Click on the question-mark icons to display help windows.

The information provided will enable you to file a more complete return and reduce the chances the IRS will need to contact you.

Form **990-EZ** 

# Short Form Return of Organization Exempt From Income Tax

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

2019

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form, as it may be made public.
 ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Ā	For the	2019 calend	ar year, or tax year beginning , 2019,	and ending		, 20
В	Check if ap	pplicable:	C Name of organization		D Employe	r identification number
	Address c	change				
	Name cha	ange	E Telephor	ie number		
Н	Initial retu					
H	Final retur Amended	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code		F Group F	
Ħ	Applicatio				Numbe	•
G		ting Method:	Cash	н	Check ►	if the organization is <b>not</b>
	Website	· ·				attach Schedule B
J	Tax-exen	npt status (che	eck only one) — ☐ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) o	or527	(Form 990,	990-EZ, or 990-PF).
			☐ Corporation ☐ Trust ☐ Association ☐ Other			
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or r	more, or if tota	al assets	
(Pa	art II, col	lumn (B)) are \$	S500,000 or more, file Form 990 instead of Form 990-EZ		▶	\$
	Part I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balanc	es (see the	instruction	ns for Part I)
			the organization used Schedule O to respond to any question	•		•
	1		ons, gifts, grants, and similar amounts received			-
	2		ervice revenue including government fees and contracts		2	
	3	_	ip dues and assessments		3	3
	4	Investment	•		4	
	5a	Gross amo	ount from sale of assets other than inventory 5a			
	b		or other basis and sales expenses			
	С		ss) from sale of assets other than inventory (subtract line 5b from li	ine 5a)	5	С
	6		d fundraising events:	,		
	а	Gross inc	ome from gaming (attach Schedule G if greater than			
e			6a			
Revenue	b	Gross inco	me from fundraising events (not including \$ o	f contribution	ns	
ě		from fundr	aising events reported on line 1) (attach Schedule G if the			
_		sum of suc	ch gross income and contributions exceeds \$15,000)   6b			
	С	Less: direc	et expenses from gaming and fundraising events 6c			
	d	Net incom	e or (loss) from gaming and fundraising events (add lines 6a and	d 6b and su	btract	
		line 6c) .			· · 6	d
	7a	Gross sale	s of inventory, less returns and allowances			
	b	Less: cost	of goods sold			
	С	Gross prof	it or (loss) from sales of inventory (subtract line 7b from line 7a) .		7	С
	8	Other reve	nue (describe in Schedule O)		[8	3
	9	Total reve	<b>nue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		. 🕨	)
	10	Grants and	I similar amounts paid (list in Schedule O)		1	0
	11	Benefits pa	aid to or for members		1	1
es	12	Salaries, o	ther compensation, and employee benefits		1	2
Su	13		al fees and other payments to independent contractors			3
Expenses	. 14	Occupanc	y, rent, utilities, and maintenance		1	4
ш	15	Printing, p	ublications, postage, and shipping		1	5
	16	Other expe	enses (describe in Schedule O)		1	6
_	17		enses. Add lines 10 through 16			7
S	18	Excess or	(deficit) for the year (subtract line 17 from line 9)		1	8
set	19		or fund balances at beginning of year (from line 27, column (A))			
Net Assets		end-of-yea	ur figure reported on prior year's return)		1:	9
et	20	Other char	nges in net assets or fund balances (explain in Schedule O)		2	0
Ž	21	Net assets	or fund balances at end of year. Combine lines 18 through 20		<b>&gt;</b> 2	1

