?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line.9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1	(astro-over)	\$451000-900
	-728Vest	-3904650
	X8000	3333
2		
3a	1,14,10,11,11	
	38868	(CASSAS)
	NOTE:	198983
3b	700.00 .	
		37390A4 37390A4 37397
3c		
		V6000000000 1000000000000000000000000000
4a	SPANASS	100000000
388888	938889	ALBERT
	部類	
4b		
	70990	666000
4c	1855-1860-1	ASSESSED OF THE PROPERTY OF TH
-		
5a	NUNCTO	226697743
	320099	553689345
		REGISTER.
5b		
5c		
3 C		
000000000000000000000000000000000000000	1000SSSS.	1978-9765
5390000000	#99atest	588588597
7		
	95.88	
8	or near the SOC	ve/smes
	(2)(3)(A)(A)	\$2502E
		W8395
9a	1 80 0,000	azimses si i
	腦霧	
9b		
9c	a injuries i	ina, min
3333333	255555	(Selek
	(1223)P	##XXX
10a	ļ.,,	
10b		

892024 10-11-18

	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		Ц
Sec	tion B. Type I Supporting Organizations			
		197539743954VG	Yes	No
1,	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	3000000		DESCRIPTION OF THE PARTY OF THE
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	d contraste	. Servicio de la	JOSEP CONTRACTOR
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
6	supervised, or controlled the supporting organization.	2		L
500	tion C. Type II Supporting Organizations		· ·	
_		250000000000	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	2.50		
-	the supported organization(s).			
260	tion D. All Type III Supporting Organizations		i	
_	Did the second of the second o	opyrodylet	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	1000000		92866
À	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	355/3C	1 1005/1006
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	3500000000	9(87,66)	250000
	the organization maintained a close and continuous working relationship with the supported organization(s).	2:	90696588	17.40 (2.50 Viet
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	2000	367735	37.7732
Sac	supported organizations played in this regard. Ition E. Type III Functionally Integrated Supporting Organizations	3		
260	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee Instruction	-a)		
ا	The organization satisfied the Activities Test, Complete line 2 below.	s _j .		
a 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 in	netři rétions	-1	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	100504205	30889	2000
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify.			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	egaserater.	1 debares
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	78705780	3/2/2/25	(50)
~	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	GRASSES.	(79)(618)
3	Parent of Supported Organizations, Answer (a) and (b) below.	20 (////////////////////////////////////	(6036)	87808X8
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? Provide details in Part VI.	3a	SAMOLINE.	198269A
h		3 a	3972373	828694
D	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		53555
	at the problem and distriction in the control at Last All the total braken by the children and the reading.	1000		

832025 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

Li Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

	····		****
Schedule A	Form 990	or 990-EZ)	2018

4

5

4 Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2018

and 4c.

8 Breakdown of line 7:

a Excess from 2014

b Excess from 2015

c Excess from 2016

d Excess from 2017

e Excess from 2018

Excess distributions carryover to 2019. Add lines 3j

Schedule A	(Form 990 or 990 EZ) 2018 Brick by Brick Partners	56-2470061 Pag	те 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a of 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 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 Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additic (See instructions.)	r 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V, anal information.	

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			
		<u> </u>	
	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·	** *	
			
<u></u>			 .
			

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2018

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
Prior amounts	541,416.	501,491
Puffin Foundation	375,000.	335,075
Nicoll Family Fund	100,000.	60,075

, , , , , , , , , , , , , , , , , , ,		
THE PARTY OF THE P		
, , , , , , , , , , , , , , , , , , ,		
		,, , ,
The state of the s		
otal Excess Contributions to Schedule A, Part II, Line 5		896,641

Schedule B

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

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. ➤ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Name of the organization

Employer Identification number

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

B	rick by Brick Partners	56-2470061			
Organization type (check	one):				
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation			
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ou			
	501(c)(3) taxable private foundation				
	n is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule. See instructions.			
General Rule					
	on filing Form 990, 990 EZ, or 990 PF that received, during the year, contributor complete Parts I and II. See instructions for determining a	· · · · · · · · · · · · · · · · · · ·			
Special Rules					
sections 509(a)(1 any one contribu	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
year, total contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.				
year, contribution is checked, enter purpose. Don't co	For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year				
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Son Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-Et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

