## Form 990 - Return of Organization Exempt From Income Tax

**Department of the Treasury**

**Internal Revenue Service**

**Form 990**

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

**Check if applicable:**

- 3
- Other

**6**

**Check if End of Year**

**Association**

**7b**

- Yes
- No

**501(c)(3)**

**Yes**

**No**

**Signature Block**

**Date**

11/13/2019

**Paid Preparer Use Only**

**Self-Prepared**

**For Paperwork Reduction Act Notice, see the separate instructions.**

### Part I - Summary

<table>
<thead>
<tr>
<th>Activities &amp; Governance</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name and address of principal officer:</strong></td>
<td>NOEL POYO, 5404 WURZBACH RD, SAN ANTONIO, TX 78238</td>
<td></td>
</tr>
<tr>
<td><strong>Phone no.</strong></td>
<td>(210) 227-1010</td>
<td></td>
</tr>
<tr>
<td><strong>PTIN</strong></td>
<td>20-0774672</td>
<td></td>
</tr>
<tr>
<td><strong>Website:</strong></td>
<td><a href="http://WWW.NALCAB.ORG">WWW.NALCAB.ORG</a></td>
<td></td>
</tr>
</tbody>
</table>

**Briefly describe the organization’s mission or most significant activities:**

NALCAB strengthens the economy by advancing economic mobility in Latino communities.

**Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.**

**Number of independent voting members of the governing body (Part VI, line 1b)**

<table>
<thead>
<tr>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>15</td>
</tr>
</tbody>
</table>

**Total number of individuals employed in calendar year 2018 (Part V, line 2a)**

<table>
<thead>
<tr>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,334,536</td>
<td>2,334,536</td>
</tr>
</tbody>
</table>

**Total unrelated business revenue from Form 990-T, line 38**

<table>
<thead>
<tr>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Revenue**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>Contributions and grants (Part VIII, line 1h)</td>
<td>2,991,344</td>
<td>6,163,172</td>
</tr>
<tr>
<td>9</td>
<td>Program service revenue (Part VIII, line 2g)</td>
<td>418,449</td>
<td>384,698</td>
</tr>
<tr>
<td>10</td>
<td>Investment income (Part VIII, column A), lines 3, 4, and 7d</td>
<td>44,118</td>
<td>60,538</td>
</tr>
<tr>
<td>11</td>
<td>Other revenue (Part VIII, column A), lines 5, 6d, 8c, 9c, 10c, and 11e</td>
<td>28,022</td>
<td>36,186</td>
</tr>
<tr>
<td>12</td>
<td>Total revenue—add lines 8 through 11 (must equal Part VIII, column A, line 12)</td>
<td>3,481,933</td>
<td>6,644,594</td>
</tr>
<tr>
<td>13</td>
<td>Grants and similar amounts paid (Part IX, column A), lines 1–3</td>
<td>578,164</td>
<td>639,281</td>
</tr>
<tr>
<td>14</td>
<td>Benefits paid to or for members (Part IX, column A), line 4</td>
<td>2,133,431</td>
<td>2,334,536</td>
</tr>
<tr>
<td>15</td>
<td>Salaries, other compensation, employee benefits (Part IX, column A), lines 5–10</td>
<td>2,133,431</td>
<td>2,334,536</td>
</tr>
<tr>
<td>16a</td>
<td>Professional fundraising fees (Part IX, column A), line 11e</td>
<td>2,334,536</td>
<td>2,334,536</td>
</tr>
<tr>
<td>b</td>
<td>Total fundraising expenses (Part IX, column D, line 25)</td>
<td>26,014</td>
<td>2,334,536</td>
</tr>
<tr>
<td>17</td>
<td>Other expenses (Part IX, column A), lines 11a–11d, 11f–24e</td>
<td>1,354,891</td>
<td>1,626,889</td>
</tr>
<tr>
<td>18</td>
<td>Total expenses. Add lines 13–17 (must equal Part IX, column A, line 25)</td>
<td>4,066,486</td>
<td>4,600,706</td>
</tr>
<tr>
<td>19</td>
<td>Revenue less expenses. Subtract line 18 from line 12</td>
<td>2,043,888</td>
<td>2,043,888</td>
</tr>
</tbody>
</table>

**Expenses**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Total assets (Part X, line 16)</td>
<td>6,665,295</td>
<td>8,635,951</td>
</tr>
<tr>
<td>21</td>
<td>Total liabilities (Part X, line 26)</td>
<td>3,106,241</td>
<td>3,030,645</td>
</tr>
<tr>
<td>22</td>
<td>Net assets or fund balances. Subtract line 21 from line 20</td>
<td>3,559,054</td>
<td>5,605,306</td>
</tr>
</tbody>
</table>

### Part II - Signature Block

**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.**

**Signature of officer**

NOEL POYO, EXECUTIVE DIRECTOR

**Date**

11/13/2019

**Firm’s name**

NOEL POYO, 5404 WURZBACH RD, SAN ANTONIO, TX 78238

**Firm’s EIN**

20-0774672

**Firm’s address**

5404 WURZBACH RD, SAN ANTONIO, TX 78238

**Phone no.**

(210) 227-1010

May the IRS discuss this return with the preparer shown above? (see instructions)

**Yes**

**No**
Part III  Statement of Program Service Accomplishments

Briefly describe the organization’s mission:

NALCAB's mission is to strengthen the economy by advancing economic mobility in Latino communities.

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  
☐ Yes  ☐ No

If “Yes,” describe these new services on Schedule O.

Did the organization cease conducting, or make significant changes in how it conducts, any program services?  
☐ Yes  ☐ No

If “Yes,” describe these changes on Schedule O.

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ____) (Expenses $ 3,015,017. including grants of $ 601,430.) (Revenue $ 232,412.)  
Organizational Capacity Building for Nonprofits and Government Agencies. NALCAB builds the capacity of non-profits and units of government to implement programs and projects that advance economic mobility in low- and moderate-income communities. NALCAB's capacity-building services focus in the areas of Equitable Neighborhood Development, Small Business Investment, and Family Financial Capability. NALCAB implements this work through grant-making, technical assistance, and the facilitation of peer-to-peer collaboration. NALCAB also provides culturally-relevant training to community and economic development practitioners and engages next generation Latino leaders in the Pete Garcia Community Development Fellowship.

4b (Code: ____) (Expenses $ 634,133. including grants of $ 37,851.) (Revenue $ 33,725.)  
Policy and Field Building. NALCAB influences policy makers and investors to increase the flow of capital that responsibly meets the asset building needs and opportunities in low- and moderate-income households and under-served Latino communities. NALCAB implements this work by engaging in policy advocacy and research, and by providing advisory services to investors and units of government located in the United States.

Each year NALCAB hosts an Annual Congressional Advocacy Day when members from all over the country convene in Washington, D.C. to advocate for federal policies that make a meaningful difference in the lives of Latinos and LMI communities, with See Part III, Ln 4b statement.

4c (Code: ____) (Expenses $ 182,967. including grants of $ 0.) (Revenue $ 178,561.)  
Lending and Asset Management. To promote economic mobility in Latino communities NALCAB lends to non-profit organizations that build affordable housing, invest in small businesses, and strengthen family financial capability. Geographic areas served are primarily economically distressed, predominantly Latino, low- and moderate-income communities that lack adequate access to financial products. NALCAB is in the process of being certified by the US Treasury Department as a Community Development Financial Institution (CDFI). NALCAB established Escalera Community Investments, LLC, a wholly-owned subsidiary, to manage social investment funds, capitalized with dollars from third party investors. See Part III, Ln 4c statement.