Form 990-EZ (2019) Part II Balance Sheets (see the instructions for Part II) Check if the organization used Schedule O to respond to any question in this Part II . . . (A) Beginning of year (B) End of year 22 Cash, savings, and investments 22 23 23 Land and buildings . . . . . . . 24 Other assets (describe in Schedule O) 24 Total assets . . . . . . . 25 25 26 Total liabilities (describe in Schedule O) 26 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 27 Part III Statement of Program Service Accomplishments (see the instructions for Part III) **Expenses** Check if the organization used Schedule O to respond to any question in this Part III (Required for section What is the organization's primary exempt purpose? 501(c)(3) and 501(c)(4) organizations; optional for Describe the organization's program service accomplishments for each of its three largest program services, others.) as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title. 28 ) If this amount includes foreign grants, check here 28a (Grants \$ 29 29a ) If this amount includes foreign grants, check here 30 ) If this amount includes foreign grants, check here 30a Other program services (describe in Schedule O) ) If this amount includes foreign grants, check here 31a 32 List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated – see the instructions for Part IV) Check if the organization used Schedule O to respond to any question in this Part IV (d) Health benefits, (c) Reportable (b) Average compensation contributions to employee (e) Estimated amount of (a) Name and title hours per week (Forms W-2/1099-MISC) benefit plans, and other compensation devoted to position (if not paid, enter -0-) deferred compensation

Form 990-EZ (2019)

Other Information (Note the Schedule A and personal benefit contract statement requirements in the Part V instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V Yes No 33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a 33 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the 34 Did the organization have unrelated business gross income of \$1,000 or more during the year from business 35a 35a If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 35b Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . . . 35c 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . . . . . . . . . . . . . . 36 37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 37b 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . 38a If "Yes," complete Schedule L, Part II, and enter the total amount involved . . . . 39 Section 501(c)(7) organizations. Enter: 39a **b** Gross receipts, included on line 9, for public use of club facilities . . . . . . . Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ► ; section 4955 ► b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disgualified persons during the year under sections 4912. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . . . . . . . . . . . . . ▶ All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter List the states with which a copy of this return is filed ▶ 41 **42a** The organization's books are in care of ▶ Telephone no. ▶ Located at ▶ ZIP + 4 ▶ **b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over Yes No a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? 42c If "Yes," enter the name of the foreign country ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here 43 and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . . Yes No 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be 44a Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be 44b 44c If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an 44d 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . . . . . . . 45a 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," Form 990 and Schedule R may need to be completed instead of 45b

Page 3

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the table 50 and 51.  Check if the organization used Schedule O to respond to any question in this Part VI  47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II  48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  49 Did the organization make any transfers to an exempt non-charitable related organization?  49 If "Yes," was the related organization a section 527 organization?  40 Complete this table for the organization's five highest compensated employees (other than officers, directors, true employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "Oh Average hours per week devoted to position (Forms W-2/1099-MISC)  No employees were hired in fiscal year 2019  If Total number of other employees paid over \$100,000	STATE	s N
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f Total number of other employees paid over \$100,000	None.	
f Total number of other employees paid over \$100,000	nated amo	
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	ation	
ar 2019,		
d Total number of other independent contractors each receiving over \$100,000 ▶		
2 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a		
	- 🗆	
der penalties of perjury. I declare that I have examined this return including accompanies which it is	SUN	lo
, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	nd belief, i	t is
10My Clee	20	
Date		
Tony Rucci, President and CEO		
Type or print name and title		
id Print/Type preparer's name Preparer's signature Date Check if PTIN		
self-employed self-employed		
e Only Firm's name ► Firm's EIN ►		
Firm's address ►		
y the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes	s 🗌 N	0
Form <b>99</b>	Carlotte Control	2010

