Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

187

659954

Department of the Treasury Internal Revenue Service

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

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

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

20 19 2018, and ending JUNE 30 For the 2018 calendar year, or tax year beginning JULY 01 D Employer identification number C Name of organization TOUCHET VALLEY ARTS COUNCIL Check if applicable: 91-1754968 Doing business as THE LIBERTY THEATER Address change E Telephone number Room/suite Number and street (or P.O. box if mail is not delivered to street address) Name change 509-382-1380 O BOX 233 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated 197175 G Gross receipts \$ DAYTON WA 99328 Amended return H(a) is this a group return for subordinates? Yes Vo No Application pending F Name and address of principal officer: H(b) Are all subordinates included? Yes No KRISTINE TAKEMURA, address same as C above If "No," attach a list, (see instructions)) ◀ (insert no.) ☐ 4947(a)(1) or 501(c) (Tax-exempt status: ✓ 501(c)(3) H(c) Group exemption number ▶ www.libertytheater.org Website: ▶ M State of legal domicile: L Year of formation: Form of organization: Corporation Trust Association Part I Briefly describe the organization's mission or most significant activities: The Touchet Valley Arts Council promotes fine arts in the Touchet Valley and surrounding area including, but not limited to, motion pictures, live theater, music, art, and oral interpre-Activities & Governance tation. We present current and classic movies, live community comedy and musical theater, youth theater, and civic events. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 16 Number of voting members of the governing body (Part VI, line 1a) 3 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 150 6 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 7b Net unrelated business taxable income from Form 990-T, line 38 Prior Year **Current Year** 59818 38058 Contributions and grants (Part VIII, line 1h). Revenue 119595 118445 Program service revenue (Part VIII, line 2g) 4015 9156 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 10 10505 15473 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 193933 181132 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 14 48969 58424 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 0 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ b 120008 137221 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 168977 195645 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 24956 (14,513)Revenue less expenses. Subtract line 18 from line 12 19 End of Year Beginning of Current Year 660141 636061

			fund balances.	Subtract line	21 from li	ne 20
Pε	irit II	Signature	Block			***************************************

20

21

Total assets (Part X, line 16)

Total liabilities (Part X, line 26)

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 officer) is based on all information of which preparer has any knowledge.

true, correct, ar	nd complete. Declaration of preparer other the	nari officer) is based on all information of which pre-	parer ride dirij i	1			
Sign Here	Signature of officer MICHAEL Type or print name and title	E. LUCE, TREASUR	ER	Date NOV	1 13, 2019		
Paid	Print/Type preparer's name	Preparer's signature	Date	Check Self-employ			
Preparer Use Only	Firm's name ▶		Firm's EIN ► Phone no.				
	Firm's address ► discuss this return with the prepar	er shown above? (see instructions) .			. Yes No		

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art l	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
	and the superior in the superior is a mission.
1	Briefly describe the organization's mission: The Touchet Valley Arts Council promotes fine arts in the Touchet Valley and surrounding area including, but not limited to, motion The Touchet Valley Arts Council promotes fine arts in the Touchet Valley and surrounding area including, but not limited to, motion
	The Touchet Valley Arts Council promotes line arts in the Touchet Valley and surface and surface arts in the Touchet Valley arts in the Touchet Valley and Surface arts in the Touchet Valley arts in the
	pictures, live theater, music, art, and oral interpretation. We present current and classic movies, art, and oral interpretation.
	and musical theater, youth theater, and civic events.
	the way which were not listed on the
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	The state of the s
^	Did the second conducting of make significant changes at now it sometimes and
3	Did the organization dease conducting, or make significant significance. Yes No
	services?
	If "Yes," describe these changes on Schedule O.
4	If "Yes," describe these changes on schedule of. Describe the organization's program service accomplishments for each of its three largest program services, as measured by Describe the organization's program service accomplishments for each of its three largest program services, as measured by Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grante and allocations
	the total expenses, and revenue, if any, for each program service reported.
	and a control of the
	(Code:) (Expenses \$ 64,303 including grants of \$) (Revenue \$ 31741.75)
4a	(Code:) (Expenses \$ 64,303 including grants or \$ 7.00 (Expenses
	FILM/CINEMA: To make cinema available in this rural area, and at another the theater. The films are selected mainly for
	FILM/CINEMA: To make cinema available in this jurial area, the design of the films are selected mainly for usually a new film each week, 4 days a week, except when live performances take over the theater. The films are selected mainly for usually a new films have special Sepsory-Friendly
	the state of the s
	C. Laiding diversible price showings are part of our Summer Cultural Enrichment Program for Youth Special Program for Yout
	snowings. Substitized very-low price showings are provided may accompany fund-raising events, community events, holidays, and other seasonal activities. Concessions are provided
	at reasonable prices, largely by volunteer staff.
	at reasonable prices, largery by voluntees stem
	(Code:) (Expenses \$ 56,864 including grants of \$) (Revenue \$ 31603.32)
4b	LIVE THEATER PRODUCTIONS: The Productions Group presented several live theater events, produced, directed and
	performed by volunteers from the Touchet Valley and surrounding area. Cast members range from about 5 to 90 years of age,
	performed by volunteers from the Touchet Valley and surrounding area, Cast metable and the Provided entertainment
	and some travel over 30 miles. Cast size occasionally exceeds 60 persons, which fills our tiny stage. This provided entertainment
	for the community, and recreation, education, and comaraderie for participants, as well as experience in teamwork,
	Anathin and the performing arts. Events included a major musical in the Fall, melodrama, and reader's triedler,
	a variety show with song, dance, and other talents. Youth theater experiences included the Missoula Children's Theatre noted below.
	u torror, s
4c	(Code:) (Expenses \$ 29,482 including grants of \$) (Revenue \$ 14819)
40	SPUGATIONAL AND COMMUNITY EVENTS: The organization provided use of the theater for community forums and educational
	EDUCATIONAL AND COMMUNITY EVENTS. THE Organization provided add of the fee is sometimes waived for other community
	events, and occasional private events, throughout the year at a nominal usage fee. The fee is sometimes waived for other community
	The organization also arranged for local artists to display their paintings and sculptures in the treater loop of
	through the year with a recented through the year with a range of VISIUIU
	continuing rotation. A comedy play, workshops, and variety of concerts were presented through the year, which are the
	continuing rotation. A comedy play, workshops, and variety of concerts were presented through the year, with a range of visiting performing artists from western music to jazz to classic string quartet. The Summer Cultural Enrichment Program for youth is a free
	artists from western music to jazz to classic string quartet. The Summer Cultural Enrichment Plogram for yours is a mos-
	performing artists from western music to jazz to classic string quartet. The Summer Cultural Enrichment Program for youth is a rise or low-cost program, largely supported by grants, which included a series of 6 movies, the Missoula Children's Theatre, and
	performing artists from western music to jazz to classic string quartet. The Summer Cultural Enrichment Program for youth is unso or low-cost program, largely supported by grants, which included a series of 6 movies, the Missoula Children's Theatre, and this year also brought a children's story-performer to encourage reading.
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	performing artists from western music to jazz to classic string quartet. The Summer Cultural Enrichment Program for youth is unsured or low-cost program, largely supported by grants, which included a series of 6 movies, the Missoula Children's Theatre, and this year also brought a children's story-performer to encourage reading. Missoula Children's Theatre brings a week-long youth theater workshop and performances involving multiple children
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40	performing artists from western music to jazz to classic string quartet. The Summer Cultural Enrichment Program for youth is the or low-cost program, largely supported by grants, which included a series of 6 movies, the Missoula Children's Theatre, and this year also brought a children's story-performer to encourage reading. Missoula Children's Theatre brings a week-long youth theater workshop and performances involving multiple children ages 6 to 18, at no cost to the participants. Food-and-a-movie events offer Culinary Arts, serving food items keyed to the international or special theme of the movie. Other program services (Describe in Schedule O.)
40	performing artists from western music to jazz to classic string quartet. The Summer Cultural Enrichment Program for youth 15 to 16 movies or low-cost program, largely supported by grants, which included a series of 6 movies, the Missoula Children's Theatre, and this year also brought a children's story-performer to encourage reading. Missoula Children's Theatre brings a week-long youth theater workshop and performances involving multiple children ages 6 to 18, at no cost to the participants. Food-and-a-movie events offer Culinary Arts, serving food items keyed to the international or special theme of the movie. Other program services (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

