SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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. ► See separate instructions.

OMB No. 1545-0047

Employer identification number

Par	Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.						
1	Indicate whether the organization raised funds through any of the following activities. Check all that apply.						
а	☐ Mail solicitations				ion of non-govern		
b	Internet and email solicitatio	ne	f		ion of governmen		
		113					
С	Phone solicitations		g ∟	_ Special i	fundraising events	5	
d	In-person solicitations						
2a	Did the organization have a writ						
b	or key employees listed in Form If "Yes," list the ten highest paid	· · · · · · · · · · · · · · · · · · ·	-		•	-	
b	compensated at least \$5,000 by			uraisers) p	ursuant to agreen	ients under which th	e fundraiser is to be
						(v) Amount paid to	
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				•			
3	List all states in which the orga registration or licensing.	nization is regis	tered or lic	ensed to s	olicit contribution	s or has been notifie	ed it is exempt from

Pa	rt II	Fundraising Events. Con than \$15,000 of fundraisingross receipts greater tha	ng event contributions			
		J p	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
Revenue			(event type)	(event type)	(total number)	col. (c))
	4	Gross receipts				
	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)				
ınses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .				
Pa	10 11 rt III	Direct expense summary. Ac Net income summary. Comb Gaming. Complete if the than \$15,000 on Form 99	ine line 3, column (d), a e organization answe	nd line 10		reported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes %☐ No	☐ Yes% ☐ No	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		()
	8	Net gaming income summary	y. Combine line 1, colur	nn d, and line 7		
	a Is	nter the state(s) in which the or the organization licensed to o	ganization operates gar	ning activities: in each of these states	?	U Yes U No
10		ere any of the organization's g "Yes," explain:	aming licenses revoked			

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11 12	Does the organization operate gaming activities with nonmembers?		′es □ ′es □	
13	Indicate the percentage of gaming activity operated in:	r	es 🗀	NO
a	The organization's facility			%
b	An outside facility			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ►			
	Address►			
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		∕es □	No
	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
Ü	Name ►			
	Address►			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		∕es □	l No
b	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. Complete this part to provide the explanations required by Part I, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also co part to provide any additional information (see instructions).			i