				IC DISCLOSURE (							
Form	9	90	Under section 501(c), 527, or 494		ue Code (ex	cept private foundatio	ns) OMB No. 1545-0047				
		of the Treasury		ecurity numbers on this for			Open to Public				
		nue Service	Information about Formation	orm 990 and its instructions	is at www.ii	s.gov/form990.	Inspection				
BC	or th	C Name o	dar year, or tax year beginning J		d ending	D Employer identified	cation number				
	Addre	SANT	A BARBARA SYMPHONY	ORCHESTRA		~					
	chang	e ENDO	WMENT TRUST			05.6	542234				
-	Name chang		pusiness as r and street (or P.O. box if mail is not de	l'usual ta atuant address)	Room/suite						
	Final Final return termin		, )563-0821 798,968.								
_	ated Amer	City or t	town, state or province, country, and			G Gross receipts \$					
-	Ireturr	DANT	TA BARBARA, CA 931			H(a) Is this a group re					
L	Appli tion pend	ing <b>F</b> Name a	and address of principal officer:DOU AS C ABOVE	GLAS MCCARINEI		for subordinates <b>H(b)</b> Are all subordinates in					
				)  (insert no.)  4947(a)(1	) or 527		list. (see instructions)				
		tempt status: L	<b>X</b> 501(c)(3) 501(c) (	(IIISelt 110.) 4947(a)(1		H(c) Group exemption					
-	_	f organization:	Corporation X Trust A	ssociation Other	I Vear		State of legal domicile: CA				
Contraction of the local division of the loc	irt I	Summary			LICA		Vi otate el logal definicile. Ozz				
Га		Driefly describ	be the organization's mission or mos	t significant activities. THE	SANTA	BARBARA SYM	PHONY				
Activities & Governance	1	ENDOWME	ENT TRUST MANAGES I	THE INVESTMENTS	FOR TI	HE SANTA BAR	BARA				
/err	2		ox      if the organization disco				5				
Go	3		oting members of the governing body				5				
ø	4		Number of independent voting members of the governing body (Part VI, line 1b)								
ties	5		I number of individuals employed in calendar year 2016 (Part V, line 2a)       5         I number of volunteers (estimate if necessary)       6								
tivi	6		ed business revenue from Part VIII, c				7				
Ac			d business taxable income from Form				0.				
		Net unrelated	a business taxable income from Form	1990-1, III e 34		Prior Year	Current Year				
	8	Contributions	s and grants (Part VIII, line 1h)		-	72,000.	20,199.				
Revenue	9					0.	0.				
svel	10 Investment income (Part VIII, column (A), lines 3,					70,659.	206,092.				
Å	11		ue (Part VIII, column (A), lines 5, 6d, 8		0.	0.					
	12		e - add lines 8 through 11 (must equa			142,659.	226,291.				
	13		similar amounts paid (Part IX, column			261,461.					
	14		d to or for members (Part IX, column			0.					
ŝ	15		er compensation, employee benefits			0.	0.				
Expenses			fundraising fees (Part IX, column (A)			0.	0.				
per	1		ising expenses (Part IX, column (D), li		0.						
ñ	17		ses (Part IX, column (A), lines 11a-11			36,579.	34,441.				
	18		ses. Add lines 13-17 (must equal Part			298,040.					
	19		s expenses. Subtract line 18 from lin			-155,381.	-74,863.				
Net Assets or Fund Balances						Beginning of Current Year					
sets	20	Total assets	(Part X, line 16)			5,576,597	5,438,698.				
AS	21	Total liabilitie	es (Part X, line 26)			0.					
Fun	22	Net assets o	or fund balances. Subtract line 21 fro	m line 20		5,576,597	5,438,698.				
		Signatu									
			y, I declare that I have examined this retur te. Declaration of preparer (other than offi				ny knowledge and belief, it is				
						10/	26/17				
Sig	In		ure of officer			Date	ŀ				
He	re		GLAS MCCARTNEY, LE	AD TRUSTEE							
		1	r print name and title			Data					
			reparer's name	Preparer's signature		Date Check	X PTIN				
Pai			. ANIKOUCHINE			self-emple					
	parer				10	Firm's EIN 🕨	81-4869549				
Use	e Only	Firm's addres			.18						
			GOLETA, CA 9311	7		Phone no.8	05-451-5430				

May the IRS di	scuss this re	turn with the prep	arer shown a	bove? (see in	nstructions)	
632001 11-11-16	LHA For	Paperwork Redu	ction Act No	tice, see the	senarate in	structions.

X Yes No Form 990 (2016)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	SANTA BARBARA SYMPHONY ORCHESTRA		
	1 990 (2016) ENDOWMENT TRUST	95-6542234	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission: PROVIDE GENERAL SUPPORT FOR THE SANTA BARBARA SYMPHON		
	ASSOCIATION THROUGH CONTRIBUTIONS FROM THE GENERAL PU		ч.
	INVESTMENTS.		
2	Did the organization undertake any significant program services during the year which were not listed on the	e	
	prior Form 990 or 990-EZ?		s X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program servic	es?Yes	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services		
	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 \$ 266,713. including grants of \$ 266,713. ) (R THE SANTA BARBARA SYMPHONY ENDOWMENT TRUST MANAGES CON		)
	THE GENERAL PUBLIC IN ORDER TO PROVIDE GENERAL SUPPORT		
	BARBARA SYMPHONY ORCHESTRA.		
4b	(Code:) (Expenses \$ including grants of \$) (R	evenue \$	)
4c	(Code:) (Expenses \$ including grants of \$) (R	levenue \$	)
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses ► 266,713.		
		Form	<b>990</b> (2016)
63200	<sup>12</sup> 11-11-16		
	2		

15141025 150929 80592 2016.03050 SANTA BARBARA SYMPHONY ORCH 80592\_1

ENDOWMENT TRUST

Form 990 (2016)