art I	Checklist of Required Schedules	. 	Yes	No
and the same of	The state of the s			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1	/	
	to complete Schedule B. Schedule of Contributors (see instructions)?	2	✓	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		✓
5	501(-)(4) 501(-)(5) or 501(c)(6) organization that receives membership dues, 1	5		1
	Is the organization a section 501(c)(4), 501(c)(5), 61-301(c)(6) organization as section 501(c)(4), 501(c)(5), 61-301(c)(6) organization as section 501(c)(4), 501(c)(5), 61-301(c)(6) organization as section 501(c)(6), 61-301(c)(6), 61-301(c)(6)			
6	have the right to provide advice on the distribution or investment of amounts in such tunes of accounts in such tunes of a	6		<u>✓</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If res, complete Schedule D. Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		/
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted organization.	10	✓	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
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		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	116		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	**	1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	7		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a		/
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21		1
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		m 99	0 (2018)

Part	Checklist of Required Schedules (continued)		Yes	No
			165	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>✓</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated	23		✓
	employees? If "Yes." complete Schedule J.			. (خستسیبی
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	24a		√
	through 24d and complete Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
b	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
С	to defence any tax-exempt hands?	24c		<u>√</u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u>*</u>
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		√
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		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	00-		√
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		V
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		✓_
С	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule W	29	ļ	-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30 31		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	 	 '
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	000		
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	- 00		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		-	1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	•		. 🗆
		_	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	3		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	- 00000		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	√	
	reportable garning (garnoling) withings to prize without.	Fo	rm 99	0 (2018)

art	Statements Regarding Other IRS Filings and Tax Compliance (continued)		No
		Yes	
2a	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 2a 4	2b ✓	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a	√
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b	,,
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, and the calendar year, did the organization have an interest in, or a signature or other financial account)?	4a	✓
	At any time during the calendar year, and the organization affinancial account in a foreign country (such as a bank account, securities account, or other financial account)?		
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	✓
5a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	✓
b	us "No-" to line So or Shi did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		7
va	arranization policit any contributions that were not tax deductible as charitable contributions?	6a	√
b	If "Yes." did the organization include with every solicitation an express statement that such contributions of	CL	
	aifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a	√ .
	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
С	required to file Form 8282?	7c	✓_
d	If "Yes" indicate the number of Forms 8282 filed during the year		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	V
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h	
, h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	711	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8	
	sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a	
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
а	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	4	
11 .	Section 501(c)(12) organizations. Enter:		
а	Gross income from members or shareholders	1 1	
b	Gross income from other sources (Do not net amounts due or paid to other sources		
4.0	against amounts due or received from them.)	12a	AND SERVICE CONTRACTOR OF SERVICE CONTRACTOR
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	
	Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which		
	the organization is licensed to issue qualified health plans	+	
С	Enter the amount of reserves of hadd	14a	1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14b	
b	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		
15	excess parachute payment(s) during the year?	15	1
	If "Yes." see instructions and file Form 4720, Schedule N.		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	1
	If "Yes," complete Form 4720, Schedule O.	Form 99	0 (2010)
		Form 33	(۲۷٬۱۵) ب

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year. . 1a 16 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 ✓ any other officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint بغراج الغارج وجراها أنجارج والجارج بالمراجة والجراج والموارج المواليون 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., No 10a 10a Did the organization have local chapters, branches, or affiliates? 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 1 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed (none) 17 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) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Upon request ☐ Other (explain in Schedule O) Another's website Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records 20

Michael Luce, PO BOX 233, Dayton WA 99328, 509-382-1380

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

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

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. ither the organization per any related organization compensated any current officer, director, or trustee

Check this box if neither the organization no	r any related	d orga	aniza	atio	n co	ompe	nsa	ted any curren	t officer, director	, or trustee.
Check this box it flotates the organic	T 1			(0)					
and the first of proceedings on the style of free first section	(B)	Positio						(D)	(E)	(F)
(A)	Average	1 00/11 01/1000						Reportable	Reportable	Estimated
Name and Title	hours per							compensation	compensation from related	amount of other
	week (list any		r		-		******	from the	organizations	compensation
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization	(W-2/1099-MISC)	from the organization
	organizations	cto	tion	_	du	yee cc	7	(W-2/1099-MISC)	Janes Janes Sanda	and related
	below dotted line)	T E	al tr		oyee	ğ				organizations
	1	stee	uste			ensa				
			96			ated				
(1) KRISTINE TAKEMURA	10			1					0	0
PRESIDENT; DIRECTOR		 ✓	_	×	-	-	-	<u> </u>	1	
(2) DAVID MOLESH	12	1						ļ		0
VICE PRESIDENT; DIRECTOR		 	_	1	-		\vdash		,	<u> </u>
(3) MICHAEL LUCE	32	,						I tay on years	0	0
TREASURER; DIRECTOR		1		~	-		+		1	
(4) CHERYL SKIFFINGTON	1		1	١,				and the property		0
SECRETARY; DIRECTOR		✓	-	1	-	-	+)	
(5) BEV STARTIN	6								√	0
DIRECTOR		✓	1	-	-	1	+		0	
(6) MARIA (GENIE) CROWE	5		1.							0
DIRECTOR		√	1	1	+	-	1-		0	
(7) FRED CROWE	2								√ (0
DIRECTOR		1 <	-	4	1	4	+		0	<u> </u>
(8) MARY LUCE	38									0
DIRECTOR		/		_	_		-		0	1
(9) JIM KIME	1	_						. Designation		0
DIRECTOR		√	-	1			_		0 9	<u>, </u>
(10) LEAH STOCKTON	6	_					1.			0
DIRECTOR		1		_	+	-	_		0 1	<u>, , , , , , , , , , , , , , , , , , , </u>
(11) ELIZABETH AREBALOS-JAGELSKI	6	4 . ,								0
DIRECTOR		1	_	-	+	-	+		0 4	1
(12) GLEN MENDEL	6		-				1			0
DIRECTOR		1	1	-		-		1	0	<u> </u>
(13) MONTE FULBRIGHT	11	-	-				. .			0
DIRECTOR		1	4_	1	1		+		0	0 0
(14) MIKI FULBRIGHT	11	-	1				1			0
DIRECTOR			1_			1	1		0	ol 0 Form 990 (2018)