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

Name of organization

Employer identification number

Brick	bу	Brick	k Par	tners

56-2470061

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Leslie Gruss 143 Avenue B New York, NY 10009	\$ <u>22,500.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Ed and Helen Nicoll 303 E Rivo Alto Dr Miami Beach, FL 33139	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Puffin Foundation 20 Puffin Way Teaneck, NJ 07666	\$ 187,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Matrix New World Engineering 26 Columbia Turnpike Florham Park, NJ 07932	\$ 5,000.	Person X Payroll Noncash (Complete Part It for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	South Wind Foundation 685 3rd Avenue New York, NY 10017	s6,000.	Person X Payrolf
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Dorothy Lichtenstein 50 Gin Lane Southampton, NY 11968	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

823452 11-08-18

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

Name of o	rganization		Employer identification number
Brick	by Brick Partners		56-2470061
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
7	Houlihan Lokey 245 Park Avenue New York, NY 10167	\$5,0	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c). Total contribution	(d) Type of contribution
8	Julia Hoagland 297 East 10th Street New York, NY 10009	\$5,0	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
i		 \$	Person Payroll Onnicash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) rs Type of contribution
		*	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
			Person Payroll Noncash

823452 11-08-18

(Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Brick by Brick Partners

56~2470061

	Dy Drzek rurencie	<u></u>	Z-17000I
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		. \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
···		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	**************************************	\$	***************************************

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Employer identification number Name of organization Brick by Brick Partners 56-2470061 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Estat this into once) Use duplicate copies of Part III if additional space is needed. (a) No. from Part i (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift

823454 11-08-18

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

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

Brick by Brick Partners

Employer identification number 56-2470061

Pa	del Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
-2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	<u></u>	
5	Did the organization inform all donors and donor advisors in		
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose confe	erring
	impermissible private benefit?		Yes No
Pa	till Conservation Easements. Complete if the or		V, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or	education) Preservation of a historical	ly important land area
	Protection of natural habitat	Preservation of a certified I	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic st		2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register	<u></u>	2d
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the orga	anization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is focated >	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing conserva	tion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservation e	easements during the year
	\$		
8	Does each conservation easement reported on line 2(d) abo		
	and section 170(h)(4)(B)(ii)?		Yes L No
9	In Part XIII, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the o	rganization's accounting for
1	conservation easements.		
Pa	till Organizations Maintaining Collections of		Similar Assets.
	Complete if the organization answered "Yes" on Form		
ta	If the organization elected, as permitted under SFAS 116 (A)	The state of the s	
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance of	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	•	
b	If the organization elected, as permitted under SFAS 116 (A	· · · · · · · · · · · · · · · · · · ·	
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public s	ervice, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part Vill, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial gair	, provide
	the following amounts required to be reported under SFAS 1		
а	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2018
	1 10-29-18		

832053 10-29-18

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) 2018

Provide the descriptions required for Part II, tines 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:

Brick by Brick is exempt from federal and state income tax under the provisions of Section 501(c)(3) of the Internal Revenue Code; therefore, no provision for income taxes has been made in these financial statements. The Organization has also been classified as an entity that is not a private foundation within the meaning of Section 509(a) and qualifies for deductible contributions as provided in Section 170(b)(1)(A)(vi). Brick by Brick applies the provision of FASB ASC 740, on Income Taxes, which provides standards for establishing and classifying any tax provisions for uncertain tax positions. Tax filing periods ending December 31, 2015 and later are subject to examinations by appropriate tax authorities.