1         Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?         1         X           2         Is the organization request on complete Schedule B, Schedule C, Part I         2         X           3         Did the organization request in direct political campaign activities on behalf of or in opposition to candidates for public office? If "res," complete Schedule C, Part I         3         2           4         Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(b) election in effect during the say and II "res," complete Schedule C, Part I         3         2           5         Is the organization section 501(b)(4), 501(c)(5), or 601(c)(8) organization that receives membership dues, assessments, or similar mounts as defined in Revenue. Proceedinge 89:101 ("res," complete Schedule C, Part II         6         2           6         Did the organization maintian any donor advised funds or any similar funding easements to preave one pace, the environment, histonic land areas, or historic structures? II "res," complete Schedule D, Part II         7         2           10         Did the organization meanitin on levels of a sinilar amount in Part X, ine 21, for escrow or custodial account liability, serve as a custodian in anount to intestment of an account res inilar amount is part to integration report an amount for levels Schedule D, Part V         10           10         Did the organization report an amount for levels Schedule D, Part V         11         10         X <t< th=""><th>Pa</th><th>t IV Checklist of Required Schedules</th><th></th><th></th><th></th></t<>	Pa	t IV Checklist of Required Schedules			
If "Yes," complete Schedule A       1       X         2       Is the organization regulate to complete Schedule B, Schedule of Contributored       1       X         3       Did the organization regulate to complete Schedule C, Part I       1       X         4       Section 501(c)(3) organizations. Did the organization regulates in botbying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II       2         5       Is the organization a section 501(c)(4) 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 8H 21/1 "Yes," complete Schedule C, Part II       6         6       Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II       6         7       Did the organization maintain collections of vorks of art, historical treasures, or other similar assets? II "Yes," complete Schedule D, Part II       7         8       Did the organization maintain collections of vorks of art, historical treasures, or other similar assets? II "Yes," complete Schedule D, Part II       7         9       Did the organization report an amount for investments, or asset in temporarity restricted endowmersts, permanent endownerst, or asset organization, report an amount for investmesting, or omplete Schedule D, Part V       10         10       Did the organization report an amount for investmesting - other securities in Part X, line 17 H "Yes," complete Schedule D, Part V <t< th=""><th></th><th></th><th></th><th>Yes</th><th>No</th></t<>				Yes	No
If "Yes," complete Schedule A       1       X         2       Is the organization regulate to complete Schedule B, Schedule of Contributored       1       X         3       Did the organization regulate to complete Schedule C, Part I       1       X         4       Section 501(c)(3) organizations. Did the organization regulates in botbying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II       2         5       Is the organization a section 501(c)(4) 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 8H 21/1 "Yes," complete Schedule C, Part II       6         6       Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II       6         7       Did the organization maintain collections of vorks of art, historical treasures, or other similar assets? II "Yes," complete Schedule D, Part II       7         8       Did the organization maintain collections of vorks of art, historical treasures, or other similar assets? II "Yes," complete Schedule D, Part II       7         9       Did the organization report an amount for investments, drug assenduced D, Part IV       8         10       Uth eorganization report an amount for investmesting, or omplete Schedule D, Part V       10         10       Uth eorganization report an amount for investmesting, or omplete Schedule D, Part V       10 <t< th=""><th>1</th><th>Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</th><th></th><th></th><th></th></t<>	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
2       Is the organization required to complete Schedule of Contributors?       2       X         3       Did the organization engage in ideot or indicet oplitical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I       3       2         4       Section 501(c(k) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the taxyear II "Yes," complete Schedule C, Part II       4       2         5       Is the organization asction 501(c(k), 501(c)(k), or 010(c)(k) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Proceedue C, Part II       5       2         6       Dud the organization maintain any donor advised funds or any similar funds or accounts? II "Yes," complete Schedule D, Part I       6       2         7       Did the organization maintain any donor advised of anot similar amounts in such funds or accounts? II "Yes," complete Schedule D, Part I       6       2         9       Did the organization maintain collections of works of art, historical treasures, or other similar assets II "Yes," complete Schedule D, Part II       7       2         9       Did the organization diverse of an amount for sant, historical treasures, or other similar assets II "Yes," complete Schedule D, Part V       10       X         9       Did the organization diverse of an amount for index buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 1		If "Yes," complete Schedule A	1		
public office? If "res," complete Schedule C, Part I         3         2           4         Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(i)(i) election in effect during the tax year' II "res," complete Schedule C, Part II         4         2           5         Is the organization as action 501(c)(3), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revene Proceedure 84:191" Wes," complete Schedule C, Part II         5         2           6         Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for Prices," complete Schedule D, Part II         6         2           7         Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II         7         2           9         Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?         9         2           10         Did the organization, discusse any of the following questions is "Yes," then complete Schedule D, Part V, UI, VII, V, or X as applicable.         11a         2           a         Did the organization report an amount for investments - robram re	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
4       Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II       4       2         5       Is the organization and control 501(c)(6), 501(c)(6), or 501(c)(6) or ganization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment, including assements to preserve open space, the environment, historical markers of the site Schedule D, Part II       7       2         9       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       8       2         10       Did the organization serve to any of the following questions is "Yes," then complete Schedule D, Part VI       10       X         11       If the organization report an amount for investments - orbers escurities in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       2         12       Did the organization report an amount for inves	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
4         Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "xes," complete Schedule C, Part II         4         2           5         Is the organization and and activate of the section 501(h) election in effect during the tax year? If "xes," complete Schedule C, Part II         6         2           6         Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds exements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.         6         2           7         Did the organization report an amount in Part X, line 21, for server or custodial account liability, serve as custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negatization services?         9         2           10         Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V         10         X           11         The organization report an amount for investments - present relate in Part X, line 10? If "Yes," complete Schedule D, Part X line 10? If "Yes," complete Schedule D, Part VI         11a         2           11         Ithe organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Sc		public office? If "Yes," complete Schedule C, Part I	3		X
5       Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 94.197 II "Yes," complete Schedule C, Part II       5       2         6       Did the organization maintain any donar advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice or hold a conservation assements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Part II       6       2         7       2       3       Did the organization receive or hold a conservation assements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Part II       8       2         9       Did the organization report an amount in Part X, line 21, for secrem or custodial account liability, serve as a custodian for amounts no tilsted in Part X, or provide codit counseling, debt management, credit repair, or debt negotiation services?       9       2         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? II "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for investments - program related in Part X, line 10? II "Yes," complete Schedule D, Part V       11       11       X         12       Did the organization report an amount for investments - program related in Part X, line 10? II "Yes,"	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part II       5         6       Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7         8       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9         10       Did the organization (incetry or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       11         2       Did the organization report an amount for investments - orber securities in Part X, line 12? If "Yes," complete Schedule D, Part VI       11         2       Did the organization report an amount for investments - orber securities in Part X, line 13? If "Yes," complete Schedule D, Part VI       11         2       Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Sc			4		X
6       Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ( <i>II</i> "Yes," complete Schedule D, Part I         7       Did the organization receive or hold a conservation easements to provide assements to provide asset II "Yes," complete Schedule D, Part II         8       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts on taisted in Part X, ior provide credit counseling, debt management, credit repair, or debt negotiation services?       9       2         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-mownems?       10       X         11       If the organization report an amount for lawst memts - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       X         12       Did the organization report an amount for investments - other assets in Part X, line 10? If "Yes," complete Schedule D, Part XII       11       X         13       Did the organization report an amount for investments - other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If Y	5				
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I       6       2         7 Did the organization receive or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7       2         8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       8       2         9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       2         10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       2         12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       2         13 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       2         14 Did the organization report an amount for investments - program related in Part X, line 16? If "Yes," complete Schedule D, Part X<		similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
<ul> <li>7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II.</li> <li>8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part IV.</li> <li>9 Did the organization manument in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part V</li> <li>10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part V</li> <li>11 If the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VI</li> <li>11 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VI</li> <li>11 Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part XI</li> <li>11 Did the organization report an amount for other liabilities in Part X, line 25 If 'Yes,' complete Schedule D, Part X</li> <li>12 Did the organization report an amount for other liabilities in Part X, line 25 If 'Yes,' complete Schedule D, Part X</li> <li>14 Did the organization separate or consolidated financial statements for the tax year? If 'Yes,' complete Schedule D, Part X</li> <li>14 Did the organization aschool described in section 170(b)(1)(V)(V)(V) I' Yes,' complete Schedule D, Part X</li> <li>15 Did the organization aschool described in section 170(b)(1)(V)(V)(V) I' Yes,' comple</li></ul>	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7       2         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       8       8         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       2         10       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts on quasi-endowments? If "Yes," complete Schedule D, Part V       9       2         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       10       X         11       If the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11a       2         12       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11b       X         13       Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11t			6		X
8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III       8       2         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       2         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII       11       X         13       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11       11       X         14       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI       111       X         15       Did the organization ascheration tor other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If	7				
Schedule D, Part III       8       2         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       2         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, permanent endowments, or quasi-endowments?       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       11       X         13       assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11       11       X         14       Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11       11       X         15       Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11       11       X         16       Did the organization separate independent audited financial statements for the t			7		X
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amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?     9     2       10     Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V     10     X       11     If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VIX, or X as applicable.     10     X       a     Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V     11a     2       b     Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII     11b     X       c     Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII     11d     2       d     Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X     11e     2       d     Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X     11e     2       12a     Did the organization included in consolidated financial statements for the tax year? If "			8		X
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<ul> <li>c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII</li> <li>d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X ine 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X ine 25? If "Yes," complete Schedule D, Part X</li> <li>e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X</li> <li>f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII</li> <li>b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional</li> <li>11 the US X</li> <li>12 b X</li> <li>13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E</li> <li>b Did the organization navered "No" to line 12a, then completing Schedule E</li> <li>13 Z</li> <li>b Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign invividuals? If "Yes," complete Schedule F, Parts II and IV</li> <li>16 Did the</li></ul>		• •	11b	х	
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12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       12a         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Parts XI and XII is optional       13       2         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       2         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       2         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       2         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       16       2	f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
Schedule D, Parts XI and XII       12a       2         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       2         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       2         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       2         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       2         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       16       2		the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
<ul> <li>b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</li> <li>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E</li> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV</li> <li>16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV</li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I</li> </ul>	12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
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or more? If "Yes," complete Schedule F, Parts I and IV	b				
<ul> <li>15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i></li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> </ul>			4.41-		x
foreign organization? If "Yes," complete Schedule F, Parts II and IV     15     2       16     Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV     16     2       17     Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I     17     2	45		140		
16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       2         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       2	15		45		x
or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> <b>16 2 17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> <b>17 2</b>	16				<u> </u>
17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       2	10		16		x
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17				<u> </u>
	.,	· · · · · · · · · · · · · · · · · · ·	17		x
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1	<b>_</b>
			18		x
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. line 9a? If "Yes."			
			19		х

Form **990** (2016)

632003 11-11-16

95-6542234	Page <b>4</b>
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Form	990 (2016) ENDOWMENT TRUST 95-6542	2234	Р	age <b>4</b>
	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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	22		X
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	23		X
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	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		X
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? If "Yes," complete			
	Schedule L, Part I	25b		X
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	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, 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	27		X
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):			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	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	28c		X X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		<u>⊢</u> ^
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
<b>.</b>	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
20	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		x
22	Schedule N, Part II	32		
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34		34	x	
350	Part V, line 1         Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
u	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		<del> </del>
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		<u> </u>
57	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	- 57		<u> </u>
00	Note. All Form 990 filers are required to complete Schedule O	38	x	
				(2016)
				()