Part VII Section A. Officers, Directors, Trusto (A) Name and title	(B) Average hours per week (list any	Position (do not check more than one box, unless person is both ar officer and a director/trustee					ne an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	
(15) DEENA BELL-POTTER	11									
DIRECTOR		1			ļ					0
(16) REGINA WELDERT	11					l				0 0
DIRECTOR		√			-	-		1		
(17) SHARON EATON	22	1								0 0
DIRECTOR (18) NORM PASSMORE	1	•	T		T					
(18) NORM PASSMORE DIRECTOR	<u> </u>	1)	0 0
(19) DONNA TIDMARSH	1									
DIRECTOR		✓					_		0	0 0
(20) GREG SKIFFINGTON	11									0
DIRECTOR	ļ	1	\vdash	-	-	-	\vdash		<u> </u>	<u> </u>
(21)										
(22)		-								
(23)			1		\dagger		T			
		-	+-	-	1	-	+			
(24)		-								
	-	+	-	+	+	1	+			
(25)		7								
1b Sub-total			•				A A A		0 0	0 0
d Total (add lines 1b and 1c). 2 Total number of individuals (including bureportable compensation from the organ	ut not limite	ed to 1	thos	e lis	stec	l abov	/e) \	who received r 0	nore than \$100),000 of Yes No
3 Did the organization list any former of employee on line 1a? If "Yes," complete	Schedule	J tor	sucr	nını	aivi	<i>auai</i>	•			
4 For any individual listed on line 1a, is the organization and related organizations individual	greater t	nan :	5 15€),UC)U ?	H T	es,	complete of	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 4 🗸
 5 Did any person listed on line 1a receive for services rendered to the organization 	or accrue n? If "Yes,"	comp ' <i>com</i>	ensa olete	atio e So	n fr che	om ar dule J	ny u I for	inrelated organ such person	· · · · ·	. 5 √
Section P. Independent Contractors										
Complete this table for your five highest compensation from the organization. Reveal.	t compensi eport comp	ated i ensa	nder tion	for	the	it con caler	trac ndar	year ending v	vith or within th	
(A) Name and business ad	ddress							(B) Description o	f services	(C) Compensation
-0-							-()-		
							\pm			
						.,.	\perp			

Part VIII		Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII									
		Check if Schedule O	contains a resp	onse or note to	(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax			
						function revenue	revenue	under sections 512–514			
s s	1a	Federated campaigns	1a	0							
in t	ь	Membership dues .	1b	0							
2 E	c	Fundraising events .	1c	0							
ar /	d	Related organizations		0	100						
imil imil	е	Government grants (contr	ributions) 1e	0							
tior sr S	f	All other contributions, gift	ts, grants,	haratan <u>artha</u> a							
혈총		and similar amounts not inclu	3	59,818							
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions include		U	59,818						
	<u>h</u>	Total. Add lines 1a-1f	• • • •	Business Code	00/2						
Program Service Revenue	2a	Movie Theater - films		512131	31,742	31,742	. 0	0			
Rev	b	Community Theater - li	ve shows	711110	46,422	46,422	0	. 0			
ice	C	Community Theater - c		711110	32,861	32,861	0	0			
)erv	d	Community Theater - A	ds revenue	711110	7,050	7,050	0	0			
E	е	Community Theater - S	pecial Events	711110	1,520	1,520	0	0			
ogra	f	All other program serv			0	0	0				
<u> </u>	g	Total. Add lines 2a-2f		· · · · · · · · · · · · · · · · · · ·	119,595						
	3	Investment income (b.		4,015	0	0			
		and other similar amou			4,015 0	-		0			
	4	Income from investment	of tax-exempt b	ona proceeus	0	0		0			
	5	Royalties [(i) Real	(ii) Personal	U						
	6a	Gross rents	11,650	310							
	b	Less: rental expenses									
	С	Rental income or (loss)	11650			0	0	11,960			
	d	Net rental income or ((i) Securities	(ii) Other	11,960	U	U	1.1/3			
	7a	Gross amount from sales of assets other than inventory	(I) Securities								
	b	Less: cost or other basis and sales expenses	Camarina da Santa Santa Santa Sa								
	С			0				-			
	d			· · · · •	0) (0	0			
Other Revenue	8a	Gross income from fu events (not including \$ of contributions reported									
20		See Part IV, line 18 .		1,776	j_						
Ě	b	Less: direct expenses	3	3,242	2			(4.400)			
	С			events 🕒	(1,466))	0	(1,466)			
	9a	Gross income from ga See Part IV, line 19		a ()						
	b	Less: direct expenses	3 l	· Landard Company)						
	С				(0	0) <u> </u>			
	10a	returns and allowance	es ;		<u></u>						
	b		sold I	•	0						
	С					0	0	0			
		Miscellaneous F	-pipe :	Business Code		1 1	1 () 0			
	11a			711110	1	1	1				
	b				 						
	C		,	n/a		0	0 (0			
	6				1						
	12	Total revenue. See i		and the second s	193,93		1	10,494			
	1						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Form 990 (2018)			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (B) Program service (A) Total expenses Do not include amounts reported on lines 6b, 7b, Management and general expenses expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . Grants and other assistance to domestic 2 individuals. See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . Benefits paid to or for members 0 0 Compensation of current officers, directors, 5 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) . . . 2242 6726 35872 44840 Other salaries and wages 7 Pension plan accruals and contributions (include 8 0 section 401(k) and 403(b) employer contributions) n 0 0 0 9 206 619 3303 4128 10 Fees for services (non-employees): 11 Management а b Accounting d Professional fundraising services. See Part IV, line 17 0 1098 1098 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column 5 (A) amount, list line 11g expenses on Schedule O.) . . . 95 652 1955 10424 Advertising and promotion 13030 12 343 3434 6867 3090 13 0 n Information technology 14 0 o 0 0 15 Royalties 3399 18126 3399 22658 16 0 0 0 17 Payments of travel or entertainment expenses 18 0 for any federal, state, or local public officials 0 0 0 Conferences, conventions, and meetings . 0 19 0 0 0 0 Interest 20 0 n 0 0 21 1462 23384 4385 29230 Depreciation, depletion, and amortization . 22 0 0 0 0 23 Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 0 0 23753 23753 **Total Film Expense** а 0 0 22741 22741 Total Live Productions Expense b 0 0 9749 9749 **Total Concessions Expense** C 0 0 131 131 Total Special Event expense d 0 (9343)0 (9343)All other expenses MISC; Cap Maint&Repair 6042 12286 150649 Total functional expenses. Add lines 1 through 24e 168977 25 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here 🕨 🗌 following SOP 98-2 (ASC 958-720)

Form 990 (2018)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year Cash-non-interest-bearing Savings and temporary cash investments ol Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. n 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 instructions). Complete Part II of Schedule L Notes and loans receivable, net O Prepaid expenses and deferred charges Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 429057 10c 10b Less: accumulated depreciation Investments—publicly traded securities Investments - other securities. See Part IV, line 11 ... Investments-program-related. See Part IV, line 11. Total assets. Add lines 1 through 15 (must equal line 34) . . Accounts payable and accrued expenses ol Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties . . . 0 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 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 652,346 7,608.55 o 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 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds. Total liabilities and net assets/fund balances . . .

Part XI Reconciliation of Net Assets	
Check if Schedule O contains a response or note to any line in this Part XI	193,933
1 Total revenue (must equal Part VIII. column (A), line 12)	168977
2 Total expenses (must equal Part IX, column (A), line 25)	24956
Poyonus less expenses Subtract line 2 from line 1	634999
A Not assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	634555
5 Net unrealized gains (losses) on investments	0
Denoted convices and use of facilities	0
7 Investment expenses	The state of the s
Prior period adjustments	0
Other changes in net assets or fund balances (explain in Schedule O)	U
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	oroore
33. column (B))	659955
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 ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . If "Yes," check a box below to indicate whether the financial statements for the year were compiled reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?	. 2a ✓ or

SCHEDULE A (Form 990 or 990-EZ)

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.