#### **SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No. 1545-0047 2019

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Par	rt I Reason for Public Char	ity Status (All	organizations must	comple	to this n	art / Caa inatrustia		
							iris.	
	organization is not a private founda		,		-	•		
1	A church, convention of church							
2	A school described in <b>section</b>							
3	A hospital or a cooperative hos		•			, , , , ,		
4	A medical research organizatio	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the	
	hospital's name, city, and state							
5	An organization operated for t section 170(b)(1)(A)(iv). (Comp		college or university	owned c	r operate	ed by a government	al unit describe	d in
6	☐ A federal, state, or local govern	ment or govern	mental unit described	in <b>sectio</b>	on 170(b)	(1)(A)(v).		
7	An organization that normally described in section 170(b)(1)			port from	a gover	nmental unit or fron	n the general pu	ıblic
8	☐ A community trust described in			Part II.)				
9	An agricultural research organi			•	arated in	conjunction with a l	and-grant collec	10
J	or university or a non-land-granuniversity:	nt college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or	
10	An organization that normally receipts from activities related support from gross investment acquired by the organization at	to its exempt fur income and uni	nctions—subject to corelated business taxal	ertain exc ole incom	ceptions, ne (less se	and (2) no more that ection 511 tax) from	n 33¹/3% of its	S
11	An organization organized and	•	•		•	,		
12	☐ An organization organized and	•	•	-			m, aut tha numa	
12	of one or more publicly suppo							
	Check the box in lines 12a thro							
		•	• • • • •		•	•		_
а	_ ,,							ng
	the supported organization					he directors or trust	ees of the	
	supporting organization. Yo	ou must comple	ete Part IV, Sections	A and B	•			
b	_ ;							
	control or management of t				persons	that control or man	age the support	ed
	organization(s). You must of	complete Part I	V, Sections A and C.					
С	<ul> <li>Type III functionally integral</li> </ul>	rated. A support	ting organization oper	ated in c	onnectio	n with, and function	ally integrated w	ith,
	its supported organization(s	s) (see instructio	ns). <b>You must comp</b> l	ete Part	IV, Secti	ons A, D, and E.		
d	☐ Type III non-functionally i	<b>ntegrated.</b> A su	pporting organization	operated	d in conne	ection with its suppo	orted organizatio	n(s)
	that is not functionally integ							
	requirement (see instruction							
е	_ ` `	•	•		-		II Type III	
·	functionally integrated, or T						e ii, Type iii	
		• •			•			
f		•						
g								
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (se	
			above (see instructions))		ment?	instructions)	instructions)	C
			, , , , , , , , , , , , , , , , , , , ,			,		
				Yes	No			
(A)								
(B)								
(0)								
(C)								
(C)								
<b>(D)</b>								
(D)								
(E)								
Tota								

	(Complete only if you checked the Part III. If the organization fails to						alify under
Secti	on A. Public Support	quality unde	טו נווט נטטנט ווכ	sted belevi, p	icase comple	to rait iii.j	
	dar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(3) = 2 + 2	(4)	(4)	(3)	(0)	(7)
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support		# > 0040	( ) 0047	( 1) 00 ( 0	( ) 0040	
	dar year (or fiscal year beginning in)	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the					12	n 501(c)(3)
13	organization, check this box and <b>stop her</b>	e organization		u, tilliu, louitii	, or militiax ye	eai as a sectio	•
Secti	on C. Computation of Public Suppor	t Percentag	e				
14	Public support percentage for 2019 (line 6			1, column (f))		14	%
15	Public support percentage from 2018 Sch	edule A, Part	II, line 14 .			15	%
16a	33 <sup>1</sup> / <sub>3</sub> % support test—2019. If the organization qual	ifies as a publ	licly supported	organization			▶ □
b	33 <sup>1</sup> / <sub>3</sub> % support test—2018. If the organization this box and stop here. The organization						
17a							
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization m supported organization	tion meets th	e "facts-and-o	circumstances' stances" test.	' test, check	this box and	stop here.
18	Private foundation. If the organization did	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

# Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			•	·	,	
Calen	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
h	Amounts included on lines 2 and 3						
b	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Cooti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(a) 2017	(4) 2019	(a) 2010	(f) Total
Galen 9	Amounts from line 6	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
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						
С	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						
14	loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he	•			•	ear as a sectio	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2019 (line 8			13, column (f))		15	%
16	Public support percentage from 2018 Scl	nedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment In					·	
17	Investment income percentage for 2019 (	line 10c, colun	nn (f), divided b	y line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2018					18	%
19a	33¹/3% support tests—2019. If the organ						
	17 is not more than 331/3%, check this box	_	_	-		=	_
b	331/3% support tests—2018. If the organize line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di		_	•	· · · · · · · · · · · · · · · · · · ·	-	

