Department of the Treasury Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

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

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

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

A I	or the	2018 calenda	ar year, or tax year beginning January 1 , 2	2018, a	and ending	Dec	ember	31 , 20 18		
В	Check if ap	oplicable:	C Name of organization			D Emp	loyer ide	ntification number		
	Address o	hange	ange Natik Esperanza							
	Name change Room/suite E Tele							mber		
=								-660-4398		
$\overline{\mathbf{x}}$	Finai retur Amended		City or town, state or province, country, and ZIP or foreign postal code			F Gro	up Exem	nption		
		n pending	Boston, MA 02205-5071			Nun	nber 🕨			
G /	Account	ting Method:	✓ Cash		Н	Check	▶ ☐ if	the organization is not		
1 1	Vebsite	e: >						ch Schedule B		
J T	ax-exen	npt status (che	ck only one) - 🗹 501(c)(3) 🔲 501(c) () ◀ (insert no.) 🗌 4947(a	a)(1) or	<u>52</u> 7	(Form 9	90, 990-	-EZ, or 990-PF).		
			✓ Corporation ☐ Trust ☐ Association ☐ O	ther						
			7b to line 9 to determine gross receipts. If gross receipts are \$200,00							
(Pa	rt II, col	umn (B)) are \$	500,000 or more, file Form 990 instead of Form 990-EZ				▶ \$			
Р	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Ba	alance	es (see the	instru	ctions	for Part I) 📧		
		Check if	the organization used Schedule O to respond to any ques	stion i	n this Part I					
	1		ns, gifts, grants, and similar amounts received				1	71,238.65		
	2	Program se	ervice revenue including government fees and contracts .				2	0.00		
	3	Membersh	ip dues and assessments				3	0.00		
	4	Investment	income				4	0.00		
	5a	Gross amo	unt from sale of assets other than inventory	5a		0.00				
	b	Less: cost	or other basis and sales expenses	5b		0.00				
	С	Gain or (los	ss) from sale of assets other than inventory (Subtract line 5b f	5c	0.00					
	6	Gaming an	d fundraising events:							
	а	Gross ince	ome from gaming (attach Schedule G if greater than							
ne		\$15,000) .		6a		0.00				
Revenue	b	Gross inco	me from fundraising events (not including \$	0.00 of	contribution	าร				
Вè		from fundr	aising events reported on line 1) (attach Schedule G if the							
_		sum of suc	h gross income and contributions exceeds \$15,000)	6b	38	3,940.00				
	С	Less: direc	t expenses from gaming and fundraising events	6c	18	3,560.39				
	d	Net incom	e or (loss) from gaming and fundraising events (add lines 6	a and	l 6b and sul	btract				
		line 6c) .					6d	20,379.61		
	7a	Gross sale	s of inventory, less returns and allowances	7a	2	2,377.13				
	b	Less: cost	of goods sold	7b		680.23				
	С	Gross prof	t or (loss) from sales of inventory (Subtract line 7b from line 7	⁷ a) .			7c	1,696.90		
	8	Other reve	nue (describe in Schedule O)				8	0.00		
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			. ▶	9	93,315.16		
	10	Grants and	similar amounts paid (list in Schedule O)				10	24,175.11		
	11	Benefits pa	aid to or for members				11	0.00		
es	12	Salaries, of	her compensation, and employee benefits 🔀				12	0.00		
Expenses	13	Profession	al fees and other payments to independent contractors 🔲 .				13	41,971.02		
çpe	14	Occupancy	, rent, utilities, and maintenance				14	0.00		
ш	15	Printing, pu	ublications, postage, and shipping				15	620.10		
	16		nses (describe in Schedule O) 🌃				16	10,824.24		
	17	Total expe	nses. Add lines 10 through 16			. ▶	17	77 ,590.47		
Ņ	18	Excess or	deficit) for the year (Subtract line 17 from line 9)				18	15, 724.69		
set	19		or fund balances at beginning of year (from line 27, column							
As		end-of-yea	r figure reported on prior year's return)				19	26,794.23		
Net Assets	20	Other char	ges in net assets or fund balances (explain in Schedule O).				20	0.00		
<u>z</u>	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	0 .		. ▶	21	42 ,518.92		
For	Paper	work Reduct	ion Act Notice, see the separate instructions.	Cat.	No. 10642I			Form 990-EZ (2018)		