4d Other program services (Describe in Schedule O.)  
(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses  ▶ 3,832,117.
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<tbody>
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<td>4</td>
<td>Yes</td>
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<td>b</td>
<td></td>
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</tr>
<tr>
<td>21</td>
<td></td>
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</tr>
</tbody>
</table>
## Part IV Checklist of Required Schedules (continued)

### 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
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<td>x</td>
</tr>
</tbody>
</table>

### 23 Did the organization answer “Yes” to Part VII, Section A, line 3, 4, or 5 about compensation of the organization’s current and former officers, directors, trustees, key employees, and highest compensated employees? If “Yes,” complete Schedule J.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

### 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If “Yes,” answer lines 24b through 24d and complete Schedule K. If “No,” go to line 25a.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

#### b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### d Did the organization act as an “on behalf of” issuer for bonds outstanding at any time during the year?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

#### 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?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 27 Did the organization provide a grant or other assistance to an officer, director, 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):

#### a A current or former officer, director, trustee, or key employee? If “Yes,” complete Schedule L, Part IV.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

#### b A family member of a current or former officer, director, trustee, or key employee? If “Yes,” complete Schedule L, Part IV.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

#### c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If “Yes,” complete Schedule L, Part IV.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 29 Did the organization receive more than $25,000 in non-cash contributions? If “Yes,” complete Schedule M.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If “Yes,” complete Schedule M.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 31 Did the organization liquidate, terminate, or dissolve and cease operations? If “Yes,” complete Schedule N, Part I.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If “Yes,” complete Schedule N, Part II.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 34 Was the organization related to any tax-exempt or taxable entity? If “Yes,” complete Schedule R, Part II, III, or IV, and Part V, line 1.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

#### 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

#### b If “Yes” to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If “Yes,” complete Schedule R, Part V, line 2.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
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<td>x</td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

## Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>34</td>
</tr>
</tbody>
</table>

### 1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

### 1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

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  
   Yes  No  
   |    | 33 |
   | 2a |    |

   2b 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) .
   Yes  No  
   |    |  x |
   | 2b |    |

3a Did the organization have unrelated business gross income of $1,000 or more during the year? .
   Yes  No  
   |    |  x |
   | 3a |    |

3b If “Yes,” has it filed a Form 990-T for this year? If “No” to line 3b, provide an explanation in Schedule O .
   Yes  No  
   |    |  x |
   | 3b |    |

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
   Yes  No  
   |    |  x |
   | 4a |    |

4b If “Yes,” enter the name of the foreign country: 


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 
   Yes  No  
   |    |  x |
   | 5a |    |

5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 
   Yes  No  
   |    |  x |
   | 5b |    |

5c If “Yes” to line 5a or 5b, did the organization file Form 8886-T? 
   Yes  No  
   |    |  x |
   | 5c |    |

5d If “Yes,” did the organization file Form 8886-T for this year? 
   Yes  No  
   |    |  x |
   | 5d |    |

5e Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 
   Yes  No  
   |    |  x |
   | 5e |    |

5f Did the sponsoring organization make any taxable distributions under section 4966? 
   Yes  No  
   |    |  x |
   | 5f |    |

5g If “Yes,” did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 
   Yes  No  
   |    |  x |
   | 5g |    |

6a Did the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? .
   Yes  No  
   |    |  x |
   | 6a |    |

6b If “Yes,” did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 
   Yes  No  
   |    |  x |
   | 6b |    |

7 Organizations that may receive deductible contributions under section 170(c).
   a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? 
   Yes  No  
   |    |  x |
   | 7a |    |

7b If “Yes,” did the organization notify the donor of the value of the goods or services provided? 
   Yes  No  
   |    |  x |
   | 7b |    |

7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 
   Yes  No  
   |    |  x |
   | 7c |    |

7d If “Yes,” indicate the number of Forms 8282 filed during the year 
   Yes  No  
   |    |  x |
   | 7d |    |

7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 
   Yes  No  
   |    |  x |
   | 7e |    |

7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 
   Yes  No  
   |    |  x |
   | 7f |    |

7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 
   Yes  No  
   |    |  x |
   | 7g |    |

7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 
   Yes  No  
   |    |  x |
   | 7h |    |

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? .
   Yes  No  
   |    |  x |
   | 8 |    |

9 Sponsoring organizations maintaining donor advised funds.
   a Did the sponsoring organization make any taxable distributions under section 4966? 
   Yes  No  
   |    |  x |
   | 9a |    |

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 
   Yes  No  
   |    |  x |
   | 9b |    |

10 Section 501(c)(7) organizations. Enter:

10a Initiation fees and capital contributions included on Part VIII, line 12 
   Yes  No  
   |    |  x |
   | 10a |    |

10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 
   Yes  No  
   |    |  x |
   | 10b |    |

11 Section 501(c)(12) organizations. Enter:

11a Gross income from members or shareholders 
   Yes  No  
   |    |  x |
   | 11a |    |

11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 
   Yes  No  
   |    |  x |
   | 11b |    |

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 
   Yes  No  
   |    |  x |
   | 12a |    |

12b If “Yes,” enter the amount of tax-exempt interest received or accrued during the year .
   Yes  No  
   |    |  x |
   | 12b |    |

13 Section 501(c)(29) qualified nonprofit health insurance issuers.
   a Is the organization licensed to issue qualified health plans in more than one state? 
   Yes  No  
   |    |  x |
   | 13a |    |

b Enter the amount of reserves required to maintain by the states in which the organization is licensed to issue qualified health plans 
   Yes  No  
   |    |  x |
   | 13b |    |

c Enter the amount of reserves on hand 
   Yes  No  
   |    |  x |
   | 13c |    |

14a Did the organization receive any payments for indoor tanning services during the tax year? 
   Yes  No  
   |    |  x |
   | 14a |    |

14b If “Yes,” has it filed a Form 720 to report these payments? If “No,” provide an explanation in Schedule O .
   Yes  No  
   |    |  x |
   | 14b |    |

15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? 
   Yes  No  
   |    |  x |
   | 15 |    |

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If “Yes,” complete Form 4720, Schedule O.
   Yes  No  
   |    |  x |
   | 16 |    |

Note. See the instructions for additional information the organization must report on Schedule O.
### Part VI: Governance, Management, and Disclosure

For each “Yes” response to lines 2 through 7b below, and for a “No” response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI.

#### Section A. Governing Body and Management

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Enter the number of voting members of the governing body at the end of the tax year.</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Enter the number of voting members included in line 1a, above, who are independent.</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the organization have a written document retention and destruction policy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization become aware during the year of a significant diversion of the organization’s assets?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Did the organization have members or stockholders?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a</td>
<td>The governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8b</td>
<td>Each committee with authority to act on behalf of the governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>Did the organization have local chapters, branches, or affiliates?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>If “Yes,” did the organization have written policies and procedures governing the activities of such chapters, branches, and affiliates to ensure their operations are consistent with the organization’s exempt purposes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td>Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a</td>
<td>Did the organization have a written conflict of interest policy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12b</td>
<td>If “No,” go to line 13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12c</td>
<td>Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Did the organization have a written whistleblower policy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Did the organization have a written document retention and destruction policy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15a</td>
<td>Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15b</td>
<td>The organization’s CEO, Executive Director, or top management official</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other officers or key employees of the organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16a</td>
<td>Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16b</td>
<td>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 organization’s exempt status with respect to such arrangements?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed.