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

OMB No. 1545-0047

ame of the organization	.,,,,				Employer identification r	lumber
					91-1754	
Beason for Public Charity	Status (All o	rganizations must o	complete	this pa	rt.) See instruction	S
be organization is not a private foundation	n because it is:	: (For lines 1 through `	12, cneck	conty one	OUX.)	
1 A church, convention of churches	, or associatio	n of churches describ	ed in sec	HOII 170	(D)(1)(A)(i).	
2 A school described in section 17	O(b)(1)(A)(ii). (A	Attach Schedule E (Fo	rm 990 o	r 990-EZ	l.)	
a Tata Halland accomprative hoppi	tal convice aras	inization described in	section	1 /U(D)(1)	(A)(III).	ii) Enter the
4 A medical research organization of	operated in cor	njunction with a hospi	tal descri	bed in se	ection 170(b)(1)(A)(ii	ii). Citter tite
beenitatio name city and state:						
5 An organization operated for the section 170(b)(1)(A)(iv). (Comple	te Part II.)					a diat described wi
6 A federal, state, or local government	ent or governn	nental unit described	in sectio	n 170(b)(mental unit or from	the general public
7 An organization that normally recodescribed in section 170(b)(1)(A)	(vi). (Complete	e Part II.)		a govern	mental dint of none	
8 A community trust described in s	ection 170(b)(1)(A)(vi). (Complete P	art II.)		10 144 14	nd grant colloge
 An agricultural research organiza or university or a non-land-grant university: 	college of agric	culture (see instruction	ns). Enter	ule nam	e, city, and state of	and domoge di
	eives: (1) more	than 331/3% of its su	pport fro	m contrib	utions, membership	fees, and gross
receipts from activities related to support from gross investment in acquired by the organization afte	its exempt functions or June 30, 197	elated business taxab 5. See section 509(a)	le incomi (2). (Con	e (less se aplete Pa	ction 511 tax) from the till.)	
11 An organization organized and or	perated exclus	ively to test for public	safety. S	ee sect i	on 509(a)(4).	
19 An organization organized and or	perated exclusi	vely for the benefit of	, to perfo	rm the fu	nctions of, or to can	y out the purposes
of one or more publicly supports	ed organization	ns described in sectio	on 509(a)	(1) or se	ction 509(a)(2). See	section bostalts).
Check the box in lines 12a throug	ih 12d that des	cribes the type of sup	porting of	rganizatio	on and complete line	troinally by giving
a Type I. A supporting organization(s)	ation operated,	, supervised, or contro regularly appoint or el	olled by it ect a ma	s suppor ority of th	ted organization(s), ne directors or truste	ees of the
supporting organization. You	must comple	te Part IV, Sections	A and B.			
h Type II A supporting organiz	ration supervise	ed or controlled in co	nnection	with its s	upported organization	on(s), by having
control or management of the	e supporting or	rganization vested in f	he same	persons	that control or mana	ige the supported
organization(s). You must co	mplete Part IV	V, Sections A and C.				
c Type III functionally integra	ted. A support	ing organization oper	ated in co	onnection	with, and functiona	lly integrated with,
its supported organization(s)	(see instruction	ns). You must compl	ete Part	ıv, secu	ons A, D, and L.	rtod organization(s)
d Type III non-functionally int that is not functionally integra requirement (see instructions	ated. The organ	nization generally mus	st satisfy	a distribu	ition requirement an	d an attentiveness
e						II, Type III
functionally integrated, or Ty	pe III non-func	tionally integrated sup	porting o	organizati	on.	
f Enter the number of supported org	ganizations .	A Company of the Company of the Company				· • L
g Provide the following information a	about the supp	orted organization(s).		igin sakarang lain di Agamatan saka rang		
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))		rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
		· · · · · · · · · · · · · · · · · · ·				
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Sectio	n A. Public Support			43,0046	(4) 2017	(e) 2018	(f) Total			
	ar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2010	(i) TOTAL			
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")									
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3									
	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)									
	Public support. Subtract line 5 from line 4									
	on B. Total Support	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
	lar year (or fiscal year beginning in) Amounts from line 4	(a) 2014	(8) 2010	(0) = 0.5						
	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 torganization, check this box and stop he	he organizatio	ions) n's first, secor	nd, third, fourth	n, or fifth tax y	12 ear as a section	on 501(c)(3)			
Section	on C. Computation of Public Suppo									
14	Dublic support percentage for 2018 (line	6 column (f) c	livided by line	11, column (f))		14	%			
15	Dublic cupport percentage from 2017 Sc	hedule A Part	II line 14			15	%			
16a	231/2% support test—2018. If the ordar	nization did no	L Check the bo	ix on nine 10, a		O 10 10 G. 11.4.	, check this			
	box and stop here. The organization qu	alifies as a pub	licly supported	d organization	60 and line 15	ie 331/2% or n	nore check			
	this box and stop here. The organization qualifies as a publicly supported organization									
	10%-facts-and-circumstances test—2 10% or more, and if the organization mets the Part VI how the organization meets the organization	neets the "fact "facts-and-cir	s-and-circums cumstances" t	est. The organ	nization qualifie	es as a publicly	/ supported			
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiz Explain in Part VI how the organization supported organization	ration meets t meets the "fa	he "facts-and- cts-and-circum	-circumstances nstances" test.	The organizat	this box and tion qualifies a	s a publicly			
18	Private foundation. If the organization of	did not check a	a box on line 13	3, 16a, 16b, 17	a, or 17b, che	ck this box and	i see			
	instructions	يعرفوا أواليه ديوا					· · · • U			

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

(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.)

Section	on A. Public Support				(-n 0017	(e) 2018	(f) Total
Calend	lar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2016	(i) rotas
1 .	Gifts, grants, contributions, and membership fees			47040	38,058	59,818	192,971
	received. (Do not include any "unusual grants.")	31,392	46,384	17319	38,036	39,010	10=101-1
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	104,471	116,671	117714	118,445	119,595	576,896
3	Gross receipts from activities that are not an unrelated trade or business under section 513	4,363	1,153	0	0	o	0
4	Tax revenues levied for the		1		, efficience en alge		
	organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the			0	0	O	0
	organization without charge	140,226	164,208		156,503	179,413	775,383
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3	140,220	104,200	130,000			
/a	received from disqualified persons	0		0	0	0	0
b	Amounts included on lines 2 and 3	<u>~</u>					
U	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	0	0	0	0	0	0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support. (Subtract line 7c from				To a service of the s		775,383
C4:	ine 6.)						773,300
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
Galen 9	Amounts from line 6	140,226			156,503		775,383
10a	Gross income from interest, dividends,	110,220					
	CALOUTE TOTAL TOTA	1		1		t seed to the seed of the seed to the seed of the seed	
	payments received on securities loans, rents, royalties, and income from similar sources.	13,405	16,505	13418	21,301	15975	80,604
		13,405	16,505	13418	21,301	15975	80,604
	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses	13,405	16,505	13418	21,301	15975	
b	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	13,405	C	0	C	0	0
b	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b		C	0	C	0	
b	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	0	C	0	C	0	0
b	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether	0 13,405	16,505	0 13418	21,301	0 15975	0 80,604
b c 11	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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	0	16,505	0 13418	21,301	0 15975	0
b	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income. Do not include gain or	0 13,405	16,505	0 13418	21,301	0 15975	0 80,604
b c 11	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income. Do not include gain or loss from the sale of capital assets	0 13,405	16,505	0 13418	21,301	0 15975 0	0 80,604
b c 11	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income. Do not include gain or	0 13,405	16,505	0 13418	21,301	0 15975 0	0 80,604 0
b c 11	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.)	0 13,405 0 0	16,505 (0	0 13418 0 0	21,301 (1)	0 15975 0 0	0 80,604 0 0 855,987
b c 11	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)	0 13,405 0 0 153,631 he organization	16,505 (0 (180,713 n's first, secon	0 13418 0 0 0 148,451	21,301 ((177,804 n, or fifth tax y	0 15975 0 0 195,388 ear as a section	0 80,604 0 0 855,987 n 501(c)(3)
b 11 12 13	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.)	0 13,405 0 0 153,631 the organizationere	16,505 (0 180,713 n's first, secon	0 13418 0 0 0 148,451	21,301 ((177,804 n, or fifth tax y	0 15975 0 0	0 80,604 0 0 855,987 n 501(c)(3)
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to c 11 12 13 14 Secti 15	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for torganization, check this box and stop he of the support percentage for 2018 (line)	0 13,405 0 153,631 the organizationere ort Percentag 8, column (f), co	16,505 (0 180,713 n's first, secon	0 13418 0 0 0 148,451 nd, third, fourth	21,301 (((177,804 n, or fifth tax y	0 15975 0 0 195,388 ear as a section	0 80,604 0 0 855,987 n 501(c)(3)
b c 11 12 13 14 Section 15 16	royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.)	0 13,405 0 153,631 the organization ere ort Percentag 8, column (f), control of the column (f),	16,505 (0 180,713 n's first, secon e livided by line III, line 15	0 13418 0 0 0 148,451 nd, third, fourth	21,301 (((177,804 n, or fifth tax y	0 15975 0 0 195,388 ear as a sectio	0 80,604 0 0 855,987 in 501(c)(3) ▶ □
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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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.
- 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.)