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018	Brick by Brick Par	rtners	56-2470061 Page
Part XIII Supplemental Info	Brick by Brick Par prmation (continued)		
H2. 11 1			
19	,		
		·	
			
•			
WEGSERY		· · · · · · · · · · · · · · · · · · ·	
<u></u>			
,			
		·	
	THE STATE OF THE S		
			•
			 -

832055 10-29-18

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

3ri	ck by Brick	Partners			56-247006	1
				tside the United States. Comple	te if the organization answered 1	res" on
	Form 990, Part IV					
1				ds to substantiate the amount of its gra		v [
	-			the selection criteria used to award the		Yes L No
2	For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and other assistance out	side the
3.	Activities per Region. (T	he following Parl	I, line 3 table c	an be duplicated if additional space is r		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region

	MAAAAA .	The state of the s				
					·	

	Subtotal Total from continuation	0				0.
c	sheets to Part I Totals (add lines 3a and 3b)		0			0.
1.75	For Denorwork Reduct	A		Name 4-4 Farms 2000	Salaadula T	(Form 990) 20:

56-2470061

Brick by Brick Partners

Schedule F (Form 990) 2018

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Page 2

(i) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2018 (h) Description of noncash assistance. (g) Amount of noncash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt cash disbursement (f) Manner of - Auguste and Consideration of the Consideration of of cash grant (e) Amount by the IRS; or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of grant (c) Region Enter total number of other organizations or entities (b) IRS code section and EIN (if applicable) (a) Name of organization

32

56-2470061

Page 3

Brick by Brick Partners

Schedule F (Form 990) 2018 Brick by Brick Partners

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of noncash assistance					
(f) Amount of noncash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region (c)					

Schedule F (Form 990) 2018

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	· Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990).	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Gertain Foreign Corporations (see Instructions for Form 5471)	X Yes	□ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? It. "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No
	Sch	edule F (For	m 990) 2018

832074 10-31-18

Schedule.F	(Form 990) 2018 Brick by Brick Partners	56-2470061	Page 5
Part V	Supplemental Information		
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account	ting method; amounts of	
	investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting meth		}
	(estimated number of recipients), as applicable. Also complete this part to provide any additional infor		
·			
-			
	<u> </u>		
		1 1 11	
			
HARRIE			
		······································	

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 or Form 990-EZ.

Brick by Brick Partners Employer identification number 56-2470061

Part Fundraising Activities required to complete this par	 Complete if the organization answ t. 	ered "Y	es" o	n Form 990, Part IV,	line 17. Form 990-E2	I filers are not
1 Indicate whether the organization rais a	e Solicita f Solicita g Specia or oral agreement with any individua art VII) or entity in connection with p viduals or entities (fundraisers) purs	ation of ition of I fundra Il (includ profess	non-g gover alsing ding o lonal t	overnment grants nment grants events fficers, directors, tru undraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(ili) funds have c or con contrib	Did alser ustody trol of utlans?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vl) Amount paid to (or retained by) organization
		Yes	No			
111779901100						

	44.4					
PROPERTY AND ADMINISTRATION OF THE PROPERTY AND ADM		ļ				
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit		utions	s or has been notified	d it is exempt from re	egistration
1700 1700 1700 1700 1700 1700 1700 1700	, , , , , , , , , , , , , , , , , , , ,			······································		
LHA For Paperwork Reduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. S	Schedule G (Form 9	90 or 990-EZ) 2018