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

- [ ] Own website
- [X] Another’s website
- [ ] Upon request
- [ ] Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization’s books and records.

Fernando Garcia, 5404 WURZBACH RD, SAN ANTONIO, TX 78238 (210)227-1010
# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) David Adame</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vice-Chair</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Veronica Barela</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Marla Bilonick</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Janie Barrera</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vice Chair</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Larry Garcia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Treasurer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) Rose Garcia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) Paulina Gonzalez</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) Luis Granados</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secretary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) John Herrera</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) Ruby Azurida-Lee</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) Fernando Lemos</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Chair</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) Ramon Leon</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13) Raul Raymundo</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14) Isabel Watkins Rubio</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15) Bea Stotzer</td>
<td>1.50</td>
<td>x</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16) Rafael Torres</td>
<td>1.50</td>
<td>x</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17) Raul Vazquez</td>
<td>1.50</td>
<td>x</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(18) Noel Poyo</td>
<td>40.00</td>
<td>x</td>
<td>190,000.</td>
<td>0.</td>
<td>27,729.</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(19) Fernando García</td>
<td>40.00</td>
<td>x</td>
<td>123,000.</td>
<td>0.</td>
<td>23,116.</td>
</tr>
<tr>
<td>Chief Financial Officer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(20) Manuel Ochoa</td>
<td>40.00</td>
<td>x</td>
<td>107,200.</td>
<td>0.</td>
<td>8,241.</td>
</tr>
<tr>
<td>Director of Federal Affairs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**1b Sub-total** .......................................................... 420,200. 0. 59,086.

**c Total from continuation sheets to Part VII, Section A** .......................................................... 420,200. 0. 59,086.

**d Total (add lines 1b and 1c)** .......................................................... 420,200. 0. 59,086.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 3

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If “Yes,” complete Schedule J for such individual ..........................................................

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If “Yes,” complete Schedule J for such individual ..........................................................

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If “Yes,” complete Schedule J for such person ..........................................................

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization’s tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0
## Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII.

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns ...</td>
<td>1a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues ...</td>
<td>1b 85,750.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events ...</td>
<td>1c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations ...</td>
<td>1d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Government grants (contributions) ...</td>
<td>1e 1,515,704.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above ...</td>
<td>1f 4,561,718.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a–1f: $ ...</td>
<td>1g</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a–1f ........</td>
<td>1h 6,163,172.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a Fee for service ...</td>
<td>2a 541690</td>
</tr>
<tr>
<td>b Registration fees ...</td>
<td>2b 611430</td>
</tr>
<tr>
<td>c Management fees ...</td>
<td>2c 531390</td>
</tr>
<tr>
<td>d ...</td>
<td>2d</td>
</tr>
<tr>
<td>e ...</td>
<td>2e</td>
</tr>
<tr>
<td>f All other program service revenue ...</td>
<td>2f 384,698.</td>
</tr>
<tr>
<td>g Total. Add lines 2a–2f ........</td>
<td>2g 384,698.</td>
</tr>
</tbody>
</table>

| Investment income (including dividends, interest, and other similar amounts) ... | 3 60,538. 60,000. 0. 538. |
| Income from investment of tax-exempt bond proceeds ... | 4                                        |
| Royalties ... | 5                                        |

| Gross rents ... | 6a 73,199. |
| Less: rental expenses | 6b 37,013. |
| Rental income or (loss) | 6c 36,186. |
| Net rental income or (loss) ... | 6d 36,186. 0. 36,186. 0. |
| Gross amount from sales of assets other than inventory ... | 7a (i) Securities (ii) Other |
| Less: cost or other basis and sales expenses ... | 7b |
| Gain or (loss) ... | 7c |
| Net gain or (loss) ... | 7d |

| Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18 ... | 8a |
| Less: direct expenses ... | 8b |
| Net income or (loss) from fundraising events ... | 8c |
| Gross income from gaming activities. See Part IV, line 19 ... | 9a |
| Less: direct expenses ... | 9b |
| Net income or (loss) from gaming activities ... | 9c |
| Gross sales of inventory, less returns and allowances ... | 10a |
| Less: cost of goods sold ... | 10b |
| Net income or (loss) from sales of inventory ... | 10c |

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>...</td>
<td></td>
</tr>
<tr>
<td>...</td>
<td></td>
</tr>
<tr>
<td>...</td>
<td></td>
</tr>
<tr>
<td>e Total. Add lines 11a–11d ...</td>
<td>11e 5,644,594. 444,698. 36,186. 538.</td>
</tr>
<tr>
<td>12 Total revenue. See instructions ...</td>
<td>12 5,644,594. 444,698. 36,186. 538.</td>
</tr>
</tbody>
</table>
## 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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

<table>
<thead>
<tr>
<th></th>
<th>Total expenses</th>
<th>Program service expenses</th>
<th>Management and general expenses</th>
<th>Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>525,945.</td>
<td>525,945.</td>
<td>0.</td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>113,336.</td>
<td>113,336.</td>
<td>0.</td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>363,844.</td>
<td>114,107.</td>
<td>228,438.</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>1,555,656.</td>
<td>1,312,833.</td>
<td>241,962.</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>57,732.</td>
<td>48,721.</td>
<td>8,979.</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>200,642.</td>
<td>169,324.</td>
<td>31,207.</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>156,662.</td>
<td>120,923.</td>
<td>34,418.</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>2,492.</td>
<td>2,370.</td>
<td>122.</td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>35,375.</td>
<td>0.</td>
<td>35,375.</td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>55,199.</td>
<td>44,274.</td>
<td>10,471.</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>38,776.</td>
<td>33,360.</td>
<td>5,191.</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>90,400.</td>
<td>68,748.</td>
<td>21,103.</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>211,002.</td>
<td>206,846.</td>
<td>4,156.</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>70,527.</td>
<td>63,091.</td>
<td>7,103.</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>42,302.</td>
<td>31,998.</td>
<td>9,876.</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>5,874.</td>
<td>4,446.</td>
<td>1,369.</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>a</td>
<td>Staff training</td>
<td>17,380.</td>
<td>15,105.</td>
<td>2,275.</td>
</tr>
<tr>
<td>b</td>
<td>Bad debt expense</td>
<td>12,500.</td>
<td>12,500.</td>
<td>0.</td>
</tr>
<tr>
<td>c</td>
<td>Loss per K-1, Form 1065</td>
<td>16,630.</td>
<td>16,630.</td>
<td>0.</td>
</tr>
<tr>
<td>d</td>
<td>Loss per K-1, Form 1065</td>
<td>82.</td>
<td>82.</td>
<td>0.</td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>7,900.</td>
<td>7,900.</td>
<td>0.</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>4,600,706.</td>
<td>3,832,117.</td>
<td>742,575.</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here □ if following SOP 98-2 (ASC 958-720)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>
## Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X.