632004 11-11-16

ENDOWMENT TRUST

Form 990 (2016)

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Is         Enter the number opported in Box 3 of Form 1006. Enter 0: if not applicable         1a         0           b         Enter the number of Form W 2G included in line 1a. Enter 0: if not applicable         1a         0           c         Did the organization comply with backs on withrough and the set of incl applicable         1a         0           c         Did the organization comply with acks on third water of incl applicable         1a         0           2         Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements.         2a         0           2         Enter the number of employees reported on in E3, add the organization file al required to 6/k (ter embraction)         3a         X           3         Did the organization have unrelated basiness gross income of 10,000 or more during the year?         3a         X           3         Did the organization file al generge Than (5, to line 3b, provide an explanation in Schedule O         3b         X           4         A stary time during the calendar year, did the organization file aport of foreign Bark and Francial Accounts (FBAP).         5a         X           5         Was the organization file aport oportize that are anomaly grease than \$100,000, and did the organization file Aport oportize that aport to aportize that are anomaly grease than \$100,000, and did the organization file Aport Apor	Par	Statements Regarding Other IRS Filings and Tax Compliance           Check if Schedule O contains a response or note to any line in this Part V							
b         Enter the number of forms W-3G included in line 1a. Enter 0- if nd applicable payments to vendors and reportable gaming (gambing) uniques to prevent withholding rules for reportable payments to vendors and reportable gaming (gambing) uniques operative within SC.         1c           2a         Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements.         2a         0           3a         DX the organization is reported on line 2a, did the organization file al required tedenal employment tax returns?         2b           3b         DV the organization have unrelated business gross income of \$1,000 or more during the year?         3a         X           3b         DV the organization have unrelated business gross income of \$1,000 or more during the year?         3a         X           3b         DV the organization have an interest in, or a signature or other financial account; (EARR).         5a         X           3c         DV the organization in a foreign country.         5a         X           3c         DV the organization in the organization have an interest in, or a signature or other financial account; (EARR).         5a         X           3c         T         Yas the organization include with were y solicition an express statement that such contributions or gifts were not tax deductibles or calnitable contributions?         5a         X           3c         T ''res, ' of the organization include with were y solicitation an expresostatement that such contributions o					Yes	No			
b       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gaming) winnings to prize winners?       1c         c       Did the organization comply with ackup withholding rules for reportable payments to vendors and reportable gaming (gaming) winnings to prize winners?       0         if at least one is reported on in the year covered by this return       2a       0         if at least one is reported on in the year covered by this return       2a       0         if at least one is reported on in the year covered by this return       3a       X         b of the organization have unstrated business gons income of 51 nodo or more during the year?       3a       X         b if the organization have unstrated business gons income of 51 nodo or more during the year?       3a       X         b if the organization have unstrated business gons income of 51 nodo or more during the year?       3a       X         b if the organization at a park to a prohibited tax shear transaction , or ther financial account?       4a       X         b if the organization have an unstrate account is a start wave or is a park to a prohibited tax shear transaction?       5b       5c         c       Did any taxation inform of the organization have an intereat in, or a signature or other authority on a signature and the organization science and ta secount is wave and tax sea	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable							
(gambling) winnings to pize winners?       1c         2a       Enter the number of employees reported on from W3, Transmittal of Wage and Tax Statements, ited for the calendar year ending with or within the year covered by this return       2a         3b       Did the calendar year ending with or within the year covered by this return       2a       0         3c       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         3b       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         3c       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         3c       Did the organization have an interest in, or a signature or other authority over, a financial account?       4a       X         3c       Was the organization have an bank account, securities account, or other financial accounts (FBAFI).       5a       X         3c       Was the organization have annual gross raceipts that are normally greater than \$100,000, and did the organization here sharthalic contributions?       5a       X         3c       Organization state may controls the was or the solat of the organization here well as charthalic accituation and partly for goods and services provided to the pary?       5a       X         3c       Vi Y''s, 'i did the organization include with every solicitation an express statement that such contri	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0						
2a       Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements.       2a       0         b       If at least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b         Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>a</i> -file (see instructions)       3a       X         b       If the organization have unmetated business groups income of 51,000 or more during the year?       3a       X         b       If the organization have unmetated business groups income of 51,000 or more during the year?       3a       X         b       If the organization have unmetated business groups income of 51,000 or more during the year?       3a       X         d       At any time during the calendary year, did the organization have an interset in, or a signature or other authority over, a financial account; per othiobit dux shear transaction?       4a       X         See instructions for ling requirements for FinCEN Form 114, Report of Foroign Bank and Financial Accounts (FBAR).       5a       X         5a       Was the organization have annual gross receives that are normally greater than \$100,000, and did the organization sells.       5a       X         b       If **es, 'to line fa or ob, did the organization the size ontributions?       6a       X         b       If **es, 'to line fa organization need and sis and financis a perovalibit et as instret in an size organization	с	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming						
filed for the calendar year ending with or within the year covered by this return       2a       0         b if at least one is reported on line 2a, did the organization file all required federal emplyment tax returns?       2b         Abole. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e</i> -file (see instructions)       3a       X         3D Id the organization have unnelated business gross income of \$1,000 or more during the year?       3a       X         3D If the sym off the size off Tow is year?       3a       X         4A ary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account);       4a       X         5S eventor tha toreign approximation to the foreign country.       >       X       X         5W was the organization approximation to the organization that 4 was or is a party to a prohibited tax shelter transaction?       5a       X         6D Dest he organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible form 88667?       5c       5c         7D Organization subta that may create scales of \$75 made party as contributions and party for goods and services provided to the pare)       7a       X         8b       11 "Yes," idd the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under secton 170(c).       7a       X		(gambling) winnings to prize winners?		1c					
b       If at least one is reported on line 2a, did the organization file all required to 4-file (see instructions)       2b         Note. If the sum of lines 1a and 2a is greater than 250, you may be required to 4-file (see instructions)       3a       X         b       If "Yes," hast if field a form 990-Ti for this year? If "No," to file 3b, provide an explanation in Schedule O       3b       X         b       If "Yes," hast if field a form 990-Ti for this year? If "No," to file 3b, provide an explanation in Schedule O       3a       X         b       If "Yes," hast if field a form 990-Ti for this year? If "No," to file 3b, provide an explanation in Schedule O       3a       X         b       If "Yes," hast if field a form 990-Ti for this year? If "No," to file a shafter transaction at any time during the tax year?       5a       X         b       If "Yes," to line 5a or 5b, did the organization the an entry to a prohibited tax shafter transaction at any time during the tax year?       5a       X         b       Did any taxation analy gross receipts that are normally greater than \$100,000, and did the organization set any contributions that were not atx deductible contributions under section 170(c).       5a       X         c       Did the organization neice any matter in a south on onthe part for groods and services provided to the part?       7a       X         d       Tras," did the organization neice any aconthubus and parts (or grooth and parts) for gods and services provided to the partor, the any tras, did the or	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)       3a       Xa         3a       Did the organization have unrelated business gress income of \$1,000 or more during the year?       3a       Xa         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) a foreign country.       4a       X         3b       Was the organization country such as a bank account, securities account, or other financial account)?       4a       X         5b       Was the organization output yeb that as bank account, any time during the tax year?       5a       X         5c       If 'ves,' enter the name of the foreign country.       5a       X         5c       If 'ves,' enter the name of the organization that t was or is a party to a prohibited tax sheart transaction?       5a       X         5d       May taxable party notify the organization that was or is a party to a prohibited tax sheart transaction?       5a       X         5d       Dot the organization nacule with very solicitation an express statement that such contributions or gifts were not tax deductible?       5a       X         7       Organization nacule with very solicitation and early for goods and services provided to the payor?       7a       X         7       Organization nacule appression that wasequered tore tax beductible?       7a       X </th <td></td> <td>filed for the calendar year ending with or within the year covered by this return</td> <td>2a 0</td> <td></td> <td></td> <td></td>		filed for the calendar year ending with or within the year covered by this return	2a 0						
30       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         b if "Yes," has it field a Form 990-flor this year? if "No," to line 3b, provide an explanation in Schedule O       3b       X         d At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a       4a       X         b if "Yes," return the name of the foreign country (such as a bank account, securities account, or other financial account)?       4a       X         b if "Yes," return the name of the foreign country (such as a bank account, securities account, or other financial account)?       5b       X         5a       Did any taxable party notify the organization file Form 8080-1?       5a       X         5b       Does the organization have unneal gross recipits that are normally greater than \$100,000, and did the organization foreign Bank and Financial Accounts (FEAP).       5a       X         5a       Does the organization have annual gross recipits that are normally greater than \$100,000, and did the organization foreign Bank and Financial Accounts (FEAP).       5a       X         5a       Did hor organization sells a parmisation an express statement that such contributions or gifts       5b       X         6a       X       Y       Yes, " old the organization neide with every solicitation an express statement that such contributions or gifts       6b       7a       X <t< th=""><td>b</td><td>If at least one is reported on line 2a, did the organization file all required federal employment tax return</td><td>ms?</td><td>2b</td><td></td><td></td></t<>	b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ms?	2b					
b       If "Yes," that it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule 0       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 is a foreign country.       4a       X         b       If "Yes," enter the name of the foreign country.       5a       X         See instructions for filing requirements for Finic Pace T14, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5a       If "Yes," the ise Sa or 5b, oil the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         5a       If "Yes," the ise Sa or 5b, oil the organization infle Form 88867?       5a       X         6b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions?       7a       X         7       Organization stating receive deductible contributions under section 170(c).       10 the organization notify the doror of the subace of tangible personal property for which it was required?       7a       X         7       To       If "Yes," did the organization notify the doror or advised truth any divide of the party?       7a       X <td< th=""><td></td><td>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions</td><td>5)</td><td></td><td></td><td></td></td<>		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	5)						
4a       At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly curb a financial accountly.       4a       X         bit 1*%s; "enter the name of the foreign country (such as a bank account, securities account, or other infancial Account)?       5a       X         bit 1*%s; "enter the name of the foreign country.       5b       X         bit 1*%s; "to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         bit 1*%s; "to line 5a or 5b, did the organization file Form 8386-17?       5c       5c       5c         c 1***s, "to line 5a or 5b, did the organization file Form 8386-17?       5c       5c       5c         7 organization are parte party bit organization and party for organization she annual gross receipts that are noneally greater than \$100,000, and did the organization solut were not tax deductible?       6a       X         1 1**s, "toid the organization notide with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       7a       X         d 10 the organization necke a party or any those of the gods or services provided?       7a       X         d 10 the organization necke a party or any those of the page of the gods or services provided?       7a       X         d 1**s, "indicate the number of Forms 8282 filed dumg the year       7a       X       7a       X	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X			
fnancial account in a foreign country (such as a bank account, securities account, or other financial account)?     4a     X       b     f"Yes," enter the name of the foreign country.     5a     X       c     Was the organizations for fing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).     5a     X       c     Was the organization a party to a prohibited tax shelter transaction?     5a     X       c     H"Yes," to line 5a or 5b, did the organization file Form 8886-T?     5c     5c       d     Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible as chartable contributions?     6a     X       d     If "Yes," toline 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts     6a     X       d     If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts     7a     X       d     If "Yes," did the organization notify the donor of the value of the goods or services provided?     7b     7c     X       d     If "Yes," did the organization notify the donor of the value of the goods or services provided?     7c     X       d     If "Yes," indicate the number of Forms 8282 filed during the year     7d     7c     X       d     If the organization receive a pany that in eduring the year? <td>b</td> <td>If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule</td> <td>0</td> <td>3b</td> <td></td> <td></td>	b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0	3b					
b       If "Yes," enter the name of the foreign country.         See instructions for thing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a         SW as the organization aparty to a prohibited tax shelter transaction at any time during the tax year?       5a       X         D Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         c       If "Yes," to line 5a or 5b, did the organization file Form 8886-T7       5c       -         6       Does the organization neave neares receipts that are normally greater than \$100,000, and did the organization solidt any contributions include with every solicitation and party for goods and services provided to the payor?       7a       X         0       If "Yes," (did the organization neaves of 57 made party as a contribution and party for goods and services provided to the payor?       7a       X         10 the organization neave a payment in excess of 57 made party as a contribution and party for goods and services provided to the payor?       7a       X         10 the organization neave any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7b       X         10 the organization neave any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       X         10 the organization neave any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X	4a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5c       X         6b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5c       X         7b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that tware not tax deductible as charitable contributions?       6a       X         7b T*S*, " did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions?       7a       X         7b II**ex*, to id the organization notify the donor of the value of the goods or services provided?       7b       X         7c III**ex*, indicate the number of Forms 8282 filed during the year       7d       7c       X         7c III**ex*, indicate the number of Forms 8282 filed during the year, or personal benefit contract?       7c       X         7d III**ex*, indicate the number of Forms 8282 filed during the year, or a personal benefit contract?       7c       X         7d III**ex*, indicate the number of Forms 8282 filed during the year, or a personal benefit contract?		financial account in a foreign country (such as a bank account, securities account, or other financial account)?							