832081 10-03-18

		of fundraising event contributions and	(a) Event #1	(b) Event #2	(c) Other events	1
			(-) //	(5, 243.47.2	None	(d) Total events
			Blues Night		11,0220	(add col. (a) through
ψ			(event type)	(event type)	(total number)	col. (c))
Зечепие	1	Grass receipts	55,032.			55 032
Ä	,	Gross receipts:	` <u> </u>			55,032
	2	Less: Contributions	31,005,			31,005
	3	Gross income (line 1 minus line 2)	24,027.	****		24,027
	4	Cash prizes			·	·
ø	5.	Noncash prizes	455			
esuad	6	Rent/facility costs	3,336.			3,336
Direct Expenses	7	Food and beverages	13,749.		411/2	13,749
ā	8	Entertainment	6,172.			6,172
	9	Other direct expenses				770
	10	Direct expense summary, Add lines 4 throu				24,027
	11					0
5	irt f	III Gaming. Complete if the organization	n answered "Yes" on Forn	n 990, Part IV, line 19, or i	eported more than	1. A
		\$15,000 on Form 990 EZ, line 6a.				
1)			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
			(a) Dingo	bingo/progressive bingo	(c) Other gaining	col. (a) through col. (c
2						
•	1	Gross revenue				
	_	Death actions				
,	4	Uash prizes		i I		
200	2	Cash prizes	,			*******
202137		Noncash prizes			****	
Jueck Experises		·				
Ollect Expelises	3· 4	Noncash prizes Rent/facility costs	•			
2010101	3· 4	Noncash prizes	•	Yes %	☐ Yes %	
Check Lypotheses	3· 4	Noncash prizes Rent/facility costs	:	Yes %	└── Yes%	
מוופרי בילהפו ואפו	3· 4 5	Noncash prizes Rent/facility costs Other direct expenses	Yes%	Yes %	L No	
Ollect Experises	3 4 5 6	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	Yes % No Sh 5 in column (d)	No.	No	
Sasilady Diece Expanses	3 4 5 6	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes % No Sh 5 in column (d)	No.	No	
	3 4 5 6 7	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	Yes % No gh 5 in column (d) 7 from line 1, column (d)	No.	No	
9	3 4 5 6 7 8 Ent	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throu Net gaming income summary. Subtract line ter the state(s) in which the organization con-	Yes % No gh 5 in column (d) 7 from line 1, column (d)	No:	No D	
) a	3 4 5 6 7 8 Ent ls ti	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization continuous organization licensed to conduct gaming	yes% No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities: activities in each of these	No:	No D	
9 a	3 4 5 6 7 8 Ent ls ti	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throu Net gaming income summary. Subtract line ter the state(s) in which the organization con-	yes% No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities: activities in each of these	No:	No D	
b	3 4 5 6 7 8 Ent	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization contine organization ficensed to conduct gaming No. explain:	yes % No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities: activities in each of these	states?	No D	Yes No
9 a b	3 4 5 6 7 8 Ent is ti	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throu Net gaming income summary. Subtract line ter the state(s) in which the organization con he organization licensed to conduct gaming No," explain:	yes% No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities: activities in each of these	states?	No D	Yes No
a b	3 4 5 6 7 8 Ent is ti	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization contine organization ficensed to conduct gaming No." explain: ere any of the organization's gaming licenses Yes," explain:	yes% No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities:activities in each of these	states?	/ear?	Yes No
a b	3 4 5 6 7 8 Ent is ti	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization contine organization ficensed to conduct gaming No." explain: ere any of the organization's gaming licenses Yes," explain:	yes% No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities: activities in each of these	states?	/ear?	Yes No
9 a b	3 4 5 6 7 8 Ent is ti	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization contine organization ficensed to conduct gaming No." explain: ere any of the organization's gaming licenses Yes," explain:	yes% No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities:activities in each of these	states?	/ear?	Yes No
a b	3 4 5 6 7 8 Entilif"! We If "	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization contine organization ficensed to conduct gaming No." explain: ere any of the organization's gaming licenses Yes," explain:	yes% No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities:activities in each of these	states?	/ear?	Yes No

Schedule G (Form 990 or 990 EZ) 2018 Brick by Brick Partners	56~2	2470061	Page 3
11 Does the organization conduct garning activities with nonmembers?		Yes	☐ No
12. Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity form	ied		
to administer charitable gaming?		Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:			
a The organization's facility		13a	%
b An outside facility			%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and		L	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Name >			
Address >			
Total Laboratory of the Control of t			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue	?	Yes	☐ No
The blood of garden of the contract the contract of the contra		•,	
b If "Yes," enter the amount of gaming revenue received by the organization 🕨 💲 and the	amount		
of gaming revenue retained by the third party > \$	unioun		
c If "Yes," enter name and address of the third party:			
Circles, enternance and address or the tillid party.			
Name 🌬			
Name ▶			
Address -			
Address >			
16. Gaming manager information:			
Garning manager information;			
Name >			
Maine			
Suntan and a suntan a			
Gaming manager compensation 🕨 \$			
Description of services provided: >			
			