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Part	V Supporting Organizations (continued)	Yes No
		Tes 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 (b)	11a
	below, the governing body of a supported organization?	11b
b	A family member of a person described in (a) above?	11c
C	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 .	1101
Section	on B. Type I Supporting Organizations	Yes No
	the descriptions have the power to	
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 regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	
	the data arganization's activities. If the organization had more than one supported organization,	
	describe how the powers to appoint and/or remove directors or trustees were anocated among the supported	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
	Did the organization operate for the benefit of any supported organization other than the supported	
2	expeniention(s) that operated supervised or controlled the supporting organization; if res, explain it and	
	VI 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	
	twistops of each of the organization's supported organization(s)? If "No." describe in Part VI now Control	
	or management of the supporting organization was vested in the same persons that controlled of managed	
	the supported organization(s).	11
Secti	ion D. All Type III Supporting Organizations	Yes No
		Tes INO
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	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) open 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 Part VI how	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2
	By reason of the relationship described in (2), did the organization's supported organizations have a	
3	significant voice in the organization's investment policies and in directing the use of the organization's	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	
	supported organizations played in this regard.	3
Sect	ion E. Type III Functionally Integrated Supporting Organizations	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instructions).
а	The organization satisfied the Activities Test. Complete line 2 below.	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	65
С	Describe in Part VI how you supported a government entity.	(see instructions).
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 Part Vi Identity	
	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	2a
	that these activities constituted substantially all of its activities.	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	
	reasons for the organization's position that its supported organization(s) would have engaged in these	
	activities but for the organization's involvement.	2b
_	Parent of Supported Organizations. Answer (a) and (b) below.	
3	Division to the province 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
h	at the state of each	
b	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 1 Check here if the organization satisfied the Integral Part Test as a qualifying	ani	zations st on Nov. 20. 1970 (explai	n in Part VI). See
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	izat	ions must complete Sectio	
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		(D) (C)
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
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	The state of the s	
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10	The second secon	
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		
4 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	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	lly i	ntegrated Type III supportion	ng organization (se

Type III Non-Functionally Integrated 509(a)(3)					
			Current Year		
Amounts paid to supported organizations to accomplish e	xempt purposes				
Amounts paid to perform activity that directly furthers exer	mpt purposes of suppo	rted			
organizations, in excess of income from activity	and the second s				
Administrative expenses paid to accomplish exempt purpo	oses of supported orga	nizations			
Administrative expenses paid to accomplish exempt purposes of supported erganisms Amounts paid to acquire exempt-use assets					
Qualified set-aside amounts (prior IRS approval required)					
Other distributions (describe in Part VI). See instructions.					
Total annual distributions. Add lines 1 through 6.	and the second s				
(provide details in Part VI). See instructions.	n the organization is res	ponsive			
Distributable amount for 2018 from Section C, line 6					
Line 8 amount divided by line 9 amount		FR	l gas		
	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018		
Distributable amount for 2018 from Section C, line 6					
(reasonable cause required—explain in Part VI). See					
From 2015					
From 2016					
5 0047					
Total of lines 3a through e					
Carryover from 2013 not applied (see instructions)					
Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
Distributions for 2018 from					
any. Subtract lines 3g and 4a from line 2. For result					
Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in					
	Amounts paid to supported organizations to accomplish e Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purp Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to whick (provide details in Part VI). See instructions. Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount ion E—Distribution Allocations (see instructions) Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions. Excess distributions carryover, if any, to 2018 From 2013 From 2014 From 2015 From 2016 From 2017 Total of lines 3a through e Applied to underdistributions of prior years Applied to 2018 distributable amount Carryover from 2013 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2018 from Section D, line 7: Applied to underdistributions of prior years Applied to 2018 distributable amount Remaining underdistributions for pears prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2019. Add lines 3j and 4c. Breakdown of line 7: Excess from 2014 Excess from 2014 Excess from 2015 Excess from 2016 Excess from	Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations, in excess paid to accomplish exempt purposes of supported organizations paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is research (provide details in Part VI). See instructions. 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3a, and 3b, F lines 2, 5, an	4 0,7 1100 00.							
Geografia				 			 	

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Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

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

2018

Employer identification number

91-1754968 TOUCHET VALLEY ARTS COUNCIL Organization type (check one): Section: Filers of:) (enter number) organization Form 990 or 990-EZ √ 501(c)(4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

\$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.
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.
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, 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

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% 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)

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Cat. No. 30613X

Employer identification number Name of organization 91-1754968 TOUCHET VALLEY ARTS COUNCIL

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. \square Person Blue Mountain Community Foundation 1 Payroll Noncash 13,355 22 E Poplar St #206 (Complete Part II for noncash contributions.) Walla Walla, WA 99362 (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. Person \square Wildhorse Foundation 2 П Payroll Noncash 7,612 46510 Wildhorse Blvd (Complete Part II for noncash contributions.) Pendleton, OR 97801 (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. Person \square 3 Michael & Cathy Haight П Payroll Noncash 5000 Dayton, WA (Complete Part II for noncash contributions.) (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. Person $\sqrt{}$ 4 Dorothy Mead Payroll Noncash 5000 Dayton, WA (Complete Part II for noncash contributions.) (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. ☑ Person 5 Skip & Julia Mead Payroll Noncash 5000 (Complete Part II for noncash contributions.) (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. Person \Box Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number 91-1754968

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Palcul	Notices in Property (See institutional). See supment of		
(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 91-1754968 TOUCHET VALLEY ARTS COUNCIL 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. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed. (d) Description of how gift is held (a) No. (c) Use of gift (b) Purpose of gift from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (d) Description of how gift is held (a) No. (c) Use of gift (b) Purpose of gift from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (d) Description of how gift is held (c) Use of gift (b) Purpose of gift from

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule B (Form 990, 990-EZ, or 990-PF), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/Form990.

Note: Terms in **bold** are defined in the Glossary of the Instructions for Form 990.

What's New

For tax years ending on or after December 31, 2018, certain tax-exempt organizations are no longer required to report the names and addresses of their contributors on Schedule B (Form 990 or 990-EZ). However, these organizations must continue to keep this information in their books and records. Organizations described in section 501(c)(3) and section 527 are still required to report the names and addresses of their contributors on Schedule B. See Rev. Proc. 2018-38, 2018-31 I.R.B. 280, and General Rule, below.

Purpose of Schedule

Schedule B (Form 990, 990-EZ, or 990-PF) is used to provide information on contributions the organization reported on:

- Form 990, Return of Organization Exempt From Income Tax, Part VIII, Statement of Revenue, line 1;
- Form 990-EZ, Short Form Return of Organization Exempt From Income Tax, Part I, line 1; or
- Form 990-PF, Return of Private Foundation, Part I, line 1.