5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         61       TVes; to line 5a or 5b, did the organization file Form 888617?       5a       X         60       Does 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?       6a       X         b       If "Yes;", did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6a       X         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7a       X         b       If "Yes," did the organization sell, exhange, or otherwise dispose or tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         d       If Yes," indicate the number of Forms 8282 filed during the year?       7d       X       7d       X         d       If the organization neceive any funds, directly or indirectly, or a personal benefit contract?       7f       X       7d       X <td>b</td> <td>If "Yes," enter the name of the foreign country:</td> <td></td> <td></td> <td></td> <td></td>	b	If "Yes," enter the name of the foreign country:							
b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c       If "Yes," to line 5a or 5b, did the organization file Form 8886 T?       5c       5c         any contributions that were not tax deductible as charitable contributions?       5c       5c         b       If "Yes," did the organization have excepts that are normally greater than \$100,000, and did the organization solicit       6a       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       7c         7 Organization station receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7a       X         b       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year, pay premiums, on a personal benefit contract?       7f       X       7g       7d       X       7g       7g       X         g       If the organization, during the year, pay premiums, duron advised funda.       A contract/set fund maintained by the sponsoring organization maintaining door advised funds. Did a contract/set fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b									
c       If "Yes," to line 5a or 5b, did the organization file Form 8886-T7       5c         6D       Does 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?       6a       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions?       6b       7a       X         f       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?       7a       X         f       Tyes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         d       If "Yes," indicate the number of Forms 8282? filed during the year       7d       7d       X         f       Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8989 as required?       7f       X         f       If the organization receive a contribution of cars, basts, aipflanes, or other vehicles, did the organization file a Form 1098-C?       7f       X         g       Post organization receive a contribution of carb, basts, aipflanes, or other vehicles, did the organization file a Form 1098-C?       7f       X				5a					
6a       Does 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?       6a       X         b If 'Yes, 'i did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       6b         7       Organization stat may receive deductible contributions under section 170(c).       7a       X         8       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282?       7c       X         c       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7r       X         d       If 'Yes, ' indicate the number of Forms 8282 field during the year       7d        X         d       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7r       X         f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1096.C?       7h       X         g If the organization nave excess business holdings at any time during the year?       8       9a       9a       9a       9a       9b       00       00       0b       00       0b       0b       0b       0b       0b <td< th=""><td>b</td><td>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa</td><td>iction?</td><td>5b</td><td></td><td>X</td></td<>	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	iction?	5b		X			
any contributions that were not tax deductible as charitable contributions?       6a       X         b       If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gitts       6b       6b         7       Organizations that may receive deductible contributions under section 170(c).       0b       7a       X         0       If 'Yes,' did the organization notify the donor of the value of the goods or services provided?       7b       X         0       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7d       X         0       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         1       If 'Yes, '' indicate the number of Forms 8282 filed during the year       7d       X         1       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         1       If the organization neceived a contribution of qualified intellectual property, did the organization file Form 8299 as required?       7d       X         1       If the organization neceive any taxable distributions under section 4966?       9a       9a       9a       9a       9a       9a       9a       9b       5b       5b       5b       5b	С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c					
b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts       6b         7       Organizations that may receive deductible contributions under section 170(c).       6b       7a       X         7       Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         0       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         0       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7c       X         0       If the organization receive any funds, directly or indirectly, to pay premiums, on a personal benefit contract?       7r       X         10 the organization number of Forms 8282 field during the year       7d       X       X         10 the organization receive any trunds, directly or indirectly, to pay premiums, on a personal benefit contract?       7r       X         11 the organization receive a contribution of qualified intellectual property, did the organization file a Form 1098 C?       7h       X         12 the organization nake any taxable distributions under section 4966?       9a       9a       9a       9a       9a       9a       9b       9a       9b       9a       9a       9a       9a <t< th=""><td>6a</td><td></td><td></td><td></td><td></td><td>l</td></t<>	6a					l			
were not tax deductible?     6b       7 Organizations that may receive deductible contributions under section 170(c).     0       b Idt the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?     7a     X       b If "Yes," did the organization notify the donor of the value of the goods or services provided?     7b     7c     X       c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?     7c     X       d If "Yes," indicate the number of Forms 8282 filed during the year     7d     X       e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7e     X       f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?     7h     X       g If the organization mation go and vised funds.     7g     7h     X       9 Sponsoring organization mata antianing donor advised funds.     7g     7h     8       a Did the sponsoring organization make a distribution to a donor, donor advised funds matinated by the sponsoring organization make a distribution to a donor, donor advised funds?     9a     9b       0 Did the sponsoring organization make a distribution to a donor, donor advised funds?     9b     9b     9b       10 Section 501(c)(7) organizations. Enter:     10a     10a     10a     10a </th <td></td> <td></td> <td></td> <td>6a</td> <td></td> <td>X</td>				6a		X			
7       Organizations that may receive deductible contributions under section 170(c).       a       b       c       c       c       x       c       c       c       x       c       c       c       x       c       c       c       x       c       c       c       x       c       c       c       x       c       c       c       c       x       c       c       c       c       c       c       c       c       c       c       c       c       c       c       c       c       c       c       c	b		-						
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?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         g Sponsoring organization make any taxable distributions under section 4966?       9a       9       9b       9a       9b       9b <td></td> <td></td> <td></td> <td>6b</td> <td></td> <td></td>				6b					
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       X       7c       X         f       Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7e       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         f       Did the organizations maintaining donor advised funds.       Did a lonor advised funds.       8       8         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b         10       the sponsoring organizations. Enter:       10a       10a       10a       10a       10a       10b       10a       10b       11a       10a       11a       11a <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         f       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         g       If the organization receive at contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7d       X         g       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         sponsoring organizations maintaining donor advised funds.       8       9       9       9a       9         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b       9a       9b         10       the sponsoring organizations. Enter:       10a       10b       10b       10b       10b       10b       10b       10b       10c       10a       10b       10c       1						X			
to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X         f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       X         f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         8 Sponsoring organizations maintaining donor advised funds.       8       9       9         9 Sponsoring organization make any taxable distributions under section 4966?       9a       8       9         9 Did the sponsoring organizations make any taxable distributions under section 4966?       9a       9b       9b       9b         103 Ection 501(c)(7) organizations. Enter:       10a       10b       10b       10b       10b       10b       11a       10a       10b       12a       11a       10a       10b       12a       11a       11a       11a       11a       11a       11a       11b       11a       11b       11a       11b       11a       11b       11a       11b       11b       12a       11b       12a       1									
d If "Yes," indicate the number of Forms 8282 filed during the year       Td       Td         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Te       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       Tf       X         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       Tf       X         g If the organization received a contribution of cars, boats, aiplanes, or other vehicles, did the organization file a Form 1088-C?       Th       X         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9a         9 Sponsoring organizations maintaining donor advised funds.       10a       10a       9a       9b         10 the sponsoring organizations make a distribution to a donor, donor advisor, or related person?       9b       9b       9b         10 Section 501(c)(12) organizations. Enter:       10a       10b       10b       10b       10b         11 Section 501(c)(12) organizations. Enter:       10a       10b       10b       11b       12a       11b       12a       11b       12a       11b       12a       12a       12a       12a       12a	С					37			
e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       X         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         sponsoring organizations maintaining donor advised funds.       Did the sponsoring organization make a way taxable distributions under section 4966?       8       9         9       Sponsoring organizations. Enter:       a       10a       10a       9b       9b         10       Section 501(c)(7) organizations. Enter:       a       10a       10b			1 1	7c		X			
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7r       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7h         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?       7h       7g         8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make excess business holdings at any time during the year?       8       8         9       Sponsoring organizations maintaining donor advised funds.       8       9         a       Did the sponsoring organizations maintaining donor advised funds.       9a       9b       9b         0       Storn 501(c)(7) organizations. Enter:       10a       9a       9b       9b         10       Section 501(c)(7) organizations. Enter:       10b       10b       10b       10b         11       Initiation fees and capital contributions included on Part VIII, line 12       10a       10b       11a       10b         12       Section 501(c)(7) organizations. Enter:       11a       10b       10b       11b       11c       12a       12a       12a       12a       12a       1				_		v			
bit the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization mave excess business holdings at any time during the year?       8         9 Sponsoring organizations maintaining donor advised funds.       8         9 Did the sponsoring organization make any taxable distributions under section 4966?       9a         9 Did the sponsoring organizations. Enter:       10a         10 Section 501(c)(7) organizations. Enter:       10a         11 Section 501(c)(12) organizations. Enter:       10a         12 Gross income from members or shareholders       11a         13 Gross income from members or shareholders       11a         14 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12 Section 501(c)(29) qualified nonprofit health insurance issuers.       12b         13 Section 501(c)(29) qualified health plans in more than one state?       13a         13a       13b         14a       X									
h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds.       8         9       Sponsoring organization make any taxable distributions under section 4966?       8         9       Did the sponsoring organization make any taxable distributions under section 4966?       9a         9       Did the sponsoring organization make any taxable distributions under section 4966?       9a         9       Section 501(c)(7) organizations. Enter:       10a         10       Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       10a       10b         12       Gross income from members or shareholders       11a       10b         13       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         14       Tot serve the amount of tesserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?       13a         13       Enter the amount of reserves on hand       13c									
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b       Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a       10a         a       Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities       10b       10b         11       Section 501(c)(12) organizations. Enter:       10b       11a       10b         a       Gross income from members or shareholders       11a       11b       11b         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       12a       12a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13c         c       Enter the amount of reserves on hand       13c       14a       X				0-					
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a       Initiation fees and capital contributions included on Part VIII, line 12       10a       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b       10b         11       Section 501(c)(12) organizations. Enter:       a       Gross income from members or shareholders       11a       11a       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       13a       13a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a       13a         c       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b       13c         c       Enter the amount of reserves on hand       13b       13c       14a       X				90					
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a       Gross income from members or shareholders       11a       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b         12a       11b       11b       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       13a         c       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       13a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X			105						
b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a       13a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X			11a						
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112a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       13b         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X	~		11b						
b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       13         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       14a       13b         c       Enter the amount of reserves on hand       13b       13c       14a       X	12a			12a					
13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         14a       X									
a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
Note. See the instructions for additional information the organization must report on Schedule O.       Image: Construction of the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				13a					
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c Enter the amount of reserves on hand       13c       14a       X         14a       X	-								
organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	b								
c Enter the amount of reserves on hand       13c       14a         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X			13b						
14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	с								
				14a		X			
				14b					