# Part IV Supporting Organizations

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

#### **Section A. All Supporting Organizations**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	3a		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
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 <b>Part VI</b> , 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).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .			
7		6		
,	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).	7		
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).	8		
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 <b>Part VI.</b>	9a		
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 <b>Part VI.</b>	9b		
С	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 <b>Part VI</b> .	9c		
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," appears 10b below.	1.5		
1.	supporting organizations)? If "Yes," answer 10b below.	10a		
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.)	10b		

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	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		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			1
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in Part VI).		struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations				
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). <b>See</b> instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3.	4					
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or						
collection of gross income or for management, conservation, or						
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7					
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1 Aggregate fair market value of all non-exempt-use assets (see						
instructions for short tax year or assets held for part of year):						
a Average monthly value of securities	1a					
<b>b</b> Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other factors (explain in detail in Part VI):						
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d.	3					
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035.	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C-Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1.	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3.	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to						
emergency temporary reduction (see instructions).	6					
7 Check here if the current year is the organization's first as a non-functionall instructions).	y int	egrated Type III supporti	ng organization (see			

Secti	on D-Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	rted		
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	<b>Total annual distributions.</b> Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Part VI	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### **SCHEDULE 0** (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.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

America 250 Foundation, Inc.

Employer identification number 84-2144791

The America 250 Foundation, Inc. ("Foundation") submitted its Form 1023, Application for Recognition of Exemption from Federal Income Tax
on April 9, 2020. ("Form 1023"). Leading up to date that the Foundation filed its Form 1023, it was reviewing the types of organizations that it
may seek to qualify under Section 509(a)(3). This was due, in part, to the complex nature of the entities governed under Section 509(a)(3) of
the Internal Revenue Code, and also, due to ongoing discussions with the U.S. Semiquincentennial Commission to determine if any supporting
relationship would exist between the entities, and in particular, the support provided by the Foundation to the Commission. Notably the
Foundation did not have any expenditures or revenue at any time from the date of its incorporation (June 4, 2019), through the end of its
fiscal year (September 30, 2019). Accordingly, the Foundation did not believe that it would be required to file a Form 990 for its first, short-year
tax period for several reasons, which we have summarized in the following request for abatement of any late filing penalties that the Internal
Revenue Service may elect to assess against the Foundation.
1) The decision to mirror the fiscal year (ending September 30) of the Federal entity (the U.S. Semiquincentennial Commission) was not made
until the Foundation filed IRS Form 1023 on April 9, 2020, applying for nonprofit status - long after the filing deadline of February 15, 2019 (the
15th day of the 5th month after FY2019 ended for the Foundation).
2) Although the Foundation filed its Articles of Incorporation on June 4, 2019, the Board of Directors of the Foundation did not even approve
its Bylaws until December 17, 2019.
3) There were no expenditures or revenues for the Foundation for the four months from June 4, 2019 until the fiscal year ending on
September 30, 2019.
4) Revenues and expenditures began on November 1, 2019, when the Foundation opened its bank account. Before that time, under Public
Law 114-196, the Administrative Secretariat was managing the Federal expenditures of the U.S. Semiquincentennial Commission. It was
after the National Park Service granted permission for the Administrative Secretariat to create the Foundation, that the Foundation got its
EIN, and also filed its Articles of Incorporation (These entire factors were detailed in the supplemental material which accompanied the
successful filing of the IRS Form 1023 application)
5) The Foundation completely is aware of its obligations, specifically the FY 2020 filing deadline of February 15, 2021 (by the 15th day of the
5th month - after our fiscal year ends on September 30, 2020). And this filing will take place in a timely manner after our annual audit, This FY
2020 filing will be on IRS Form 990,. and not this 990 EZ form.
6) The Foundation, which received its IRS determination letter of July 16, 2020 recognizing it as a 501(c)(3) nonprofit entity as well as a Type II
supporting organization under IRS Section 509(a)(3), is now filing its 990EZ form to remain in compliance with the annual filing requirements,
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No. 51056K Schedule O (Form 990 or 990-EZ) (2019)

scriedule O (Form 990 or 990-EZ) (2019)		Page ∠
Name of the organization	Employer identification number	