Who Must File

Every organization must complete and attach Schedule B to its Form 990, 990-EZ, or 990-PF, unless it certifies that it doesn't meet the filing requirements of this schedule by:

- Answering "No" on Form 990, Part IV, Checklist of Required Schedules, line 2; or
- · Checking the box on:
 - Form 990-EZ, line H; or
 - Form 990-PF, Part I, Analysis of Revenue and Expenses, line 2.

See the separate instructions for these lines on those forms.

If an organization isn't required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Accounting Method

When completing Schedule B (Form 990, 990-EZ, or 990-PF), the organization must use the same accounting method it checked on Form 990, Part XII, Financial Statements and Reporting, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

Public Inspection

Note: Don't include social security numbers of contributors as this information may be made public.

- Schedule B is open to public inspection for an organization that files Form 990-PF.
- Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ.
- For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors aren't required to be made available for public inspection. All other information, including the amount of contributions, the description of noncash contributions, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it shouldn't include its Schedule B (Form 990, 990-EZ, or 990-PF) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that don't require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

Contributions To Be Included on Part I

A contributor (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report governmental units as contributors.

Contributions

Contributions reportable on Schedule B (Form 990, 990-EZ, or 990-PF) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions don't include fees for the performance of services. See the instructions for Form 990, Part VIII, line 1, for more detailed information on contributions.

General Rule

Unless the organization is covered by one of the Special Rules, later, it must report in Part I contributions from all persons who contribute \$5,000 or more (in money or other property) during the tax year. As described below, certain organizations report only total contribution amounts. Contributions may be made directly or indirectly and may take the form of money, securities, or any other type of property.

Include all separate and independent gifts that are \$1,000 or more to determine a contributor's total contribution. Gifts that are less than \$1,000 may be disregarded. Include each contribution reported on Form 990, Part VIII, line 1. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property in Part VIII, line 1, it must include the value of that contribution in calculating whether the contributor meets the General Rule (or one of the Special Rules, if applicable), even if the organization didn't receive the property during the tax year.

Certain organizations not required to report contributor names and addresses. Certain organizations are no longer required to report the names and addresses of their contributors on Schedule B. Such organizations are those other than:

- Section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and nonexempt private foundations described in section 6033(d)), or
- Section 527 political organizations.
 Organizations not required to report the

Organizations not required to report the names and addresses should enter "N/A" in Part I, column (b). These organizations must continue to:

- Collect the names and addresses of their contributors,
- Keep this information in their records and books, and
- Make the information available to the IRS upon request.

Section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and nonexempt private foundations described in section 6033(d)), and section 527 political organizations must continue to report the names and addresses of their contributors in Part I, column (b), on Schedule B.

Special Rules

Section 501(c)(3) organizations that file Form 990 or 990-EZ. For an organization described in section 501(c)(3) that meets the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)), list in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h(A); or Form 990-EZ line 1. An organization that claims the benefit of this special rule must either (1) establish on Schedule A (Form 990 or 990-EZ), Part II, that it met the 331/3% support test for the current year or prior year; or (2) check the box on Schedule A (Form 990 or 990-EZ). Part I, line 7 or 8, and the box on Schedule A, Part II, line 13, as a section 170(b)(1)(A)(vi) organization in its first 5 years.

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who

contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during the tax year. Thus, a contributor who gave a total of \$11,000 wouldn't be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it didn't exceed \$14,000.

Section 501(c)(7), (8), or (10)

organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that weren't for an exclusively religious, charitable, etc., purpose, list in Part I contributions from each contributor who contributed \$5,000 or more during the tax year, as described under *General Rule*, earlier.

For contributions to a section 501(c)(7), (8), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (section 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I contributions from each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

All section 501(c)(7), (8), or (10) organizations listing contributions under this special rule should enter "N/A" in Part I, column (b), and should not enter the name and address of any contributor.

However, if a section 501(c)(7), (8), or (10) organization didn't receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently wasn't required to complete Parts I through III with respect to these contributions, it need only check the third *Special Rules* box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

Specific Instructions



Don't attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II, and III of

Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part (for example, Page 2 of 5, Part II).

Part I. In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number consecutively. In column (b), section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and section 501(c)(3) nonexempt private foundations) and section 527 organizations enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization doesn't know the donor's identity. Other organizations enter "N/A" in place of each contributor's name, address, and ZIP code. In column (c), enter the amount of total contributions for the tax year for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a cash contribution came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an **employee's** cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address or "N/A," as applicable, and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "Noncash" box in column (d) for any contribution of property other than cash during the tax year, and complete Part II of this schedule. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property on Form 990, Part VIII, line 1g, it must check the "Noncash" box and complete Part II even if the organization didn't receive the property during the tax year.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that aren't reported on Form 8872, Political Organization Report of Contributions and Expenditures, don't need to be reported in Part I if the organization paid the amount specified by section 527(j)(1). In this case, enter "Pd. 527(j)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. In column (b), describe the **noncash contribution** received by the organization during the tax year, regardless of the value of that noncash contribution. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, market quotations for securities) by listing its **fair market value (FMV)**. If the organization immediately sells **securities** contributed to the organization (including through a broker or agent), the contribution still must be reported as a gift of property (rather than cash) in the amount of the net

proceeds plus the broker's fees and expenses. See the instructions for Form 990, Part VIII, line 1g, which provide an example to illustrate this point. If the property isn't immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When FMV can't be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization, but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any qualified conservation contributions and contributions of conservation easements listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, Statement of Revenue.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 8283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

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.

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

Employer identification number

Name of the organization 91-1754968 TOUCHET VALLEY ARTS COUNCIL Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor 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 Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X .

Part	Organizations Maintaining	Collections of A	rt, Historical Tı	reasures,	or Oth	er Similar Asse	oificent	บเกน	of ite
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and oth	er records, check	any of the	TOHOW	ing that are a sign	inicant	use C	סוו וע
а	Public exhibition		d 🗌 Loan o	or exchange	progra	ams			
b	Scholarly research		e 🗌 Other						•
C	Provide a description of the organizations	on's collections ar	nd explain how th	ey further t	he orga	anization's exemp	t purpo	se in	Part
4	VIII								
-	During the year did the organization	solicit or receive d	lonations of art, h	nistorical tre	asures	, or other similar			
5	assets to be sold to raise funds rather	than to be maintain	ned as part of the	organizatio	n's col	lection?	☐ Ye	s 🗌	No
Part	TVM Francisco Arra	ngements							
and the	Complete if the organization	answered "Yes"	on Form 990, F	art IV, line	9, or r	eported an amo	unt on	Forn	n
	000 Part V line 01								
1a	Is the organization an agent, trustee.	custodian or othe	er intermediary fo	r contributi	ons or	other assets not			
10	included on Form 990, Part X?		i de partire de la secono				☐ Ye	s _	No
h	If "Yes," explain the arrangement in Pa	ort XIII and comple	te the following ta	able:					
b	II 165, explain the arrangement are	aryan cana campia				Am	ount		
	Designing balance				1c				
C	Beginning balance				1d				
d	Distributions during the year				1e				
e	Fading halanna				1f				
f	Did the organization include an amour	ot on Form 990. Pa	rt X line 21, for e	scrow or cu	stodial	account liability?	☐ Ye	s [] No
2a	If "Yes," explain the arrangement in Pa	art XIII Check here	if the explanation	n has been i	provide	ed on Part XIII .]
		art Am. Oncor nore	A LINE SAPIGNATION		L,				
Par	Complete if the organization	answered "Ves"	on Form 990. F	Part IV. line	10.				
	Complete it the organization	(a) Current year	(b) Prior year	(c) Two years	s back	(d) Three years back	(e) Four	years	back
		112429	105461		100684	0			
1a	Beginning of year balance	112429	103401		0	100000			
b	Contributions	U							
С	Net investment earnings, gains, and	2000	9745		13,939	1353			
	losses	2996	8245		13,333	0			
d	Grants or scholarships	0	0			`		4,	
е	Other expenditures for facilities and				7,916	C			
	programs	17000	0		1246				
f	Administrative expenses	1098	1277		105461	100684			
g	End of year balance	97327	112429	1		Commence of the contract of th	1		
2	Provide the estimated percentage of t	ne current year en		j, Columni (a	jj Hola i	μο.			
а	Board designated or quasi-endowmer		<u>0</u> %						
b	Permanent endowment	0%							
C	Temporarily restricted endowment	0%	000/						
	The percentages on lines 2a, 2b, and	2c should equal 1	UU%.	et ere hold	and ad	ministered for the	S		
3a	Are there endowment funds not in th	e possession of th	ie organization tii	at ale lielu	and ad	THIRD COLOG TO LIVE		Yes	No
	organization by:						3a(i)		1
	(i) unrelated organizations				* * *		3a(ii)		}
	(ii) related organizations						3b		
b	If "Yes" on line 3a(ii), are the related of	rganizations listed	as required on S	cnedule K?			<u> </u>	<u> </u>	<u> </u>
4	Describe in Part XIII the intended use		on's endowment i	unas.					
Par	t VI Land, Buildings, and Equip	oment.		D = 4 11 / 15 m.	. 11.	Soo Form 990	Part X	line	10
	Complete if the organization			Part IV, Ilne	e i ia.	See Form 330,	(d) Bo	ak valu	10.
	Description of property	(a) Cost or ot (investm		or other basis other)		Accumulated epreciation	(u) DO:	JK Valu	
		(IIIVESUI)	City (19120
1a	Land	•		19120		220540			19120
b	Buildings	•		643975		220516			1 <u>2343</u> 3
c	Leasehold improvements			0		101405			
d	Equipment	•		108273	<u> </u>	101495	week and the second		6778
<u>e</u>	Other	·		(7) (- 1)	3-1	0			149357
Total	. Add lines 1a through 1e. (Column (d) r	must equal Form 9	90, Part X, colum	n (B), line 10	JU.) .	<u>. , > </u>		4	*******