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		—	F
retain the state gaming license?		L Yes	L No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or s	pent in the		
organization's own exempt activities during the tax year > \$			
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) ar	nd (v); and Pa	art III, lines 9,	9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
<u></u>			

200000 40 00.44	dula C Fam	m 000 000	E71 2046
832083 -10-03:18 Sche	edule G (Forr	n ago ot ago	r-E.L.J ZU 18

Schedule G	(Form 990 or 990-EZ)	Brick by	Brick	Partners		56-	2470061	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Info	rmation (continu	ed)					
active the STGT/II	E-E	, , , , , , , , , , , , , , , , , , , ,	<u></u>					
								
					·····			
						1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		
 								
• • • • • • • • • • • • • • • • • • • •								
	•							
	····							
 								
				·/·				
								 -
							ATTACA NO.	
					-			
				•	· · · · · · · · · · · · · · · · · · ·			

Schedule G (Form 990 or 990-EZ)

SCHEDULE O

(Form 990 or 990-EZ)

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Name of the organization Brick by Brick Partners	Employer Identification number 56-2470061				
Form 990, Part I, Line 1, Description of Organization Mis	sion:				
approaches to business, healthcare and education.					
Form 990, Part VI, Section B, line 11b:					
Form 990 is initially reviewed by the treasurer or other	officers and then				
submitted to the entire board for their review and approv	al prior to being				
filed.					
Form 990, Part VI, Section B, Line 12c:					
The organization enforces the conflict of interest policy	by monitoring				
known relationships, questionnaires, and noting any chang	es in disclosed				
information.					
Form 990, Part VI, Section C, Line 18:					
Brick by Brick's governing documents, conflict of interes	t policy, and				
financial statements are available to the public upon request.					
Form 990, Part VI, Section C, Line 19:					
Brick by Brick makes its Form 1023 and Form 990 available	upon request.				
7					
	<u>.</u>				

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2018

OMB No. 1545-0047

► Attach to Form 990,

Open to Public Inspection

Employer identification number 56-2470061

Direct controlling

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. End-of-year assets 9 Total income ਉ Go to www.irs.gov/Form990 for instructions and the latest information. Part. | Identification of Disregarded Entities, Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) Primary activity Brick by Brick Partners Name, address, and EIN (if applicable) of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service PartII

Schedule R (Form 990) 2018 (g) Section 512(bX13) controlled 운 entity? Yes Direct controlling entity Public charity status (if section 501(c)(3)) Exempt Code section Legal domicile (state or foreign country) Primary activity 3 For Paperwork Reduction Act Notice, see the Instructions for Form 990, Name, address, and EIN of related organization

56-2470061

Page 2

Partille Identification of Related Organizations Taxable as a Partnership, Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Schedule R Form 980 2018 Brick by Brick Partners

	•											
(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or	(d). Direct controlling entity	(e) Predominant income (related, unrelated,		(f) Share of total income	(g) Share of end-of-year	(h) Bisproportonale allocations?			(i) neral or Per haging ow rrier?	(f) (k) General or Percentage mahaging ownership
		foreign country)		sections	512-514)		assets	Yes	No K-1 (Form 1065)		Yes No	
***************************************								ļ				
100 mg (110 mg / 100												
	,											
											$\frac{1}{2}$	
	-4-											

										 .		
								-		 		
				-								
Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the lax year.	ganizations Taxable rporation or trust dur	as a Corpoing the tax	oration or Trust. C year.	omplete if the	e organization	answered "Ye	s" on Form 99	0, Part IV, fin	34, because i	it had one	or more	related
(a)			(p)	(2)	Ē	(e)		€	(6)	3		S
Name, address, and ElN	Z.	Prìm	Primary activity	<u>o</u>	Direct controlling			Share of total	Share of	Percentage		54ction 512(b)(13)
of related organization	<u> </u>			foreign country)	entiry	(C corp, S corp, or trust)		Псоте	end-or-year assets	owners		
Brick by Brick Uganda		Carries o	out	:							res	S S
Masaka-Kyotera Road Kyotera		onstruct	construction business							_		
Bulinda Village Kalisizo Town,	Kampala,	using env	environmentally (Uganda		CCORP				99	99.00	×
				<u>. </u>								
				•								
										-F		
										.		
										- 	_	
						•						

