

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations	224 - ANY OF QUESTIONS 1a-1c CHECKED YES? (Y/N)
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		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting organization to a noncharitable exempt organization of:		
	(i) Cash		
	(ii) Other assets		
b	Other Transactions:		
	(i) Sales of assets to a noncharitable exempt organization		
	(ii) Purchases of assets from a noncharitable exempt organization		
	(iii) Rental of facilities or equipment		
	(iv) Reimbursement arrangements		
	(v) Loans or loan guarantees		
	(vi) Performance of services or membership or fundraising solicitations		
c	Sharing of facilities, equipment, mailing lists or other assets, or paid employees		
d	If the answer to any of the above is "Yes," complete the following schedule. The "Amount involved" column below should always indicate the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, indicate in column (d) the value of the goods, other assets, or services received.		

[illegible]

2a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☐ No **225 (Y/N)**

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Part XVIII Public Inspection

- 1 Enter the date the notice of availability of the annual return appeared in a newspaper ▶
- 2 Enter the name of the newspaper ▶
- 3 Check here ☐ if you have attached a copy of the newspaper notice as required by the instructions. (If the notice is not attached, the return will be considered incomplete.)

Please Sign Here

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

Signature of officer or trustee		Date	Title
Paid Preparer's Use Only	Preparer's signature	Date	Preparer's social security no.
	Firm's name (or yours if self-employed) and address	E.I. No.	ZIP code