			(b) Book value		990, Part X, line 12.
	(a) Description of security or cate (including name of security)	gory	(D) Dook valeo	Cost or end-	of-year market value
I) Financia	I derivatives				
2) Closely-	held equity interests				- The state of the
(B)					
(C)					
(D)		*****			
(E) (F)					
(G)					
(H)	**************************************				
	(b) must equal Form 990, Part X, col. (B) line 12.)	>			
Part VIII	Investmente Drogram Pals	ntad hate		- 11- Coo Form	000 Part V line 13
	Complete if the organization a	answered "Yes" on For	m 990, Part IV, III	ne 11c. See Follin	thod of valuation:
	(a) Description of investmen	nt	(b) Book value	Cost or end	-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6) (7)	and the state of t				
(8)					
(9)					
Total. (Column	ı (b) must equal Form 990, Part X, col. (B) line 13.) >			
Part IX	Other Assets.			a a si o o a a maion	000 Bort V line 15
Part IX	Other Assets. Complete if the organization	answered "Yes" on Fo	rm 990, Part IV, li	ne 11d. See Forn	990, Part X, line 15.
Part IX	Other Assets. Complete if the organization	answered "Yes" on Fo	rm 990, Part IV, lii	ne 11d. See Form	990, Part X, line 15. (b) Book value
(1)	Other Assets. Complete if the organization	answered "Yes" on Fo	rm 990, Part IV, li	ne 11d. See Form	990, Part X, line 15. (b) Book value
(1)	Other Assets. Complete if the organization	answered "Yes" on Fo (a) Description	rm 990, Part IV, li	ne 11d. See Form	n 990, Part X, line 15. (b) Book value
(1) (2) (3)	Other Assets. Complete if the organization	answered "Yes" on Fo (a) Description	rm 990, Part IV, li	ne 11d. See Form	990, Part X, line 15. (b) Book value
(1) (2) (3) (4)	Other Assets. Complete if the organization	answered "Yes" on Fo (a) Description	rm 990, Part IV, li	ne 11d. See Form	990, Part X, line 15. (b) Book value
(1) (2) (3) (4) (5)	Other Assets. Complete if the organization	answered "Yes" on Fo (a) Description	rm 990, Part IV, li	ne 11d. See Form	990, Part X, line 15.
(1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization	answered "Yes" on Fo (a) Description	rm 990, Part IV, li	ne 11d. See Form	n 990, Part X, line 15.
(1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization	answered "Yes" on Fo (a) Description	rm 990, Part IV, lii	ne 11d. See Form	n 990, Part X, line 15.
(1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization	answered "Yes" on Fo	rm 990, Part IV, li	ne 11d. See Form	n 990, Part X, line 15.
(1) (2) (3) (4) (5) (6) (7) (8)	Complete if the organization	(a) Description			990, Part X, line 15. (b) Book value
(1) (2) (3) (4) (5) (6) (7) (8)	Complete if the organization Lumn (b) must equal Form 990, Part	(a) Description X, col. (B) line 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co	Complete if the organization Lumn (b) must equal Form 990, Part	(a) Description X, col. (B) line 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co	Complete if the organization	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X	lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25.	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X 1. (1) Federa (2) (3)	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) BOOK Value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X 1. (1) Federa (2) (3) (4)	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) BOOK Value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X 1. (1) Federa (2) (3) (4) (5)	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) BOOK Value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X 1. (1) Federa (2) (3) (4) (5) (6)	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) BOOK Value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X 1. (1) Federa (2) (3) (4) (5) (6) (7)	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) BOOK Value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8)	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) BOOK Value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Co Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization lumn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	(a) Description X, col. (B) line 15.) answered "Yes" on Fo			(b) BOOK Value

Part X	Reconciliation of Revenue per Audited Financial Stateme	nts V	ith Revenue per	Return.
	Complete if the organization answered "Yes" on Form 990, F	an IV	, line 12a.	
1 T	otal revenue, gains, and other support per audited financial statements			1
2 A	mounts included on line 1 but not on Form 990, Part VIII, line 12:			
a N	let unrealized gains (losses) on investments	2a		
b D	Conated services and use of facilities	2b		
сЕ	Recoveries of prior year grants	2c		
d C	Other (Describe in Part XIII.)	2d		
e A	odd lines 2a through 2d			2e
3 S	Subtract line 2e from line 1			3
4 A	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a l	nvestment expenses not included on Form 990, Part VIII, line 7b	4a		
b C	Other (Describe in Part XIII.)	4b		
~ /	Add lines 4a and 4h			4c
5 T	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5 Deturn
Part X	Reconciliation of Expenses per Audited Financial Statem	ents	With Expenses pe	er Heturn.
	Complete if the organization answered "Yes" on Form 990, I	art I	/, line 12a.	april 1904 programme and the state
1 7	Total expenses and losses per audited financial statements	• •		1
2 /	Amounts included on line 1 but not on Form 990, Part IX, line 25:	. 1		
	Donated services and use of facilities	2a		
ь	Prior year adjustments	2b		
c (Other losses	2c		
d (Other (Describe in Part XIII.)	2d		
е/	Add lines 2a through 2d			2e 3
3 8	Subtract line 2e from line 1	1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
al	investment expenses not included on Form 990, Part VIII, line 7b			
ь (Other (Describe in Part XIII.)	4b		4c
C /	Add lines 4a and 4b	- 401		5
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 10.j		
Part X	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d'A D	art IV lines 1h and 2	b: Part V. line 4; Part X, line
Provide	the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	ovide anv additional i	nformation.
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete the part		acorustivo growth yeh	icle to maintain funds for th
PART V	, line 4 - quasi-endowment - Board designated Long Term Maintenance Fund	- a co	iservative growth von	
		inmc		
organiz	ation's long-term maintenance and replacement schedule for facilities and ec	fribing	::	
		anair a	of the Marguee and hu	ilding facade.
PART V	, line 1e - 17,000 was withdrawn in FY2019 to help cover the cost of a major r	ehan c	A the marquee and be	