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Pai	rt II Balance Sheets (see the instructions f	for Part II)				
	Check if the organization used Schedule	O to respond to a	ny question in this F	Part II		
				(A) Beginning of year	<u> </u>	(B) End of year
22	Cash, savings, and investments			23,947.62	22	42 ,518.92
23	Land and buildings			0.00	23	0.00
24	Other assets (describe in Schedule O)			2,846.61	24	0.00
25	Total assets			26,794.23	25	42 ,518.92
26	Total liabilities (describe in Schedule O)			0.00	26	0.00
27	Net assets or fund balances (line 27 of column	(B) must agree with	n line 21)	26,794.23	27	42 ,518.92
Par	t III Statement of Program Service Accom	plishments (see th	e instructions for P	art III)		
	Check if the organization used Schedule	O to respond to a	ny question in this F	Part IÍI 🗹		Expenses
What	t is the organization's primary exempt purpose?	Education and econ	omic development		١,	quired for section
Dasc	cribe the organization's program service accomplis	ehments for each o	f its three largest or	ogram services	1	(c)(3) and 501(c)(4) anizations; optional for
as m	neasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	nanner, describe the			_	ers.)
28	Education and small enterprise (Guatemala): Contin	ued our secondary e	ducation scholarship	program that		
	provides tuition support and tutoring for X students	and Graduate study	stipends for Y studen	ts. Continued		
	support for a language and cultural immersion progr	ram to expand and su	ıstain this program.			
?1	(Grants \$ 9,200) If this amount	includes foreign gra	ants, check here .	> 🗸	288	9,200.00
29	Edcucation and child developemnt (Guatemala): Cor	ntinued support of a	travelling library to pr	ovide books		
	children who do not have access to the library in tow	vn or schools. The p	rogram serves an est	imated 500		
	children.	'	9			
	(Grants \$ 1,717) If this amount	includes foreign gra	ants. check here .	> 🗸	298	1,717.00
30	Yo'onik Learning Center, Zinacantan, Chipas, Mexico					,
	remedial education and scholarships for X students.		-			
	prep scholarships in exchange for their help in cond			ary and conego		
	(Grants \$ 13,258.11) If this amount			▶ ☑	30a	13,258.11
21	Other program services (describe in Schedule O)				302	15,250.11
31	. •		nts, check here .		31a	
20	Total program service expenses (add lines 28a t				32	
	(a) Name and title	(b) Average hours per week devoted to position	(Forms W-2/1099-MISC)	(d) Health benefits, contributions to employ benefit plans, and deferred compensatio	` `	Estimated amount of other compensation
I.e. D	Name of Martin Obets		(if not paid, enter -0-)	deferred compensatio	n	
	Pamsey-North - Chair	2				
	awyer Ave, Apt 2, Boston, MA 02125		0		0	0
	Linz - Treasurer	2				
	Prestige Ln, Ave Maria, FL 34142		0		0	0
	Reitenauer - Vice Chair	2				
4935	NE 8th St, Portland, OR 97211	_	0		0	0
Libby	y O'Kane - Director	1				
3712	Evans St, Apt 8, Los Angeles, CA 90027	'	0		0	0
Bruc	e Chase - Director					
19 Er	mpire Avenue, Glen Falls, NY 12801	1	0		0	0
	son Nace - Director	_				
129 F	Placita de Oro, Sante Fe, NM 87501	1	0		0	0
	Feurback - Director				\top	
	Linger Way, Colorado Springs, CO 80919	1	0		0	0
	larvey - Director				+	
	· -	1	0		0	0
	Port Royale Dr N, Apt 106, Ft Laudale, FL 33308 a Smart - Executive Director Km1.75 Carr.		U		<u> </u>	U
		40	44.070.00			•
	nque-La Libertad, Palenque, Chiapas, Mexico		14,879.02		0	0
	a Colvin - Asst Executive Director Calle Comitas	40				
	B, El Cerillo, SCLC, Chiapas, Mexico 29220		8,675.00		0	0
Will I	Kell - Field Liason	40				
_		10	8,400.00		0	0
			8,400.00		<u> </u>	