See Part VII for Continuations

832162 10-02-18

Schedule R (Form 990) 2018

56-2470061

Schedule R (Form 990) 2018 Brick by Brick Partners

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

				-	⊢
Note: Complete line 1 frany entity is listed in Parts II, III, or this schedule.	of the state of th	to the second se		Yes	S.
a Recent of filtrateest, fill anouthes filtrovalties or five reaffrom a controlled entity			11.5 64.65 41.14		×
	***************************************	***************************************	Treduction to the contract of	2 ;	
b Girt, grant, or capital contribution to related organization(s)	******************************			2	∢
c Gift, grant, or capital contribution from related organization(s)		-	-	2	×
d Toans or loan quarantees to or for related digenication(s)				7	×
	******		territoria de la companya de la comp	-	-
e Loans or loan guarantees by related organization(s)	*************************		dir dip prominent proprieta esta in prominent de l'ambient de proprieta de la proprieta de la production de la prominent de la proprieta de la production de la	9	∢
f Dividends from related organization(s)				=	×
				_	×
	***************************************			_	: >
h Purchase of assets from related organization(s)	***************************************		**************************************	무	4
i Exchange of assets with related organization(s)				=	×
tion(s)				; =	×
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×
	nization(s)	******************************		=	×
	nization(s)	*************************************	***************************************	. <u>.</u>	×
		***************************************		Ē .	; >
			erra terreprogramment ig torona recommendate personal consequences and a consequence	드	‹ ;
 Sharing of paid employees with related organization(s) 	***************************************			9	×
				- F	×
Deimbergement and he related areasization(s) for economics				+ +	×
neithau sentern para by terated organization (s) for expenses	***************************************	and the same of the first of the same of the same of the same	Ballanahanahan in a dantahan dan asam andar-ipa spesionahan asam palambah anan asam angih mata anahan angi	on the second	1 100
)
Other transfer of cash of property to related organization(s)		je pod bel meda jedo bejeje a da skopan po pada apod bel	demonstration of the second	-	4 3
		***************************************	***************************************	12	∢
2 if the answer to any of the above is "Yes," see the instructions for information on w	the must complete th	information on who must complete this line, including covered	relationships and transaction thresholds.		
(a) Name of related organization	(b) Transportion	(c)	(d) Monthouse for Landscholm for Southern	- Ponyon	
	type (a-s)			79.50	
(1)					
- 1					
(2)					
To the state of th					
(S)					
W					
<u> </u>					
(9)					
832163 10-02-16	43		Schedule	Schedule R (Form 990) 2018	30) 2018

Page 4

Part VI Unrelated Organizations Taxable as a Parthership, Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

age hip			[
(k) ercent iwners	-					
(I) naging cther?	Yes No			 		
Gene 10 man	χes					
(h) (i) (l) (k) (k) Bisprope Code V-UBL General or Percentage bloate amount in box 20 managing ownership	(Form 1065)					
(h) Spropor Norate Xations?	Yes No				.,	
Pis Bis	, ve	 		 	-,, <u>L</u> ,	
(g) Share of end-of-year	assets					
(f) Share of total	Income					
(e) Are all partners set. 501(e)(3) onus.?	Yes No					
9 - 19 - 19 - 19 - 19 - 19 - 19 - 19 -	\$	 		 		
Predominant income particle (cleated, unrelated, cleated, unrelated, excluded from tax under.	sections 512-514					
(c) Legal domicile (state or foreign	counitry)			*		
(b) Primary activity						
(a) (b) (c) (d) (d) (e) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e						