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th></th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>557,054.</td>
<td>1,331,177.</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>843,699.</td>
<td>2,175,000.</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>45,540.</td>
<td>354,082.</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>2,180,000.</td>
<td>2,135,000.</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>25,907.</td>
<td>14,911.</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>1,408,049.</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Investments—publicly traded securities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments—other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments—program-related. See Part IV, line 11</td>
<td>1,153,844.</td>
<td>1,143,536.</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>12,904.</td>
<td>3,196.</td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>6,665,295.</td>
<td>8,635,951.</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>171,781.</td>
<td>210,208.</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>51,987.</td>
<td>6,485.</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>2,882,473.</td>
<td>2,811,849.</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Organizations that follow SFAS 117 (ASC 958), check here ▶</td>
<td>1,681,391.</td>
<td>1,713,608.</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td>1,877,663.</td>
<td>3,891,698.</td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td>3,559,054.</td>
<td>5,605,306.</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td>6,665,295.</td>
<td>8,635,951.</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI.  

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>6,644,594</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>4,600,706</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>2,043,888</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>3,559,054</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>2,364</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>5,605,306</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII.  

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If “Yes” to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If “Yes,” did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Description</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>particular emphasis on federal appropriations to fuel key community and</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>economic development programs that support Latino economic advancement.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Escalera manages the NALCAB Catalyst Fund I, LLC, a social impact fund</td>
</tr>
<tr>
<td>focused on producing and preserving affordable housing near employment,</td>
</tr>
<tr>
<td>quality education and health care resources.</td>
</tr>
</tbody>
</table>
Public Charity Status and Public Support

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

☐ Attach to Form 990 or Form 990-EZ.

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

Name of the organization

NATIONAL ASSOCIATION FOR LATINO COMMUNITY ASSET BUILDERS

Employer identification number

20-0774672

Part I  Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)

☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:

☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

☐ Enter the number of supported organizations .................................................................

☐ Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1–10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>E</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. BAA
### Part II: Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>4,253,581</td>
<td>3,010,546</td>
<td>5,136,654</td>
<td>2,991,344</td>
<td>6,163,172</td>
<td>21,555,297</td>
</tr>
<tr>
<td>2</td>
<td>3,010,546</td>
<td>5,136,654</td>
<td>2,991,344</td>
<td>6,163,172</td>
<td>21,555,297</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>5,136,654</td>
<td>2,991,344</td>
<td>6,163,172</td>
<td>21,555,297</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>21,555,297</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>21,555,297</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total. Add lines 1 through 3.**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>8,680,049</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>12,875,248</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>4,253,581</td>
<td>3,010,546</td>
<td>5,136,654</td>
<td>2,991,344</td>
<td>6,163,172</td>
<td>21,555,297</td>
</tr>
<tr>
<td>8</td>
<td>3,010,546</td>
<td>5,136,654</td>
<td>2,991,344</td>
<td>6,163,172</td>
<td>21,555,297</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>5,136,654</td>
<td>2,991,344</td>
<td>6,163,172</td>
<td>21,555,297</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>21,555,297</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>21,721,961</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>1,553,158</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.**

#### Section C. Computation of Public Support Percentage

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>59.27%</td>
</tr>
<tr>
<td>15</td>
<td>53.45%</td>
</tr>
</tbody>
</table>

**33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

**33 1/3% support test—2017.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

**10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the “facts-and-circumstances” test, check this box and stop here. Explain in Part VI how the organization meets the “facts-and-circumstances” test. The organization qualifies as a publicly supported organization.

**10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 17a, and line 15 is 10% or more, and if the organization meets the “facts-and-circumstances” test, check this box and stop here. Explain in Part VI how the organization meets the “facts-and-circumstances” test. The organization qualifies as a publicly supported organization.

**Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.
**Part III** Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Total.</strong> Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td><strong>Public support.</strong> (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td><strong>Total support.</strong> (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td><strong>First five years.</strong> If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))</td>
</tr>
<tr>
<td>16</td>
<td>Public support percentage from 2017 Schedule A, Part III, line 15</td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))</td>
</tr>
<tr>
<td>18</td>
<td>Investment income percentage from 2017 Schedule A, Part III, line 17</td>
</tr>
<tr>
<td>19a</td>
<td><strong>331/3% support tests—2018.</strong> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.</td>
</tr>
<tr>
<td>19b</td>
<td><strong>331/3% support tests—2017.</strong> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.</td>
</tr>
<tr>
<td>20</td>
<td><strong>Private foundation.</strong> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
</tr>
</tbody>
</table>
## 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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If “Yes,” answer (b) and (c) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b  Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If “Yes,” 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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c  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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a Did the organization add, substitute, or remove any supported organizations during the tax year? If “Yes,” answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization’s organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b  Substitutions only. Was the substitution the result of an event beyond the organization’s control?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If “Yes,” answer 10b below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV Supporting Organizations (continued)

11 Has the organization accepted a gift or contribution from any of the following persons?
   - A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?  
   - A family member of a person described in (a) above?  
   - 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.

### Section B. Type I Supporting Organizations

1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization’s directors or trustees at all times during the tax year? If “No,” describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization’s activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If “Yes,” explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

### Section C. Type II Supporting Organizations

1 Were a majority of the organization’s directors or trustees during the tax year also a majority of the directors or trustees of each of the organization’s supported organization(s)? If “No,” describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

### Section D. All Type III Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization’s tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization’s governing documents in effect on the date of notification, to the extent not previously provided?

2 Were any of the organization’s officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If “No,” explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

3 By reason of the relationship described in (2), did the organization’s supported organizations have a significant voice in the organization’s investment policies and in directing the use of the organization’s income or assets at all times during the tax year? If “Yes,” describe in Part VI the role the organization’s supported organizations played in this regard.

### Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
   - The organization satisfied the Activities Test. Complete line 2 below.
   - The organization is the parent of each of its supported organizations. Complete line 3 below.
   - The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.
   - Did substantially all of the organization’s activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If “Yes,” then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
   - Did the activities described in (a) constitute activities that, but for the organization’s involvement, one or more of the organization’s supported organization(s) would have been engaged in? If “Yes,” explain in Part VI the reasons for the organization’s position that its supported organization(s) would have engaged in these activities but for the organization’s involvement.