632005 11-11-16

ENDOWMENT TRUST

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

Form 990 (2016)

Х

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.

			5	Yes	
1a	Enter the number of voting members of the governing body at the end of the tax year	<b>1</b> a	5		
	If there are material differences in voting rights among members of the governing body, or if the governing				I
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.		5		1
	Enter the number of voting members included in line 1a, above, who are independent	1b	-		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee?		2	x	
3	Did the organization delegate control over management duties customarily performed by or under th				t
	of officers, directors, or trustees, or key employees to a management company or other person?		3		
4	Did the organization make any significant changes to its governing documents since the prior Form				t
	Did the organization become aware during the year of a significant diversion of the organization's as				t
	Did the organization have members or stockholders?				t
	Did the organization have members, stockholders, or other persons who had the power to elect or a				t
	more members of the governing body?	• •	. 7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s				Ι
	persons other than the governing body?		. 7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				t
	The governing body?		. 8a	X	1
	Each committee with authority to act on behalf of the governing body?			X	t
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea				t
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		. 9		I
ect	tion B. Policies (This Section B requests information about policies not required by the Internal R				
				Yes	J
0a	Did the organization have local chapters, branches, or affiliates?		. 10a		Ţ
	If "Yes," did the organization have written policies and procedures governing the activities of such c				T
	and branches to ensure their operations are consistent with the organization's exempt purposes?		. 10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing boc			X	t
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	-			t
			. 12a	X	I
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			X	t
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," describe		x	Ť
3	in Schedule O how this was done		13	X	+
	Did the organization have a written document retention and destruction policy?			X	╉
	Did the process for determining compensation of the following persons include a review and approv		. 14		+
5					1
~	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		15a		l
	The organization's CEO, Executive Director, or top management official				+
α	Other officers or key employees of the organization		. 15b		+
6-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	mont with -			1
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange		40		
	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua		. <b>16a</b>		+
α		• •			I
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga		401		
001	exempt status with respect to such arrangements?		. 16b	1	1
	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ CA Section 6104 requires an organization to make its Forms 1022 (or 1024 if applicable) 000, and 0007	[(Postion E01/c)/0)			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- for public inspection. Indicate how you made these available. Check all that apply		/) avaiiai	JIE	
	for public inspection. Indicate how you made these available. Check all that apply.	in Schodule ()			
•		in Schedule O)	nd finer	naial	
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	multice of interest policy, a	una tinar	icial	
•	statements available to the public during the tax year.	alea and or a cost 🔺			
0	State the name, address, and telephone number of the person who possesses the organization's bo JIM FRANZEN - (805)563-0821				
		A 1			
	1330 STATE STREET, NO. 102, SANTA BARBARA, CA 931	.01		n <b>990</b>	_

(E)

Form 990 (2	2016)	ENDOWMENT	TRUST				95-6
Part VII	Compensation	of Officers, Di	irectors,	Trustees,	Key Employees,	Highest	Compensate
	Employees, an	d Independent	Contrac	tors			

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

(B)

(A)

ENDOWMENT TRUST

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

1a 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.