Schedule R (Form 990) 2018 Brick by Brick Partners	56-2470061 Page 5
Part VII Supplemental Information.	· · · · · · · · · · · · · · · · · · ·
Provide additional information for responses to questions on Schedule R. See instructions.	
Part IV, Identification of Related Organizations Taxable	as Corp or Trust:
	<u> </u>
Name and Address of Related Organization:	
Training the Training of the T	
Brick by Brick Uganda	
Masaka-Kyotera Road Kyotera	
THE DESIGN TO THE TOTAL TO THE TOTAL TO THE TOTAL TOTAL TO THE TOTAL TOTAL TO THE TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TO THE TOTAL T	
Bulinda Village Kalisizo Town, Kampala, UGANDA	
Primary Activity: Carries out construction business using	
rimary Activity: Callies out constituction business using	environmentally
friendly techonology	
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
	, , , , , , , , , , , , , , , , , , ,
	·
	· · · · · · · · · · · · · · · · · · ·

Form 8868

(Rev. January 2019)

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.

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

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/e-file-providers/e-file-for-charities-and-non-profits,

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Type or: Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print 56-2470061 Brick by Brick Partners File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date fo filing your return, See 232 7th Street instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. Brooklyn, NY 11215 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1 Application Application Return Return <u>ls F</u>or Is For Code Code Form 990 or Form 990-EZ Form 990-T (corporation) 07 01 Form 990-BL Form 1041 A 08 02 Form 4720 (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-T (trust other than above) Form 8870 12 The Organization • The books are in the care of ▶ 232 7th Street - Brooklyn, NY 11215 Telephone No. ► 347-453-8868 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box November 15, 2019 to file the exempt organization return for I request an automatic 6-month extension of time until

	the organization named above. The extension is for the organization's return for: X calendar year 2018 or tax year beginning, and ending		*·	
2	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period	Final return	n	
За	If this application is for Forms 990 BL, 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made, include any prior year overpayment allowed as a credit.	3b	\$	0
С	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	. \$	O .
	tion: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8968, see I	Form 8453-EO ar	id Form 8879-l	EO for paymen

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

Form 8868 (Rev. 1-2019)

CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to:

NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

2018

Open to Public Inspection

1.General Informat	ion							
For Fiscal Year Beginnin	No. of the last of	yyy) 01/01/	/2018	and Endir	ng (mm/dd/y	yyy) 12/31	/2018	
Check if Applicable:		Organization:			-	<i>,,,,</i> ==, ==,		entification Number (EIN):
Address Change		k by Brick	c Part	ners			56-2	470061
Name Change	Mailing Ad							ion Number:
Initial Filing	232	7th Street	:				40-83-	40
Final Filing	City / Stat			2			Telephone:	
Amended Filing	Brook	klyn, NY	11215	<u> </u>			347 45	3-8868
Reg ID Pending	Website:	Brickbybri	ck.or	g			Email: marcsk	lar@brickbyb
Check your organization' registration category:		only EPTL	only	X DUAL (7A	V & EDTI)	EXEMPT*	Confirm your Reg	istration Category in the
2. Certification		Offiny Control	Of ity	TE DUAL (II	A & CF IL)	EXCIVIF I	Charities Registry	at www.CharitiesNYS.com.
See instructions for certif	ication regu	uirements Improne	ar certifica	tion is a violat	ion of law th	at may be subje	-t to something T	- 10-11-1
two signatories.	Cauon requ	alrements, imprope	ar ceruncai	lion is a violati	on or law ur	at may be subje	ct to penaities.	ne certification requires
We certify under p they ar	enalties of e true, corre	perjury that we rev ect and complete i	iewed this n accordai	report, includ nce with the la	ling all attac aws of the S	hments, and to t tate of New York	he best of our kn applicable to thi	owledge and belief, s report.
		2010 09	6			arc Sklan		1/3/20
President or Authorized Officer: (1/1/100) Executive Director								
Signature Print Name and Title Date								
Benjamin Zukerman								
Chief Financial Officer or Treasurer: Treasurer 1/3/20								
Signature Print Name and Title Date								
3. Annual Reporting Exemption								
Check the exemption(s) t			organizati	ion is claiming	an exempti	on under one ca	tegon/7A or ED	TI caly filora) or both
categories (DUAL filers) the	nat apply to	vour registration.	complete	only parts 1.2	and 3 and	I culting the cert	itiegory (7 A or Li	for cobodules or
additional attachments ar	e required.	If you cannot clair	n an exem	ntion or are a	DIIΔI filert	hat claime only o	and evention w	o tee, schedules, or
additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.								
	p	appinguois						
3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc. did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year.								
C ah EDTI 4	""			: 005 0			8. 2	- 20 -
during the	fiscal year.	tion: Gross receipt	is did not e	exceed \$25,00	00 and the r	narket value of a	ssets did not exc	eed \$25,000 at any time
\$55,545,554 ₽ ×31,945,	nesa jua							
4. Schedules and A	ttachme	nts						
See the following page		16.88						
for a checklist of	Yes	X No 4a, Did v	our organi	zation use a r	rofessional	fund raiser fund	reising counsel	or commercial co-venturer
schedules and		for fund i	raising act	ivity in NY Sta	to? If yes c	omplete Schedu	ila 4a	or commercial co-venturer
attachments to			diog	wity	ic. ii joo, c	omplete coneda	ile va.	
complete your filing.	Yes	X No 4b. Did th	ne organiz	ation receive (government	grants? If yes, o	omplete Schedu	le 4b.
5. Fee								
See the checklist on the	7A filir	ng fee:	EPTL fili	ng fee:	Total fe	0,		
next page to calculate you		ig 100.		rig icc.	Totalio	е.	Make a single	check or money order
fee(s). Indicate fee(s) you							t F	ayable to:
are submitting here:	\$	25.	\$	50.	\$	75.	"Depa	rtment of Law"