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Part	•				•
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s Part			-
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No 🗸	
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		_	?:
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~	
b b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		~	?1
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b			
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		~	?:
b 39 a	If "Yes," complete Schedule L, Part II and enter the total amount involved	-			
b 40a	Gross receipts, included on line 9, for public use of club facilities				
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		v	??
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization				
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		~	_
41	List the states with which a copy of this return is filed ► New Hampshire				_
42a	The organization's books are in care of ▶ Telephone no. ▶				
	Located at ► ZIP + 4 ►				-
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	42b	Yes	No 🗸	
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country ▶	42c		✓	-
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. Yes	► □ No	-
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	163	V	
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		<u> </u>	
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		✓	
	explanation in Schedule O	44d			-
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		~	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45h			

orm 99	90-EZ (2018)					F	Page 4
						Yes	No
46	Did the organization engage, directly or in						
	to candidates for public office? If "Yes," of		Part I		· 46		✓
Part	VI Section 501(c)(3) Organization All section 501(c)(3) organization 50 and 51. Check if the organization used Sc	ns must answer que			e tables	for lin	es . 🗆
	Officer if the organization asca so	noddio o to roopond	to dily quodion in a			Yes	No
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par	activities or have a s	section 501(h) election	n in effect during the	tax . 47		1
48	Is the organization a school as described i	n section 170(b)(1)(A)(ii)? If "Yes," complete S	Schedule E	. 48		✓
49a	Did the organization make any transfers t						✓
b	If "Yes," was the related organization a se	ection 527 organizatio	n?		49		<u></u>
50	Complete this table for the organization's	s five highest compens	sated employees (other	er than officers, direct	ors, trust	ees, ar Nono '	id key
	employees) who each received more than	n \$100,000 of comper	nsation from the organ	(d) Health benefits,	e, enter	None.	
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contributions to employee benefit plans, and deferred compensation	(e) Estima other co	ted amo mpensa	
					,		
		-					
f	Total number of other employees paid ov	ver \$100,000	. >		<u> </u>		
51	Complete this table for the organization \$100,000 of compensation from the organization	a's five highest compe anization. If there is no	ensated independent one, enter "None."	contractors who each	h receive	d more	e thar
	(a) Name and business address of each indepen	dent contractor	(b) Type of serv	ice (c) Compens	ation	
			•		*		
d	Total number of other independent contr	ractors each receiving	over \$100,000	>			
52	Did the organization complete Sched	ule A? Note: All se	ection 501(c)(3) orga			s 🗌	No
Jnder (cenalties of perjury, I declare that I have examined this prrect, and complete. Declaration of preparer (other than	return, including accompan an officer) is based on all info	ying schedules and stateme ormation of which preparer h	ents, and to the best of my knas any knowledge.	nowledge a	nd belief	i, it is
	(tane)	over \$100,000					
Sign	Signature of officer			Date			

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2018

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization 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.

Inspection

Employer identification number

Natik	Esperanza					16165	50968
Pai	t I Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instructio	ns.
The o	organization is not a private founda		,		•	,	
1	☐ A church, convention of church	•					
2	A school described in section		,			• •	
3	A hospital or a cooperative ho	,				, , , ,	
4	A medical research organization	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	iii). Enter the
-	hospital's name, city, and stat		- 11				
5	An organization operated for section 170(b)(1)(A)(iv). (Com	plete Part II.)			·		ai unit described in
6	A federal, state, or local gover						
7	An organization that normally described in section 170(b)(1)			port from	n a gover	nmental unit or from	the general public
8	A community trust described i	n section 170(b)	(1)(A)(vi). (Complete	Part II.)			
9	An agricultural research organ or university or a non-land-gra university:	int college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or
10	An organization that normally receipts from activities related support from gross investmen acquired by the organization a	to its exempt fu t income and un	nctions—subject to c related business taxal	ertain exc ble incon	ceptions, ne (less se	and (2) no more that ection 511 tax) from	n 33¹/₃% of its
11	An organization organized and						
12	☐ An organization organized and	operated exclus	sively for the benefit o	f, to perfo	orm the fu	unctions of, or to car	ry out the purposes
	of one or more publicly support	orted organizatio	ns described in secti	ion 509(a	ı)(1) or se	ection 509(a)(2). See	e section 509(a)(3).
	Check the box in lines 12a thro	ough 12d that des	scribes the type of sup	porting o	organizati	on and complete line	s 12e, 12f, and 12g.
а	☐ Type I. A supporting organ						
	the supported organization supporting organization. Y					he directors or trust	ees of the
b	Type II. A supporting orga control or management of organization(s). You must	the supporting o	rganization vested in	the same			
С	Type III functionally integ its supported organization						ally integrated with,
d	☐ Type III non-functionally that is not functionally inte requirement (see instructionally integrated).	grated. The orga	nization generally mu	st satisfy	a distribu	ıtion requirement an	
е	Check this box if the organ functionally integrated, or						e II, Type III
f	Enter the number of supported	organizations .					
g	Provide the following information	n about the supp	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Toto							