3 Parent of Supported Organizations. Answer (a) and (b) below.
   - Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
   - Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If “Yes,” describe in Part VI the role played by the organization in this regard.
Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1. Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

### Section A—Adjusted Net Income

<table>
<thead>
<tr>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> Net short-term capital gain</td>
<td><strong>1</strong></td>
</tr>
<tr>
<td><strong>2</strong> Recoveries of prior-year distributions</td>
<td><strong>2</strong></td>
</tr>
<tr>
<td><strong>3</strong> Other gross income (see instructions)</td>
<td><strong>3</strong></td>
</tr>
<tr>
<td><strong>4</strong> Add lines 1 through 3.</td>
<td><strong>4</strong></td>
</tr>
<tr>
<td><strong>5</strong> Depreciation and depletion</td>
<td><strong>5</strong></td>
</tr>
<tr>
<td><strong>6</strong> 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)</td>
<td><strong>6</strong></td>
</tr>
<tr>
<td><strong>7</strong> Other expenses (see instructions)</td>
<td><strong>7</strong></td>
</tr>
<tr>
<td><strong>8 Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td><strong>8</strong></td>
</tr>
</tbody>
</table>

### Section B—Minimum Asset Amount

<table>
<thead>
<tr>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a Average monthly value of securities</td>
<td><strong>1a</strong></td>
</tr>
<tr>
<td>b Average monthly cash balances</td>
<td><strong>1b</strong></td>
</tr>
<tr>
<td>c Fair market value of other non-exempt-use assets</td>
<td><strong>1c</strong></td>
</tr>
<tr>
<td>d Total (add lines 1a, 1b, and 1c)</td>
<td><strong>1d</strong></td>
</tr>
<tr>
<td>e Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2 Acquisition indebtedness applicable to non-exempt-use assets</td>
<td><strong>2</strong></td>
</tr>
<tr>
<td>3 Subtract line 2 from line 1d.</td>
<td><strong>3</strong></td>
</tr>
<tr>
<td>4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td><strong>4</strong></td>
</tr>
<tr>
<td>5 Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td><strong>5</strong></td>
</tr>
<tr>
<td>6 Multiply line 5 by .035.</td>
<td><strong>6</strong></td>
</tr>
<tr>
<td>7 Recoveries of prior-year distributions</td>
<td><strong>7</strong></td>
</tr>
<tr>
<td>8 Minimum Asset Amount (add line 7 to line 6)</td>
<td><strong>8</strong></td>
</tr>
</tbody>
</table>

### Section C—Distributable Amount

| Current Year |
|----------------|-----------------------------|
| **1** Adjusted net income for prior year (from Section A, line 8, Column A) | **1** |
| **2** Enter 85% of line 1. | **2** |
| **3** Minimum asset amount for prior year (from Section B, line 8, Column A) | **3** |
| **4** Enter greater of line 2 or line 3. | **4** |
| **5** Income tax imposed in prior year | **5** |
| **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | **6** |
| **7** Check here if the current year is the organization’s first as a non-functionally integrated Type III supporting organization (see instructions). | | 

Schedule A (Form 990 or 990-EZ) 2018
### Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

#### Section D — Distributions

<table>
<thead>
<tr>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>9</td>
</tr>
<tr>
<td>10</td>
</tr>
</tbody>
</table>

#### Section E — Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>(i)</th>
<th>Excess Distributions</th>
<th>(ii)</th>
<th>Underdistributions Pre-2018</th>
<th>(iii)</th>
<th>Distributable Amount for 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2018 from Section C, line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2018</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a From 2013 . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b From 2014 . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c From 2015 . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d From 2016 . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e From 2017 . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f Total of lines 3a through e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Applied to underdistributions of prior years</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>h Applied to 2018 distributable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>i Carryover from 2013 not applied (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>j Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2018 from Section D, line 7: $</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Applied to underdistributions of prior years</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Applied to 2018 distributable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Excess distributions carryover to 2019.</strong> Add lines 3j and 4c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Excess from 2014 . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Excess from 2015 . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Excess from 2016 . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Excess from 2017 . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Excess from 2018 . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
### Part I-A

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1. Provide a description of the organization’s direct and indirect political campaign activities in Part IV. (see instructions for definition of “political campaign activities”)
2. Political campaign activity expenditures (see instructions) ................................................................. $ ........................................
3. Volunteer hours for political campaign activities (see instructions) ................................................. ........................................

### Part I-B

Complete if the organization is exempt under section 501(c)(3).

1. Enter the amount of any excise tax incurred by the organization under section 4955 ........................................ $ ........................................
2. Enter the amount of any excise tax incurred by organization managers under section 4955 ......................... $ ........................................
3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ........................................... Yes  No
4a. Was a correction made? .................................................................................................................. Yes  No
   b. If “Yes,” describe in Part IV.

### Part I-C

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1. Enter the amount directly expended by the filing organization for section 527 exempt function activities ................................................................. $ ........................................
2. Enter the amount of the filing organization’s funds contributed to other organizations for section 527 exempt function activities ........................................ $ ........................................
3. Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ........................................ $ ........................................
4. Did the filing organization file Form 1120-POL for this year? ................................................................. Yes  No
5. Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization’s funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization’s funds. If none, enter -0-.</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Part II-A

A  Check □ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member’s name, address, EIN, expenses, and share of excess lobbying expenditures).

B  Check □ if the filing organization checked box A and “limited control” provisions apply.

Limits on Lobbying Expenditures
(The term “expenditures” means amounts paid or incurred.)

<table>
<thead>
<tr>
<th></th>
<th>(a) Filing organization’s totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Total lobbying expenditures to influence public opinion (grass roots lobbying)</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Total lobbying expenditures (add lines 1a and 1b)</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Other exempt purpose expenditures</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Total exempt purpose expenditures (add lines 1c and 1d)</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Lobbying nontaxable amount. Enter the amount from the following table in both columns.</td>
<td></td>
</tr>
</tbody>
</table>

If the amount on line 1e, column (a) or (b) is:

<table>
<thead>
<tr>
<th>The lobbying nontaxable amount is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not over $500,000</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
</tr>
<tr>
<td>Over $17,000,000</td>
</tr>
</tbody>
</table>

| g  | Grassroots nontaxable amount (enter 25% of line 1f) |                         |
| h  | Subtract line 1g from line 1a. If zero or less, enter -0-. |                         |
| i  | Subtract line 1f from line 1c. If zero or less, enter -0-. |                         |
| j  | If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | Yes □  No □ |

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a Lobbying nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Lobbying ceiling amount (150% of line 2a, column (e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Total lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Grassroots ceiling amount (150% of line 2d, column (e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part II-B  Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each “Yes,” response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Volunteers?</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</td>
<td>X</td>
</tr>
<tr>
<td>c</td>
<td>Media advertisements?</td>
<td>X</td>
</tr>
<tr>
<td>d</td>
<td>Mailings to members, legislators, or the public?</td>
<td>X 1,177.</td>
</tr>
<tr>
<td>e</td>
<td>Publications, or published or broadcast statements?</td>
<td>X</td>
</tr>
<tr>
<td>f</td>
<td>Grants to other organizations for lobbying purposes?</td>
<td>X</td>
</tr>
<tr>
<td>g</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td>X 2,165.</td>
</tr>
<tr>
<td>h</td>
<td>Other activities?</td>
<td>X</td>
</tr>
<tr>
<td>j</td>
<td>Total. Add lines 1c through 1i</td>
<td>3,342.</td>
</tr>
</tbody>
</table>

2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | X |

2b | If “Yes,” enter the amount of any tax incurred under section 4912 |   |

2c | If “Yes,” enter the amount of any tax incurred by organization managers under section 4912 |   |

2d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? |   |

Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Were substantially all (90% or more) dues received nondeductible by members?</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?</td>
<td></td>
</tr>
</tbody>
</table>

Part III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered “No,” OR (b) Part III-A, line 3, is answered “Yes.”

