SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name	of the organization							Emplo	yer ide	ntificat	ion nui	mber			
Par	Excess Beneficial Excess Benef							ction 501(c)(29) 5a or 25b, or Fo					40b.		
1	(a) Name of disqualified	porcon	(b) Relationship between disqualified person and				(a) Description of tran			ncactic			(d) Corrected?		
•	1 (a) Name of disqualified person		organization				(c) Description of transaction				11		Yes	No	
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
2	Enter the amount		I by the orgar	nizatior	n manag	gers or dis	qualif	ied persons du	ıring t	he ye	ar				
	under section 4958										▶ \$	<u> </u>			
3	Enter the amount of	f tax, if any, on	line 2, above,	reimb	ursed by	the organ	izatio	ı			▶ \$	S			
Pari	Complete if th	or From Inter e organization eported an amo	answered "Ye	s" on F				38a or Form 9	90, Pa	art IV,	line 2	6; or i	f the		
		4) 5 1 11 11	() 5	/ n .		() 0 : :		(0.0.1)			4		(2) 14/		
(a) Name of interested person (b) Relationshi with organization		(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the		(e) Origir principal an			(g) In ((g) In default?		by board or		itten nent?	
				organ	ization?	' '						nittee?			
				То	From	-			Yes	No	Yes	No	Yes	No	
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															
(10)															
Total							.▶	\$							
Part		sistance Bene e organization				0, Part IV, I	ine 27	7.							
			onship between interested on and the organization (c) Amount of assista			of assistance		(d) Type of assistand	(e) Purpose of assistance						
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															
(10)															

Part IV	Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.											
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?							
					Yes	No						
(1)												
(2)												
(3) (4)												
(5)												
(6)												
(7)												
(8)												
(9) (10)												
Part V	Supplemental Information. Provide additional information for	r responses to questions	on Schedule L (see	instructions).								