(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) (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 **(e)** 2018 (f) Total Gifts, grants, contributions, 1 membership fees received. (Do not include any "unusual grants.") . . . revenues levied organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 4 The portion of total contributions by 5 each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 % Public support percentage from 2017 Schedule A, Part II, line 14 15 331/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 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 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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

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

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

Secti	on A. Public Support			•	·	,	
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")	71,329	47,500	56,955	51,574	71,239	298,597
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose	5,401	9,177	23,131	13,260	38,940	89,909
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the	U	U	U	U	U	
•	organization's benefit and either paid to						
	or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	76,730	56,677	80,086	64,834	110,179	388,506
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	07.040	7.745	0.700	44.057	47.750	75.074
		26,319	7,745	9,700	14,857	16,750	75,371
b	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	0	0	0	0	0	0
С	Add lines 7a and 7b	26,319	7,745	9,700	14,857	16750	75,371
8	Public support. (Subtract line 7c from						
	line 6.)						313,135
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	76,730	56,677	80,086	64,834	110,179	388,506
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources .	0	0	0	0	0	0
b	Unrelated business taxable income (less	•					
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
10	= -	0	0	0	0	0	0
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11,	-	-	-	-	-	
	and 12.)	76,730	56,677	80,086	64,834	110,179	388,506
14	First five years. If the Form 990 is for the	•	's first, second	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he						▶ □
	on C. Computation of Public Suppor					11	
15	Public support percentage for 2018 (line 8	, ,,,	•	, (,,		15	80.5 %
16 Secti	Public support percentage from 2017 Schon D. Computation of Investment Inc.					16	68.2 %
17	Investment income percentage for 2018 (v line 13 colu	mn (f))	17	0 %
18	Investment income percentage from 2017			-		18	0 %
19a	331/3% support tests—2018. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2017. If the organiz						3 ¹ /3%, and
	line 18 is not more than 331/3%, check this I	oox and stop h	ere. The organi	zation qualifies	as a publicly su	upported organ	ization 🕨 🗌
20	Private foundation. If the organization di	d not check a	box on line 14	19a, or 19b, o	heck this box	and see instru	ctions

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

CU	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in 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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in 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).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).			
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.	8		
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.	9a		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9b		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section	9c		
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	V Supporting Organizations (continued)		-	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			ı
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in 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.			
		1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
	17 0 0	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
<u> </u>	11 3 17	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
•		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.			
Sooti	on E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	notru	otion	-)
	The organization satisfied the Activities Test. Complete line 2 below.	115tru	Cuons	5).
a b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
C	The organizations the parent of each of its supported organizations. Complete time o below.	see in	etructi	ions)
2	Activities Test. <i>Answer (a) and (b) below.</i>	000 111	Yes	
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
а	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.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
-	of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the</i>			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		(5) 6
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	_	tegrated Type III supporti	ng organization (see
instructions).	y 1111	logration Type III support	ng organization (366

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Sect	ion D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity		rted	
3	Administrative expenses paid to accomplish exempt purp	onses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	oses of supported orga	HIZALIONS	
	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	nonsive	
Ū	(provide details in Part VI). See instructions.	ir tilo organization lo roc	POLICIVO	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	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.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
Δ	Excess from 2018			

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

Schedule B

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

Natik Esperanza

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

161650968

Organization type (check one): Filers of: Section: Form 990 or 990-EZ ✓ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line

Special Rules

contributor's total contributions.

General Rule

13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific. literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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

Name of organization

Employer identification number

161650968

Natik Esperanza 161650968 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (b) (c) (d) (a) Νo. Name, address, and ZIP + 4 **Total contributions** Type of contribution Church by the Sea Person ~ 1 **Payroll** 14,694.00 2700 Mayan Drive Noncash (Complete Part II for Fort Lauderdale, FL 33316 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 **Nancy Mauro** Person ~ **Payroll** 5,000.00 Noncash 2100 S. Ocean Lane (Complete Part II for Fort Lauderdale, FL 33316 noncash contributions.) (d) (a) (b) (c) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash

(Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate co	pies of Part II if additional space	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization **Employer identification number** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or Part III (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held fŕom Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

General Instructions

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

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

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

What's New

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

Purpose of Schedule

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

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

Who Must File

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

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

See the separate instructions for these lines on those forms.