أوللونديد				

Schedule D (Fo	rm 990) 2018 Supplemental Information (continued)
Part XIII	Supplemental Information (Continued)

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 2019 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization 91-1754968 TOUCHET VALLEY ARTS COUNCIL

FORM 990, PART VI, LINE 1A - GOVERNING BODY AND MANAGEMENT - EXECUTIVE COMMITTEE: An Executive Committee consisting of
the President, Vice President, Treasurer, Secretary, Immediate Past-President, and at least one other knowledgeable and committed board
member (in FY2019 the "historian" who is also a past president; and also the past treasurer) is authorized to make facility and financial
decisions that are needed between regular monthly Board meetings, and also is responsible for hiring, supervising, assisting and evaluating
the Theater Manager, and deals with other urgent matters that may arise, or with sensitive matters, such as personnel, that
should be done in executive session.
FORM 990, PART VI, LINE 2- BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC: Cheryl and Greg Skiffington, Genie
and Fred Crowe, Mary and Michael Luce and Miki and Monte and Fulbright are married couples. Four Directors are also elected Officers.
No Officers or Directors receive any compensation from the organization. No Board members have business dealings with the organization.
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY: A new board member (Director) is elected
by current Board of Directors, at a regular meeting and requiring 60% approval, upon recommendation by a Board Member, and the
candidate expressing an interest in participating in Board activities, and if a vacancy exists on the Board. Board Director terms are 2 years,
and there are no term limits for Board membership. Officers serve a term of 2 years and are limited to only 2 consecutive terms.
FORM 990, PART VI, LINE 11 B - FORM 990 REVIEW PROCESS: The Form 990 is prepared by the Treasurer (or in some years by a preparer
under the Treasurer's supervision), and reviewed and approved by a standing Finance Committee prior to filing. A copy of the completed
Form 990 is also provided to each member of the Board of Directors before filing, and reviewed at a regular meeting. The final Form
990 is available to the public.
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS:
The organization's Conflict of Interest Policy is reviewed and monitored by the Board Of Directors. Each Board member is asked to
submit a new Conflict of Interest Form annually. If any conflict arises, it is reviewed at the upcoming Board Of Directors meeting.
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT: The President of the Board
Of Directors directly supervises top management (the Theater Manager), and the Executive Committee determines salary based on duties,
and comparable to our area, and within our budget. The Theater Manager's salary and benefits are reviewed annually by the Executive Com-
mittee according to merit (performance review). Salary and benefits are also changed when needed to conform to legislative requirements.
These actions and reviews are documented contemporaneously in the minutes of that Board or Executive Committee meeting.

Employer identification number

Name of the	organization				Employer identification number
TOUCHET	VALLEY ARTS COUNCIL				91-1754968
FORM 990	, PART VI, LINE 15B - COM	PENSATION REVI	EW & APPROVAL P	ROCESS - OFFICERS & KE	Y EMPLOYEES:
The Office	s of this organization rece	eive no financial co	mpensation. There	are no Key Employees as o	defined by income in Form 990
Instruction					
					e organization's policies, Form 990, and
other publ	c documents are made av	ailable to the publi	c upon request thro	igh the organization's adm	inistrative office.
W. W	Part VII, - COMPENSATIO				
					include both their hours served in
					inistration, maintenance and repair.
FORM 990	, PART IX, Line 14 Informa	tion Technology is	not accounted sepa	rately, but is included in E	quipment, Supplies and Utilities.
				(liability) and Occupancy (
SCHEDUL	E D, PART VI, Basis is list	ed consistent with	prior Forms 990, and	l Quickbooks; Buildings at	nd Improvements are reported
together.					
FORM 990	, Part VI, Section B, Lines	13 and 14 - As of 1	0/21/2019, the Board	has adopted a written Wh	istleblower Policy, and a Document
	ent Policy which includes				
					y support has remained excellent, and a
				erve, was very successful	
					vent to create an Endowment was also
successfi	II. The Endowment was c	reated at Blue Mou	ntain Community Fo	undation and will be a sou	rce of operating revenue in the future.

			***********		<u> 1900, ja linga tingga sa kabangan di kabanga sa kabanga</u> Bingga tingga sa kabangan jagun sa kabanga sa kaban

# * * * * * * * * * * * * * * * * *				<u>aa iya Iroseed ida ya Illayaa ta aasiisa.</u> Ta'a gaayaa aaya ta aa aa aa sii aayaa	
				<u> 11. oly 11. oly 11. oly 12. oly 11. o</u>	

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule O (Form 990 or 990-EZ), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/Form990.

Purpose of Schedule

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Don't use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization isn't required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Specific Instructions

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return isn't filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time. Don't use this schedule to provide the late-filing statement.

Amended return. If the organization checked the Amended return box on Form 990, Heading, item B, or Form 990-EZ, Heading, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a), but "No" to line H(b), use a separate

attachment to list the name, address, and EIN of each affiliated organization included in the group return. **Don't use** this schedule. See the instructions for Form 990, *I. Group Return*.

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

- 1. Part III, Statement of Program Service Accomplishments.
 - a. "Yes" response to line 2.
 - b. "Yes" response to line 3.
 - c. Other program services on line 4d.
- 2. Part V, Statements Regarding Other IRS Filings and Tax Compliance.
 - a. "No" response to line 3b.
 - b. "Yes" or "No" response to line 13a.
 - c. "No" response to line 14b.
- 3. Part VI, Governance, Management, and Disclosure.
- a. Material differences in voting rights among members of the governing body in line 1a
- b. Delegation of governing board's authority to executive committee in line 1a.
- c. "Yes" responses to lines 2 through 7b.
- d. "No" responses to lines 8a, 8b, and 10b.
 - e. "Yes" response to line 9.
- f. Description of process for review of Form 990, if any, in response to line 11b.
 - g. "Yes" response to line 12c.
- h. Description of process for determining **compensation**, in response to lines 15a and 15b.
- i. If applicable, in response to line 18, an explanation as to why the organization checked the *Other* box or didn't make any of Forms 1023, 1024, 1024-A, 990, or 990-T publicly available.
- j. Description of public disclosure of documents, in response to line 19.
- 4. Part VII, Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors.
- a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.
- b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).
- 5. Explanation for Part IX, Statement of Functional Expenses, line 11g (other fees

for services), including the type and amount of each expense included in line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

- 6. Explanation for Part IX, Statement of Functional Expenses, line 24e (all other expenses), including the type and amount of each expense included in line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).
- 7. Part XI, Reconciliation of Net Assets. Explain any other changes in net assets or fund balances reported on line 9.
- 8. Part XII, Financial Statements and Reporting.
- a. Change in accounting method or description of other accounting method used on line 1.
- b. Change in committee oversight review from prior year on line 2c.
 - c. "No" response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions.

- 1. Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.
- a. Description of other revenue, in response to line 8.
- b. List of grants and similar amounts paid, in response to line 10.
- c. Description of other expenses, in response to line 16.
- d. Explanation of other changes in net assets or fund balances, in response to line 20.
 - 2. Part II, Balance Sheets.
- a. Description of other assets, in response to line 24.
- b. Description of total liabilities, in response to line 26.
- 3. Description of other program services, in response to Part III, Statement of Program Service Accomplishments, line 31.
 - 4. Part V. Other Information.
 - a. "Yes" response to line 33.
 - b. "Yes" response to line 34.
- c. Explanation of why organization didn't report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.
 - d. "No" response to line 44d.

Other. Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Don't include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this schedule will be made available