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Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

		Organization	ons								
	in se orgar	ection 501(c) (o nizations?	ther than section	engage in any of the f 501(c)(3) organization	ons) or in sec	ction 527, rel				Yes	No
а				a noncharitable exe							
	(1) C	ash							1a(1)		
	(2) O	ther assets .							1a(2)		
b	Other	r transactions:									
	(1) S	ales of assets to	a noncharitable exe	mpt organization .					1b(1)	_	
	(2) P	urchases of asse	ets from a noncharita	ıble exempt organiza	tion				1b(2)		
	(3) R	ental of facilities,	, equipment, or othe	r assets					1b(3)		
	(4) R	eimbursement ar	rrangements						1b(4)		
	(5) Lo	oans or loan gua	rantees						1b(5)		
	(6) P	erformance of se	ervices or membersh	ip or fundraising solid	citations				1b(6)		
		-		sts, other assets, or p					1c		
	value value	of the goods, of in any transaction	ther assets, or services on or sharing arrange	s," complete the folloces given by the repo ement, show in colun	orting foundation (d) the value	on. If the found of the goods,	lation rece other ass	eived less ets, or se	s than ervices	fair m recei	narket ved.
(a) Line	no. (b) Amount involved	(c) Name of nonch	aritable exempt organization	on (d) Des	scription of transfe	ers, transactio	ons, and sh	aring arr	angem	ents
	desci	ribed in section 5	501(c) (other than sec	filiated with, or related to the control of the con					Y€	es 🗆] No
<u></u>	іт "Үе		following schedule.		onization	1	(a) Donarda (on of release	nob!-		
(a) Name of organization			(b) Type of organization			(c) Description of relationship					
						+					
	Undo	r popultion of porium. I	declare that I have evering	d this return, including accor	ananying ashadulas	and statements, and	I to the best o	f my knowlo	dae and	haliaf it	t io truo
Sign				d this return, including accon an taxpayer) is based on all in							
Here	· ·	nature of officer or trustee		Date	Board Mem			May the IRS discuss this return with the preparer shown below? See instructions. Yes No			
	Joigii	Print/Type preparer		Preparer's signature	TILLE	Date			PTIN		
Paid Prepa	arer	Time Type proparer a frame		Tropard 3 Signature		Date	Chec self-	ck if if employed	1 1111		
Use C											
		Firm's address ▶ Phone no.									