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Dues, assessments and similar amounts from members</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Current year</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Carryover from last year</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carry over to the reasonable estimate of nondeductible lobbying and political expenditure next year?</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Taxable amount of lobbying and political expenditures (see instructions)</td>
<td></td>
</tr>
</tbody>
</table>

Part IV  Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Pt II-B Line 1: Letters to specific legislators and/or congressional bodies

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>primarily focused on appropriations for federal community and economic development programs.</td>
</tr>
</tbody>
</table>

Pt II-B Line 1: Direct contact with specific legislators, staff and/or congressional bodies

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>primarily focused on appropriations for federal community and economic development programs.</td>
</tr>
</tbody>
</table>
### 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.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value of grants at end of year</td>
<td></td>
</tr>
</tbody>
</table>

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization’s property, subject to the organization’s exclusive legal control?  
   Yes □ No □

6 Did the organization inform all grantees, donors, and donor 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 conferring impermissible private benefit?  
   Yes □ No □

### Part II  Conservation Easements.

Complete if the organization answered “Yes” on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
   - Preservation of land for public use (e.g., recreation or education)
   - Protection of natural habitat
   - Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register</td>
</tr>
</tbody>
</table>

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  
   Yes □ No □

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 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)?  
   Yes □ No □

9 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.

### Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered “Yes” on Form 990, Part IV, line 8.

1a If the organization, 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), 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 the following amounts relating to these items:
   (i) Revenue included on Form 990, Part VIII, line 1 $ ▶
   (ii) Assets included in Form 990, Part X $ ▶

2 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:
   a Revenue included on Form 990, Part VIII, line 1 $ ▶
   b Assets included in Form 990, Part X $ ▶
Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3  Using the organization’s acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
   a  ☐ Public exhibition  d  ☐ Loan or exchange programs
   b  ☐ Scholarly research  e  ☐ Other
   c  ☐ Preservation for future generations

4  Provide a description of the organization’s collections and explain how they further the organization’s exempt purpose in Part XIII.

5  During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization’s collection?  □ Yes  □ No

Part IV  Escrow and Custodial Arrangements.

Complete if the organization answered “Yes” on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  □ Yes  □ No

b  If “Yes,” explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td></td>
</tr>
</tbody>
</table>

2a  Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  □ Yes  □ No

b  If “Yes,” explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

Part V  Endowment Funds.

Complete if the organization answered “Yes” on Form 990, Part IV, line 10.

1a  Beginning of year balance

b  Contributions

c  Net investment earnings, gains, and losses

d  Grants or scholarships

e  Other expenditures for facilities and programs

f  Administrative expenses

g  End of year balance

2  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

   a  Board designated or quasi-endowment

   b  Permanent endowment

   c  Temporarily restricted endowment

   The percentages on lines 2a, 2b, and 2c should equal 100%.

3a  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

   (i) unrelated organizations

   (ii) related organizations

b  If “Yes” on line 3a(ii), are the related organizations listed as required on Schedule R?

3b  Yes  □ No

4  Describe in Part XIII the intended uses of the organization’s endowment funds.

Part VI  Land, Buildings, and Equipment.

Complete if the organization answered “Yes” on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a  Land</td>
<td>0.</td>
<td>280,000.</td>
<td>280,000.</td>
<td>280,000.</td>
</tr>
<tr>
<td>b  Buildings</td>
<td></td>
<td>903,120.</td>
<td>126,151.</td>
<td>776,969.</td>
</tr>
<tr>
<td>c  Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d  Equipment</td>
<td></td>
<td>224,929.</td>
<td>109,472.</td>
<td>115,457.</td>
</tr>
<tr>
<td>e  Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)  □ Yes  □ No
**Part VII**  Investments—Other Securities.
Complete if the organization answered “Yes” on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
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<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part VIII**  Investments—Program Related.
Complete if the organization answered “Yes” on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Equity Investment in Nalcab Network Investors, LLC</td>
<td>971,666.</td>
<td>Cost</td>
</tr>
<tr>
<td>(2) Equity Investment in NALCAB Catalyst Fund I, LLC</td>
<td>171,870.</td>
<td>Cost</td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)</strong></td>
<td>1,143,536.</td>
<td></td>
</tr>
</tbody>
</table>

**Part IX**  Other Assets.
Complete if the organization answered “Yes” on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Part X**  Other Liabilities.
Complete if the organization answered “Yes” on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. | (a) Description of liability | (b) Book value |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td>2,103.</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)</strong></td>
<td>2,103.</td>
<td></td>
</tr>
</tbody>
</table>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.
### Part XI  Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered “Yes” on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>1</th>
<th>2a</th>
<th>2b</th>
<th>2c</th>
<th>2d</th>
<th>Total Revenue</th>
<th>Amounts Included on Form 990, Part VIII, line 12:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>6,666,841</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>22,247.</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
<td>22,247</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>22,247.</td>
</tr>
<tr>
<td>c</td>
<td>Recoveries of prior year grants</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>22,247</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>22,247.</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>6,644,594</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>6,644,594.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>1</th>
<th>2a</th>
<th>2b</th>
<th>2c</th>
<th>2d</th>
<th>Total Revenue</th>
<th>Amounts Included on Form 990, Part VIII, line 12:</th>
</tr>
</thead>
<tbody>
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<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>6,666,841</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>22,247.</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
<td>22,247</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>22,247.</td>
</tr>
<tr>
<td>c</td>
<td>Recoveries of prior year grants</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>22,247</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>22,247.</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>6,644,594</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>6,644,594.</td>
</tr>
</tbody>
</table>

### Part XII  Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered “Yes” on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>1</th>
<th>2a</th>
<th>2b</th>
<th>2c</th>
<th>2d</th>
<th>Total Expenses</th>
<th>Amounts Included on Form 990, Part IX, line 25:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>4,624,356</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>40,362.</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Donated services and use of facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Prior year adjustments</td>
<td>40,362</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>40,362.</td>
</tr>
<tr>
<td>c</td>
<td>Other losses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>40,362</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>40,362.</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>4,583,994</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>4,583,994.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>1</th>
<th>2a</th>
<th>2b</th>
<th>2c</th>
<th>2d</th>
<th>Total Expenses</th>
<th>Amounts Included on Form 990, Part IX, line 25:</th>
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<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>4,624,356</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>40,362.</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Donated services and use of facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Prior year adjustments</td>
<td>40,362</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>40,362.</td>
</tr>
<tr>
<td>c</td>
<td>Other losses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>40,362</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2e</td>
<td>40,362.</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>4,583,994</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>4,583,994.</td>
</tr>
</tbody>
</table>

### Part XIII  Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

---

Pt XI, Line 2d: See Part XI, Line 2d Supporting Schedule

Pt XII, Line 2d: See Part XII, Line 2d Supporting Schedule

Pt XII, Line 4b: See Part XII, Line 4b Supporting Schedule

---
## SCHEDULE I (Form 990)