 $(\mathbf{C})$ 

**(D)** 

(E)

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	(do	(do not check more than one		Reportable	Reportable Reportable				
	hours per	box	box, unless person is both an officer and a director/trustee)		h an	compensation	compensation	amount of		
	week	offi	cer an	id a d	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	r dir				ted		organization	(W-2/1099-MISC)	from the
	related	stee c	ustee			en sa		(W-2/1099-MISC)		organization
	organizations	al trus	nal tr		loyee	e omp				and related
	below	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	Indi	Inst	Offi	Key	Hig	For			
(1) GREGG HACKETHAL	1.00									
TRUSTEE		X						0.	0.	0.
(2) A. C. MOORE	1.00									
TRUSTEE		X						0.	0.	0.
(3) SANDRA CHAN	1.00									
TRUSTEE		X						0.	0.	0.
(4) RICHARD ABERLE	1.00									
TRUSTEE		x						0.	0.	0.
(5) BRETT MOORE	1.00									
LEAD TRUSTEE	1.00	x		x				0.	0.	0.
(6) DOUGLAS MCCARTNEY	1.00									
TRUSTEE		x						0.	0.	0.
(7) JIM FRANZEN	1.00									
TRUSTEE		x						0.	Ο.	0.
(8) KEVIN MARTIN	2.00									
EXECUTIVE DIRECTOR	38.00	1		X				0.	9,615.	429.
(9) DAVID PRATT	2.00									
PRIOR EXECUTIVE DIRECTOR	38.00	1		X				0.	104,081.	1,084.
(10) KATHRYN MARTIN	2.00									
PRIOR EXECUTIVE DIRECTOR	38.00			Х				0.	56,098.	0.
		l								
000007 44 44 40										Corm 000 (2016)

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632007 11-11-16

Form 990 (2016)

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	990 (2016) ENDOWMEN'									95-65	5422	34	Page <b>8</b>
Par	t VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st (			<u> </u>		
	(A) Name and title	<b>(B)</b> Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	<b>(E)</b> Reportable compensatio from related	n	(F Estima amour oth	ated nt of
								organization: (W-2/1099-MIS	SC)	compen from organiz and re organiz	the ation lated		
-16									0.	169,79	94	1	513.
с	Sub-total Total from continuation sheets to Part VI	I, Section A							0.	169,79	0.		0.
2	Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization							no r	_	-		±,	0
												Ye	
3	Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s				-	•			•			3	x
4	For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J	for such individual			4	x
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com											5	x
1	ion B. Independent Contractors Complete this table for your five highest co	mpensated in	depe	ende	ent c	onti	racto	ors <sup>.</sup>	that received more than	\$100,000 of corr	Ipensat	ion from	<u> </u>
	the organization. Report compensation for												
	(A) Name and business	address	N	ONI	Ξ				(B) Description of s	ervices	Cor	<b>(C)</b> mpensa	tion
2	Total number of independent contractors (i \$100,000 of compensation from the organi	U U	ot li	mite	d to		se lis 0	steo	d above) who received n	nore than			
	•										Fc	orm <b>990</b>	<b>)</b> (2016)

632008 11-11-16

SANTA BARBARA SYMPHONY ORCHESTRA Form 990 (2016) ENDOWMENT TRUST

га				or note to any lin	e in this Part VIII			
		Check if Schedule O cont			(A) Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		Federated campaigns						
Gra		Membership dues						
ts,		Fundraising events						
ilar İlar		Related organizations						
Sim's		e Government grants (contribut						
utio	f	All other contributions, gifts, gran		20 100				
Q		similar amounts not included abo		20,199.				
but	-	Noncash contributions included in lines			20,199.			
9.6	r	Total. Add lines 1a-1f		Business Code	20,199.			
e	2 a			Busiliess Coue				
vic	2 C							
Ser	~ C							
eve eve	c							
Program Service Revenue	e	) 						
Å	f	All other program service reve	enue					
		<b>Total.</b> Add lines 2a-2f						
	3	Investment income (including						
		other similar amounts)		►	29,696.			29,696.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨 🕨				
	5	Royalties	· <u></u>	►				
			(i) Real	(ii) Personal				
		a Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	749,073.					
	b	Less: cost or other basis	572 677					
		and sales expenses Gain or (loss)	176 396					
	c	l Net gain or (loss)	110,350.	▶	176,396.			176,396.
		Gross income from fundraisin			170,350.			170,3501
nue	0.0	including \$						
evel		contributions reported on line						
Ŗ		Part IV, line 18						
Other Revenu	b	Less: direct expenses						
0		Net income or (loss) from fund						
		Gross income from gaming ac						
		Part IV, line 19						
	b	Less: direct expenses						
	c	Net income or (loss) from gam	ning activities	►				
	10 a	a Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sale	es of inventory	🕨				
		Miscellaneous Revenu	le	Business Code				
	11 a							ļ
	b							
	c							<u> </u>
		All other revenue						
		Total. Add lines 11a-11d			226,291.	0.	0.	206,092.
62000	12	Total revenue. See instructions.				• •	0.	Form <b>990</b> (2016)
03200	9 11-1	i i - iu			9			

### SANTA BARBARA SYMPHONY ORCHESTRA ENDOWMENT TRUST

ection 501(c)(3	) and 501(c)(4) organizations must comp	lete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respons				
	amounts reported on lines 6b, 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
and domes	other assistance to domestic organizations tic governments. See Part IV, line 21	266,713.	266,713.		
	d other assistance to domestic s. See Part IV, line 22				
organizati individuals	d other assistance to foreign ons, foreign governments, and foreign s. See Part IV, lines 15 and 16				
	aid to or for members ation of current officers, directors,				
6 Compensat	and key employees ion not included above, to disqualified s defined under section 4958(f)(1)) and				
persons de	scribed in section 4958(c)(3)(B)				
8 Pension pla	ries and wages In accruals and contributions (include (k) and 403(b) employer contributions)				
9 Other emp	oloyee benefits				
Fees for s	ervices (non-employees):				
<b>b</b> Legal	ent				
	g				
	al fundraising services. See Part IV, line 17	34,441.		34,441.	
column (A)	ine 11g amount exceeds 10% of line 25, amount, list line 11g expenses on Sch 0.)				
	g and promotion enses				
	n technology				
6 Occupano					
8 Payments	of travel or entertainment expenses deral, state, or local public officials				
	ces, conventions, and meetings				
	to affiliates				
4 Other expension above. (Lis 24e amoun	nses. Itemize expenses not covered t miscellaneous expenses in line 24e. If line t exceeds 10% of line 25, column (A) t line 24e expenses on Schedule 0.)				
a b					
d					
5 Total funct	xpenses	301,154.	266,713.	34,441.	(
reported in	Complete this line only if the organization column (B) joint costs from a combined campaign and fundraising solicitation.				
Check here	if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (20

Form 990 (2016)

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### Form 990 (2016)

### SANTA BARBARA SYMPHONY ORCHESTRA ENDOWMENT TRUST

	990 (			90-	6542234 Page 11
Pai	τΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		1	1.00.000
	2	Savings and temporary cash investments	26,208.	2	168,686.
	3	Pledges and grants receivable, net	50,000.	3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	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			
ets		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a		10	
		Less: accumulated depreciation 10b	4,015,707.	10c	4,392,954.
	11	Investments - publicly traded securities	876,539.		877,058.
	12	Investments - other securities. See Part IV, line 11	070,009.	12	077,030.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	608,143.	14	0.
	15	Other assets. See Part IV, line 11	5,576,597.	15 16	5,438,698.
	16 17	Total assets. Add lines 1 through 15 (must equal line 34)           Accounts payable and accrued expenses	5,510,551.	17	5,450,050
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
s	22	Loans and other payables to current and former officers, directors, trustees,			
itie		key employees, highest compensated employees, and disgualified persons.			
Liabilities		Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	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		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	541,168.	27	619,238.
Bal	28	Temporarily restricted net assets	341,069.	28	713,044.
Fund Balances	29	Permanently restricted net assets	4,694,360.	29	4,106,416.
		Organizations that do not follow SFAS 117 (ASC 958), check here			
õ		and complete lines 30 through 34.			
Net Assets or	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	5,576,597.	32	5,438,698.
-	33	Total net assets or fund balances	5,576,597.	33	5,438,698.
	34	Total liabilities and net assets/fund balances	5,570,597.	34	Form <b>990</b> (2016)