CHAR500 Annual Filing for Charitable Organizations (Updated January 2019)

868451 01-15-19 1019

^{*}The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

Brick by Brick Partners

CHAR500

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4: If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants	(PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)						
Check the financial attachments you must submit with your CHAR500: X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Coldisclosure and will not be available for public review.							
Our organization was eligible for and filed an IRS 990 N e-postcard. Our revent filing year. We have included an IRS Form 990 EZ for state purposes only.							
If you are a 7A only or DUAL filer, submit the applicable independent Certified Public X Review Report if you received total revenue and support greater than \$250,00							
Audit Report if you received total revenue and support greater than \$750,000	delid up to \$1.50,000;						
No Review Report or Audit Report is required because total revenue and support is less than \$250,000							
We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required							
Calculate Your Fee							
	Is my Registration Category 7A, EPTL, DUAL or EXEMPT?						
For 7A and DUAL filers, calculate the 7A fee:	Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:						
\$0, if you checked the 7A exemption in Part 3a \$25, if you did not check the 7A exemption in Part 3a	7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law (*7A")						
For EPTL and DUAL filers, calculate the EPTL fee:	EPTL filers are registered under the Estates, Powers & Trusts Law (*EPTL*) because they hold assets and/or conduct activities for charitable purposes in NY.						
\$25, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is less than \$50,000	DUAL filers are registered under both 7A and EPTL.						
X \$50, if the NET WORTH is \$50,000 or more but less than \$250,000 \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000 \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000 \$1500, if the NET WORTH is \$50,000,000 or more.	EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration Exemption for Charitable Organizations. These organizations are not required to file annual financial reports but may do so voluntarily.						
	Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.						
Send Your Filing	Where do I find my organization's NET WORTH?						
Send your CHAR500, all schedules and attachments, and total fee to:	NET WORTH for fee purposes is calculated on:						
NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005	 IRS Form 990 Part I, line 22 IRS Form 990 EZ Part I, line 21 IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)). 						

Need Assistance?

Visit: www.CharitiesNYS.com

Call: (212) 416-8401

Email: Charities.Bureau@ag.ny.gov

868461 01-15-19 1019 CHAR500 Annual Filing for Charitable Organizations (Updated January 2019)

Page 2