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

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

#### Attach to Form 990.

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

#### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adelante Mujeres 2030 Main St., Suite A Forest Grove OR 97116 03-0473181 501(c)(3) 14,173.</td>
<td></td>
<td></td>
<td>Small Business</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agriculture and Land-Based Training P.O. Box 6264 Salinas CA 93912 77-0566055 501(c)(3) 22,500.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Avenue Community Development Corporation 295 Washington Ave., Ste 400 Houston TX 77001 76-0380602 501(c)(3) 36,000.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bienestar, Inc. 448 S. 1st Avenue Hillsboro OR 97123 93-0860753 501(c)(3) 17,500.</td>
<td></td>
<td></td>
<td>Equitable Neighborhood Development</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Center for Community Self Help 301 W. “Main” St. DURHAM NC 27701 56-1271685 501(c)(3) 22,500.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
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</tr>
<tr>
<td>Del Norte Neighborhood Development Corporation 3275 West 14th Avenue #202 Denver CO 80204 84-0783694 501(c)(3) 17,500.</td>
<td></td>
<td></td>
<td>Equitable Neighborhood Development</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>El Pajaro CDC 25 E. Beach St. Suite 209 Watsonville CA 95076 94-2656048 501(c)(3) 15,000.</td>
<td></td>
<td></td>
<td>Small Business</td>
<td></td>
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</tr>
<tr>
<td>Farmworkers Housing Development Corporation 1274 5th St., Suite J-A Woodburn OR 97071 93-1055994 501(c)(3) 17,500.</td>
<td></td>
<td></td>
<td>Equitable Neighborhood Development</td>
<td></td>
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</tr>
<tr>
<td>FINANTA 1501 N. 2nd Street Philadelphia PA 19122 23-2857766 501(c)(3) 37,500.</td>
<td></td>
<td></td>
<td>Small Business</td>
<td></td>
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</tr>
<tr>
<td>Grow Brooklyn 1474 Myrtle Avenue Brooklyn NY 11237 26-1410513 501(c)(3) 22,500.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ................................................................. 24
3. Enter total number of other organizations listed in the line 1 table ................................................................. 0

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III Grants and Other Assistance to Domestic Individuals
Complete if the organization answered “Yes” on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of noncash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Scholarships-community economic development training</td>
<td>92</td>
<td>57,576</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Fellowships-Pete Garcia Fellowship</td>
<td>16</td>
<td>55,760</td>
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<td>3</td>
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</tr>
</tbody>
</table>

### Part IV Supplemental Information
Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Pt I Line 2: The organization's procedures for monitoring the use of grant funds include office-based and/or on-site monitoring reviews performed by program staff and, in some cases, with the assistance of industry experts.

Sub-grantees are required to submit narrative and financial (progress and final) reports which program staff use to monitor and evaluate program implementation, deliverables, outcomes, expenditure rates and adherence to timelines.
<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC Section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic Economic Development Corporation of Greater Kansas City</td>
<td>431654693</td>
<td>501(c)(3)</td>
<td>17,500.</td>
<td></td>
<td></td>
<td>Equitable Neighborhood Development</td>
<td></td>
</tr>
<tr>
<td>Homewise, Inc.</td>
<td>850346325</td>
<td>501(c)(3)</td>
<td>22,500.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
</tr>
<tr>
<td>Houston Area Urban League</td>
<td>741611455</td>
<td>501(c)(3)</td>
<td>17,500.</td>
<td></td>
<td></td>
<td>Equitable Neighborhood Development</td>
<td></td>
</tr>
<tr>
<td>Inquilinos Boricuas en Accion</td>
<td>237090081</td>
<td>501(c)(3)</td>
<td>26,500.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
</tr>
<tr>
<td>La Casa De Don Pedro</td>
<td>237249368</td>
<td>501(c)(3)</td>
<td>17,500.</td>
<td></td>
<td></td>
<td>Equitable Neighborhood Development</td>
<td></td>
</tr>
<tr>
<td>Latino Economic Development Corporation</td>
<td>521749216</td>
<td>501(c)(3)</td>
<td>17,500.</td>
<td></td>
<td></td>
<td>Equitable Neighborhood Development</td>
<td></td>
</tr>
<tr>
<td>Lift Fund</td>
<td>742712770</td>
<td>501(c)(3)</td>
<td>15,000.</td>
<td></td>
<td></td>
<td>Small Business</td>
<td></td>
</tr>
<tr>
<td>Microenterprise services, construction &amp; training</td>
<td>412247717</td>
<td>501(c)(3)</td>
<td>13,726.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
</tr>
<tr>
<td>New Economics for Women</td>
<td>953969029</td>
<td>501(c)(3)</td>
<td>36,000.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
</tr>
<tr>
<td>Opening Doors, Inc.</td>
<td>371417129</td>
<td>501(c)(3)</td>
<td>8,000.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
</tr>
<tr>
<td>South Florida Community Development Coalition, Inc.</td>
<td>450553449</td>
<td>501(c)(3)</td>
<td>17,500.</td>
<td></td>
<td></td>
<td>Equitable Neighborhood Development</td>
<td></td>
</tr>
<tr>
<td>The Resurrection Project</td>
<td>363576073</td>
<td>501(c)(3)</td>
<td>34,500.</td>
<td></td>
<td></td>
<td>Financial Capability</td>
<td></td>
</tr>
<tr>
<td>VENTURES</td>
<td>911704028</td>
<td>501(c)(3)</td>
<td>36,394.</td>
<td></td>
<td></td>
<td>Financial Capability/Small Business</td>
<td></td>
</tr>
</tbody>
</table>

**Total** | **280,120.** | **0.**
Part I  Questions Regarding Compensation

1a  Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

☐ First-class or charter travel  ☐ Housing allowance or residence for personal use
☐ Travel for companions  ☐ Payments for business use of personal residence
☐ Tax indemnification and gross-up payments  ☐ Health or social club dues or initiation fees
☐ Discretionary spending account  ☐ Personal services (such as maid, chauffeur, chef)

b  If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If “No,” complete Part III to explain ..........................................................

2  Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? ..........................................

3  Indicate which, if any, of the following the filing organization used to establish the compensation of the organization’s CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

☐ Compensation committee  ☐ Written employment contract
☐ Independent compensation consultant  ☐ Compensation survey or study
☐ Form 990 of other organizations  ☐ Approval by the board or compensation committee

4  During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a  Receive a severance payment or change-of-control payment? ..........................................

b  Participate in, or receive payment from, a supplemental nonqualified retirement plan? ...........

c  Participate in, or receive payment from, an equity-based compensation arrangement? ..............

If “Yes” to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5  For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a  The organization? ..........................................

b  Any related organization? ..............................

If “Yes” on line 5a or 5b, describe in Part III.

6  For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a  The organization? ..........................................

b  Any related organization? ..............................

If “Yes” on line 6a or 6b, describe in Part III.

7  For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If “Yes,” describe in Part III .

8  Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If “Yes,” describe in Part III .............................

9  If “Yes” on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .............................

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

Schedule J (Form 990) 2018

BAA

REV 11/05/18 PRO
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)–(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>Noel Poyo Executive Director</td>
<td>(i) 190,000. (ii) 0. (iii) 0.</td>
<td>(B)(i) 0. (B)(ii) 0. (B)(iii) 0.</td>
<td>(C) 9,500. (D) 18,230. (E) 217,730.</td>
<td>(F) 0.</td>
<td></td>
</tr>
</tbody>
</table>
Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

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Pt VI, Line 11b: A complete copy of the organization's Form 990 is reviewed by the Executive Director and Chief Financial Officer and provided to each member of the governing Board of Directors. Any questions or concerns are addressed prior to filing.

Pt VI, Line 12c: Board members are provided with the conflict of interest policy. Potential conflicts are brought to the Board for review. Persons with the conflict may not participate in deliberations and decisions regarding the transaction.