632011 11-11-16

SANTA	BARBA	ARA	SYMPHON	Y	ORCHESTRA
ENDOWN	MENT 7	RUS	ST		

Form	990 (2016) ENDOWMENT TRUST	95-	6542234	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			91.
2	Total expenses (must equal Part IX, column (A), line 25)	2			54.
3	Revenue less expenses. Subtract line 2 from line 1	3			63.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,57		
5	Net unrealized gains (losses) on investments	5	54	5,1	07.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-60	8,1	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5,43	В,б	98.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,		
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C	).		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit		
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2016)

632012 11-11-16

SCHEDULE A (Form 990 or 990-EZ)		rity Status an					OMB No. 1545-0047
	494	47(a)(1) nonexempt cha	ritable tru	ust.	or a section		
Department of the Treasury Internal Revenue Service		Attach to Form 990 or F (Form 990 or 990-EZ) and			ww.irs.gov/fc	orm990.	Open to Public Inspection
Name of the organization SA	NTA BARBARA	SYMPHONY ORC				Employer	identification number
	DOWMENT TRUS	T All organizations must co		ia mart \ C			5-6542234
						S.	
The organization is not a private fo		on of churches describe	-				
		Attach Schedule E (Forn			·//~/(י)·		
		anization described in se			ii).		
		njunction with a hospita			-	.)(iii). Enter	the hospital's name,
city, and state:							
<b>5</b> An organization operate	ed for the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental	unit descrik	bed in
section 170(b)(1)(A)(iv							
		nental unit described in					
		Intial part of its support f	rom a gov	ernmental	unit or from	the general	public described in
section 170(b)(1)(A)(vi) 8 A community trust desc		(1)(A)(vi). (Complete Par	+ 11 )				
		in section 170(b)(1)(A)(	-	ed in coniu	unction with a	land-grant	college
		culture (see instructions).					
university:		, , , , , , , , , , , , , , , , , , ,					
10 An organization that no	rmally receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	nd gross receipts from
		ct to certain exceptions,					
		(less section 511 tax) fr	om busine	esses acqu	ired by the o	rganization	after June 30, 1975.
See section 509(a)(2).		i velu te test feu sublis es	fati Caa		O(-)(A)		
11 An organization organiz 12 X An organization organiz	-	ively to test for public sa	•			arry out the	purposes of one or
0 0		ed in section 509(a)(1) o					
		of supporting organizatio					
		supervised, or controlled				-	giving
the supported organiz	zation(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	upporting
r	st complete Part IV, Se						
	•	d or controlled in connec			•		-
-		anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported
	nust complete Part IV,	g organization operated	in connec	tion with	and functions	ally integrat	ed with
		b). You must complete l				iny integration	
·· •		porting organization oper			-	orted organi	zation(s)
		zation generally must sa					
requirement (see instr	ructions). <b>You must cor</b>	nplete Part IV, Sections	s A and D	, and Part	<b>V</b> .		
		written determination fro			а Туре I, Туре	e II, Type III	
		nally integrated support					1
<ul><li>f Enter the number of support</li><li>g Provide the following information</li></ul>							<b>⊥</b>
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount o	f monetary	(vi) Amount of other
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ii	nstructions)	support (see instructions)
SANTA BARBARA							
SYMPHONY ORCHESTR	A 95-2104089	10	X		266	5,713.	
							<u> </u>
<u> </u>					264	5 710	0.
Total LHA For Paperwork Reduction A	ct Notice see the last	uctions for Form 990 a	r 900_E7	632021 00		5,713. dule A (Eor	• 0 • m 990 or 990-EZ) 2016
	or notice, see the inst			JJ2021 U9-	Scile		

### SANTA BARBARA SYMPHONY ORCHESTRA Schedule A (Form 990 or 990-EZ) 2016 ENDOWMENT TRUST

95-6542234 <sub>F</sub>	'age <b>2</b>
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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by 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)						
6	Public support. Subtract line 5 from line 4.						
_	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
9	Net income from unrelated business						
	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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
	organization, check this box and stop	bhere					
See	ction C. Computation of Publ	ic Support Pe	rcentage			<u> </u>	
14	Public support percentage for 2016 (	line 6, column (f) d	ivided by line 11,	column (f))		14	%
	Public support percentage from 2015					15	%
<b>16</b> a	33 1/3% support test - 2016. If the o	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2015. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check	this box
	and <b>stop here.</b> The organization qua						
17a	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	% or more,
	and if the organization meets the "fac	cts-and-circumstar	ces" test, check t	his box and <b>stop I</b>	<b>here.</b> Explain in Pa	rt VI how the orga	anization
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	t - 2015. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 i	s 10% or
	more, and if the organization meets the				•		
	organization meets the "facts-and-cire	cumstances" test.	The organization	qualifies as a publ	icly supported org	anization	▶∐
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17			
					Soh	dulo A (Earm 00	0 or 990-F7) 2016

Schedule A (Form 990 or 990-EZ) 2016

632022 09-21-16

### Schedule A (Form 990 or 990 EZ) 2016 ENDOWMENT TRUST 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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2							
3	· · · · · · · · · · · ·						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disgualified persons						
t	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						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		•				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
r	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a sectio	on 501(c)(3) organi	zation,
_	check this box and stop here						
	ction C. Computation of Publ					<del> </del>	
	Public support percentage for 2016 (I			column (f))		15	%
	Public support percentage from 2015					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
19a	<b>33 1/3% support tests - 2016.</b> If the	organization did r	not check the box	on line 14, and lin	e 15 is more than 3	33 1/3% , and line	17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	e organization qua	lifies as a publicly	supported organiz	ation	▶□]
b	<b>33 1/3% support tests - 2015.</b> If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and <b>s</b>	top here. The org	anization qualifies	as a publicly supp	orted organizatior	▶∐
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	▶□
6320	23 09-21-16				Sch	edule A (Form 99	0 or 990-EZ) 2016
				15			
141	L025 150929 80592	20:	16.03050	SANTA BAR	BARA SYMP	HONY ORCH	805921

## Schedule A (Form 990 or 990-EZ) 2016 ENDOWMENT TRUST

(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

- 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.
- 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).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **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.
- 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.
- **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.*
- **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.
- **c** 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.*
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.*
- 7 Did the organization provide a grant, Ioan, compensation, or other similar payment to a substantial contributor (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).*
- 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.**
- **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.*
- 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.**
- **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.* 
  - **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.)

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Schedule A (Form 990 or 990-EZ) 2016

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Х 1 х 2 Х 3a 3b 3c Х 4a 4b 4c Х 5a 5b 5c Х 6 Х 7 Х 8 Х 9a Х 9b х 9c х 10a 10b

Yes

No

Schedule A (Form 990 or 990-EZ) 2016 ENDOWMENT TRUST

95-6542234 Page 5

Pai	rt IV 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		х
h	A family member of a person described in (a) above?	11b		x
		11c		X
	A 35% controlled entity of a person described in (a) or (b) above? <i>If</i> "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	TIC		
Sec	tion B. Type I Supporting Organizations			
			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 <b>Part VI</b> 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	X	
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.	2		Х
Sec	tion C. Type II Supporting Organizations			<u> </u>
			Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	
1				
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u></u>	the supported organization(s).	1		
Sec	tion 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.	3		
Sec	tion 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 yea(see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	:)	
2	Activities Test. Answer (a) and (b) below.	laonono	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	
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? 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.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
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? Provide details in Part VI.	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 <b>Part VI</b> the role played by the organization in this regard.	3b		
63202	5 09-21-16 Schedule A (Form 9	90 or 99	90-EZ	2016
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Schedule A (Form 990 or 990-EZ) 2016 ENDOWMENT TRUST

maintenance of property held for production of income (see instructions)

Other expenses (see instructions)

7 8

#### 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. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 1 Net short-term capital gain Recoveries of prior-year distributions 2 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or 6 collection of gross income or for management, conservation, or

6

7

Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other

	factors (explain in detail in <b>Part VI</b> ):		
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	
			1
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Minimum Asset Amount (add line 7 to line 6) tion C - Distributable Amount	8	Current Year
		8	Current Year
	tion C - Distributable Amount	8 1 2	Current Year
Sect	tion C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A)	1	Current Year
Sect 1 2	tion C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1	1 2	Current Year
Sect 1 2	tion C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A)	1 2 3	Current Year
Sect 1 2 3 4	tion C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3	1 2 3 4	Current Year