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

Accounting Method

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

Public Inspection

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

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

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

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

Contributions To Be Included on Part I

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

Contributions

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

General Rule

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

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

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

- Section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and nonexempt private foundations described in section 6033(d)), or
- Section 527 political organizations.

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

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

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

Special Rules

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

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

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

Section 501(c)(7), (8), or (10) organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that weren't for an exclusively religious, charitable, etc., purpose, list in Part I contributions from each contributor who contributed \$5,000 or more during the tax year, as described under *General Rule*, earlier.

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

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

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

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

Specific Instructions



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

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

Part I. In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number

consecutively. In column (b), section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and section 501(c)(3) nonexempt private foundations) and section 527 organizations enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization doesn't know the donor's identity. Other organizations enter "N/A" in place of each contributor's name, address, and ZIP code. In column (c), enter the amount of total contributions for the tax year for the contributor listed.

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Internal Revenue Service Name of the organization Employer identification number Natik Esperanza 161650968 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations e Solicitation of non-government grants а Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (or retained by) organization (iii) Did fundraiser have (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity custody or control of contributions? or entity (fundraiser) from activity fundraiser listed in col. (i) Yes No 1 2 3 4 5 6 7 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3 registration or licensing.

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

				(a) Event #1 Guatemala October (event type)	(b) Event #2 JHS Annual Trip (event type)	(c) Other events Univ of Denver (total number)	(d) Total events (add col. (a) through col. (c))		
Revenue	1	1	Gross receipts	3,475	8,465	27,000	38,940		
	2	2	Less: Contributions	0	0	0	0		
	3	3	Gross income (line 1 minus	0.475	0.445	07.000			
	4	4	Cash prizes	3,475	8,465	27,000	38,940		
	5	5	Noncash prizes						
sesu	e	6	Rent/facility costs						
Direct Expenses	7	7	Food and beverages						
Direct	ε	3	Entertainment						
	٤	9	Other direct expenses .	2,673	5,123	10,764	18,560		
	10		Direct expense summary. Ad Net income summary. Subtra				18,560 20,380		
Pa			Gaming. Complete if the \$15,000 on Form 990-E2	e organization answe			or reported more than		
Revenue				(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))		
 Be	1	1	Gross revenue						
ses	2	2	Cash prizes				<u> </u>		
Direct Expenses	3	3	Noncash prizes						
Direct	4	4	Rent/facility costs						
	5	5	Other direct expenses .						
	e	3	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No			
	7 Direct expense summary. Add lines 2 through 5 in column (d)								
	8	3	Net gaming income summary	y. Subtract line 7 from li	ne 1, column (d)				
	а	ls t	ter the state(s) in which the or the organization licensed to co No," explain:	onduct gaming activities	s in each of these states		🗌 Yes 🗌 No		
10			ere any of the organization's g	=	, suspended, or termina	ated during the tax year			

cneau	le G (Form 990 or 990-EZ) 2018		Page J			
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No			
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	☐ No			
13	Indicate the percentage of gaming activity conducted in:					
а	The organization's facility		%			
b	An outside facility		<u>%</u>			
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:					
	Name ►					
	Address►					
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	□Yes	□No			
b	b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$					
С	If "Yes," enter name and address of the third party:					
	Name ►					
	Address ►					
16	Gaming manager information:					
	Name ►					
	Gaming manager compensation ► \$					
	Description of services provided ►					
	□ Director/officer □ Employee □ Independent contractor					
17	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to					
a	retain the state gaming license?	☐ Yes	☐ No			
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$		`			
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (in Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition See instructions.					
						

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

Natik Esperanza	161650968					
Form 990EZ, Part I, Line 16 Other Expense Detail: Total \$10,824.24						
Bank Charges: \$555.00						
Communications: \$523.67						
Insurance: \$3,052.95						
Merchant Services: \$171.66						
Travel: \$2,286.69						
Office Expenses: \$222.31						
Fund Raising Expenses: \$662.47						
Business Registrations: \$75.00						
Equipment Write-off: \$2,993.09						
Website: \$281.40						
Form 990EZ was amended on 2/18/2019 to reflect a bill for Website design services completed in 2018 but not presented until after the						
original return had been filed. Line 13 of form 990 EZ was increased by \$5,000 from \$36,971.02 to \$41,971.02. This change required that						
Line 17 be increased by \$5,000 from \$72,590.47 to \$77,590.47; Line 18 to be decreased to \$15,724.69	and Lines 21, 22, 25 and 27 be					
decreased from \$47,518.92 to \$42,518.92.						