Pt VI, Line 15a: The Executive Director's compensation is reviewed by the Board of Directors' executive compensation committee who recommend the compensation package to the full board for their vote and approval. The committee's recommendation is based upon information provided by an independent compensation consultant, including data from multiple executive compensation surveys, as well as their knowledge of comparable compensation arrangements. Decisions are documented in the minutes of the Board of Directors' meetings.

Pt VI, Line 19: The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request. The organization's Form 990 is listed at www.guidestar.org.

Pt XI: Line 9 - See additional information

Pt IX, Line 11g:

Description: Conference/event planning

Total: $17,000

Program services: $17,000

Management and general: $0

Fundraising: $0

Description: Technical assistance consultants
<table>
<thead>
<tr>
<th>Description</th>
<th>Total</th>
<th>Program Services</th>
<th>Management and General</th>
<th>Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information and data research services</td>
<td>$41,623</td>
<td>$41,623</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Photography, videography and graphic design</td>
<td>$14,805</td>
<td>$13,680</td>
<td>$1,125</td>
<td>$0</td>
</tr>
<tr>
<td>Honoraria</td>
<td>$250</td>
<td>$250</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>HR Administration</td>
<td>$83,008</td>
<td>$0</td>
<td>$83,008</td>
<td>$0</td>
</tr>
<tr>
<td>Unrelated business income tax</td>
<td>$7,900</td>
<td>$0</td>
<td>$7,900</td>
<td>$0</td>
</tr>
<tr>
<td>Program services: $0</td>
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<tr>
<td>Management and general: $7,900</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Fundraising: $0</td>
<td></td>
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</tr>
</tbody>
</table>
## Part I  Identification of Disregarded Entities
Complete if the organization answered “Yes” on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Escalera Community Investments, LLC 38-3992870 5404 Wurzbach Rd San Antonio TX 78238 Fund and Asset Management TX 117,869. 127,627. NALCAB</td>
<td></td>
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</tbody>
</table>

## Part II  Identification of Related Tax-Exempt Organizations
Complete if the organization answered “Yes” on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<td>Yes No</td>
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</tbody>
</table>
### Part III  Identification of Related Organizations Taxable as a Partnership.

Complete if the organization answered “Yes” on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512—514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NALCAB Catalyst Fund I, LLC 98-4008966</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>5404 Wurzbach Rd San Antonio TX 78238</td>
<td>Affordable Housing</td>
<td>DE</td>
<td>Escalera Comm</td>
<td>Related</td>
<td>–82.00</td>
<td>194,669.00</td>
<td>×</td>
<td></td>
<td>×</td>
<td>35.83</td>
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</table>

### Part IV  Identification of Related Organizations Taxable as a Corporation or Trust.

Complete if the organization answered “Yes” on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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</table>
### Part V  Transactions With Related Organizations

Complete if the organization answered “Yes” on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?
   - Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
   - Gift, grant, or capital contribution to related organization(s)
   - Gift, grant, or capital contribution from related organization(s)
   - Loans or loan guarantees to or for related organization(s)
   - Loans or loan guarantees by related organization(s)
   - Dividends from related organization(s)
   - Sale of assets to related organization(s)
   - Purchase of assets from related organization(s)
   - Lease of facilities, equipment, or other assets to related organization(s)
   - Lease of facilities, equipment, or other assets from related organization(s)
   - Performance of services or membership or fundraising solicitations for related organization(s)
   - Performance of services or membership or fundraising solicitations by related organization(s)
   - Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   - Sharing of paid employees with related organization(s)
   - Reimbursement paid to related organization(s) for expenses
   - Reimbursement paid by related organization(s) for expenses
   - Other transfer of cash or property to related organization(s)
   - Other transfer of cash or property from related organization(s)

2. If the answer to any of the above is “Yes,” see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of related organization</td>
<td>Transaction type (a—s)</td>
<td>Amount involved</td>
<td>Method of determining amount involved</td>
</tr>
<tr>
<td>(1) NALCAB Catalyst Fund I, LLC</td>
<td>1l</td>
<td>$113,869</td>
<td>Cash received</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
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</tbody>
</table>
**Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

<table>
<thead>
<tr>
<th>Name, address, and EIN of entity</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>Are all partners section 501(c)(3) organizations?</th>
<th>Share of total income</th>
<th>Share of end-of-year assets</th>
<th>Disproportionate allocations?</th>
<th>Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>General or managing partner?</th>
<th>Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) NALCAB Network Investors, LLC 36-4807804</td>
<td>Real Estate</td>
<td>DE</td>
<td>Related</td>
<td>×</td>
<td>-16,630.</td>
<td>971,666.</td>
<td>×</td>
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<td>40.0000</td>
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</tbody>
</table>
Supplemental Information.
Provide additional information for responses to questions on Schedule R. See instructions.

_________________________________________________________________________________

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_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________
### Other Service Fees

**2018**

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Total</th>
<th>(B) Program services</th>
<th>(C) Management and general</th>
<th>(D) Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conference/event planning</td>
<td>17,000</td>
<td>17,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Technical assistance consultants</td>
<td>620,814</td>
<td>620,100</td>
<td>714</td>
<td>0</td>
</tr>
<tr>
<td>Information and data research services</td>
<td>41,623</td>
<td>41,623</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Photography, videography and graphic design</td>
<td>14,805</td>
<td>13,680</td>
<td>1,125</td>
<td>0</td>
</tr>
<tr>
<td>Honoraria</td>
<td>250</td>
<td>250</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>HR Administration</td>
<td>83,008</td>
<td>0</td>
<td>83,008</td>
<td>0</td>
</tr>
</tbody>
</table>

**Total to Form 990, Part IX, line 11g**

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Program services</th>
<th>Management and general</th>
<th>Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>777,500</td>
<td>692,653</td>
<td>84,847</td>
<td>0</td>
</tr>
</tbody>
</table>
### Additional information from your 2018 Federal Exempt Tax Return

**Form 990: Return of Organization Exempt from Income Tax**

**Part XI, Line 9**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Book over tax depreciation</td>
<td>-3,349.</td>
</tr>
<tr>
<td>Tax losses per K-1s over book losses</td>
<td>63.</td>
</tr>
<tr>
<td>Organization costs</td>
<td>1,883.</td>
</tr>
<tr>
<td>Offering expenses</td>
<td>3,767.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,364.</strong></td>
</tr>
</tbody>
</table>

**Schedule D: Supplemental Financial Statements**

**Part XI, Line 2d**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rental expenses</td>
<td>37,013.</td>
</tr>
<tr>
<td>Book loss from subsidiaries</td>
<td>-16,649.</td>
</tr>
<tr>
<td>Book/tax difference in subsidiary organization costs</td>
<td>1,883.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>22,247.</strong></td>
</tr>
</tbody>
</table>

**Schedule D: Supplemental Financial Statements**

**Part XII, Line 2d**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rental expenses</td>
<td>37,013.</td>
</tr>
<tr>
<td>Book over tax depreciation</td>
<td>3,349.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>40,362.</strong></td>
</tr>
</tbody>
</table>

**Schedule D: Supplemental Financial Statements**

**Part XII, Line 4b**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss per K-1, Form 1065</td>
<td>16,630.</td>
</tr>
<tr>
<td>Loss per K-1, Form 1065</td>
<td>82.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16,712.</strong></td>
</tr>
</tbody>
</table>