 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) 2016

632026 09-21-16

Sche	dule A (Form 990 or 990-EZ) 2016 ENDOWMENT TRU	ST		5-6542234 Page 7
Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	on D - Distributions		. , ,	Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
4	Amounts paid to acquire exempt-use assets			
5	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 which the	he organization is responsive	e	
	(provide details in <b>Part VI</b> ). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		-	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990-EZ) 20	SANTA BARI		HONY OI	RCHESTRA		95-6542234 <sub>Pa</sub>
Part VI Supplemental Inf Part IV, Section A, line line 1; Part IV, Section	<b>formation.</b> Provide th s 1, 2, 3b, 3c, 4b, 4c, 5a D, lines 2 and 3; Part IV nd 8; and Part V, Sectio	ne explanations re a, 6, 9a, 9b, 9c, 11 /, Section E, lines	1a, 11b, and 1c, 2a, 2b, 3a	11c; Part IV, See a, and 3b; Part \	t II, line 17a or 17 ction B, lines 1 ar /, line 1; Part V, S	b; Part III, line 12; d 2; Part IV, Section C, ection B, line 1e; Part V
32028 09-21-16			20		Schedule A	(Form 990 or 990-EZ)
41025 150929 8059	2 20	16.03050		BARBARA	SYMPHONY	ORCH 80592_

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service \*\* PUBLIC DISCLOSURE COPY \*\*

## **Schedule of Contributors**

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

# 2016

Employer identification number

Name of the	organization
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SANTA BARBARA SYMPHONY ORCHESTRA ENDOWMENT TRUST

95-6542234

Filers of:	Section:
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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.

### **General Rule**

**X** 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 contributor's total contributions.

### Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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 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, II, and III.

**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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization SANTA BARBARA SYMPHONY ORCHESTRA ENDOWMENT TRUST Employer identification number

95-6542234

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribu
<u>    1                                </u>		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributio
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribu
2		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributio
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribu
		\$	Person Payroll Noncash Complete Part II for noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribu
		\$	Person Payroll Noncash Complete Part II for noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribu
		\$	Person Payroll Noncash Complete Part II for noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribu
		\$	Person Payroll Noncash Complete Part II for noncash contribution

Schedule B	(Form 990,	990-EZ,	or 990-PF	) (2016)	
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Name of organization

SANTA BARBARA SYMPHONY ORCHESTRA ENDOWMENT TRUST

Employer identification number

95-6542234

### Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space 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
		\$	
23453 10-18-16	23		990, 990-EZ, or 990-PF

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SANTA BARBARA SYMPHONY ORCHESTRA     95-6542234       SPATI III     Ecolories of print up or enditions to signatations described in section 401(5)/1(16, et (10) hat bit mark \$1,000 to the state of the section 401(5)/1(16, et (10) hat bit mark \$1,000 to the state of the section 401(5)/1(16, et (10) hat bit mark \$1,000 to the state of the section 401(5)/1(16, et (10) hat bit mark \$1,000 to the state of the section 401(5)/1(16, et (10) hat bit mark \$1,000 to the sect (10, et (10) hat \$1,000 to the sect (10, et (10) hat \$1,000 to	Name of organ			Employer identification number
Part III       Ecolosiely religious, chartable, econstructions to seganzation described in section 201(c)(1, 0), of (10) that total more than \$1,000 for the control of control of the local of the lo			TRA	05 6540224
the year from any one contributer. Complete columns (a) through (c) and the following line etter, we operations the set distributed in th		Exclusively religious, charitable, etc., contri	butions to organizations described	in section 501(c)(7), (8), or (10) that total more than \$1,000 for
(a) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) Transfere's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (c) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferoe         (c) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (c) Transfer of gift       (c) Use of gift       (d) Description of how gift is held         (f) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (f) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (f) No. Pert1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is	i ui t iii	the year from any one contributor. Complete co	lumns (a) through (e) and the follov	ving line entry. For organizations
Part		Use duplicate copies of Part III if additional	space is needed.	less for the year. (Enter this into, once.)
Part	(a) No.	(h) Durness of sift		(d) Deceription of how sift is hold
Image: Control of the second secon	Part I	(b) Purpose of gift	(c) Use of gin	(d) Description of now gift is neid
Image: Control of the second secon	_			
Image: Control of the second secon	-			
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Image: Control of the second secon			(e) Transfer of gift	
(a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (g) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (g) No.       (e) Transfer of gift       (d) Description of how gift is held       (e) Transfere's name, address, and ZIP + 4       Relationship of transferor to transferee         (g) No.				
Part 1		Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee
Part 1	-			
Part 1	-			
Part 1	-			
Part 1	(a) No.			
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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (f) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held       (f) Description of bit transferor to transferee         (a) No.       (b) Purpose of gift       (c) Use of gift       (f) Description of transferor to transferee         (a) No.       (b) Purpose of gift	from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (f) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held       (f) Description of bit transferor to transferee         (a) No.       (b) Purpose of gift       (c) Use of gift       (f) Description of transferor to transferee         (a) No.       (b) Purpose 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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (f) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held       (f) Description of bit transferor to transferee         (a) No.       (b) Purpose of gift       (c) Use of gift       (f) Description of transferor to transferee         (a) No.       (b) Purpose 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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (f) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held       (f) Description of bit transferor to transferee         (a) No.       (b) Purpose of gift       (c) Use of gift       (f) Description of transferor to transferee         (a) No.       (b) Purpose 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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (c) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         (b) Purpose of gift       (c) Use of gift       (e) Transfer of gift         (e) Transfer of gift       (e) Transfer of gift       (f) Description of transferor to transferee         (b) Purpose of gift       (c) Use of gift       (f) Description of bow gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (f) Description of transferor to transferee <td>-</td> <td></td> <td>(a) Transfor of gift</td> <td></td>	-		(a) Transfor of gift	
(a) No. Form Part1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. Part1       (e) Transfer of gift       (e) Transfer of gift         (e) Transfer of gift       (d) Description of how gift is held         (a) No. Part1       (b) Purpose of gift       (c) Use of gift         (a) No. Part1       (b) Purpose of gift       (c) Use of gift         (c) Use of gift       (d) Description of how gift is held         (a) No. Part1       (b) Purpose of gift       (c) Use of gift         (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift         (e) Transfer of gift       (c) Use of gift         (e) Transfer of gift       (c) Use of gift         (e) Transfer of gift       Schedule B (form 980, 980-EZ, or 900-PE) (2010)			(e) Transfer of gin	
(a) No. Form Part1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. Part1       (e) Transfer of gift       (e) Transfer of gift         (e) Transfer of gift       (d) Description of how gift is held         (a) No. Part1       (b) Purpose of gift       (c) Use of gift         (a) No. Part1       (b) Purpose of gift       (c) Use of gift         (c) Use of gift       (d) Description of how gift is held         (a) No. Part1       (b) Purpose of gift       (c) Use of gift         (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift         (e) Transfer of gift       (c) Use of gift         (e) Transfer of gift       (c) Use of gift         (e) Transfer of gift       Schedule B (form 980, 980-EZ, or 900-PE) (2010)		Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee
Part I Control				· · · · · · · · · · · · · · · · · · ·
Part I Control				
Part I Contraction	-			
Part I Contraction	(a) No.			
(a) No. (e) Transfer of gift Transferee's name, address, and ZIP + 4 (e) Transfer of gift (f) Description of how gift is held (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (e) Transfer of gift Comparison of transferor to transferee (e) Transfer of gift (f) Description of how gift is held (e) Transfer of gift (f) Description of transferor to transferee (e) Transfer of gift Transferee's name, address, and ZIP + 4 (f) Transfer of gift (f) Transfer of gift (g) Transfer of gift	`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (c) Use of gift       (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         23454 10-18-16       Schedule B (Form 990, 990-EZ, or 990-PF) (2016)       (E) Schedule B (Form 990, 990-EZ, or 990-PF)				
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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (c) Use of gift       (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         23454 10-18-16       Schedule B (Form 990, 990-EZ, or 990-PF) (2016)       (E) Schedule B (Form 990, 990-EZ, or 990-PF)				
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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (c) Use of gift       (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         23454 10-18-16       Schedule B (Form 990, 990-EZ, or 990-PF) (2016)       (E) Schedule B (Form 990, 990-EZ, or 990-PF)	_			
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         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (c) Use of gift       (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         23454 10-18-16       Schedule B (Form 990, 990-EZ, or 990-PF) (2016)       (E) Schedule B (Form 990, 990-EZ, or 990-PF)			(a) Turneferreferref	
(a) No. From Part 1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. Part 1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) 23454 10-18-16       Schedule B (Form 990, 990-EZ, or 990-PF) (2016)			(e) Transfer of gift	
(a) No. From Part 1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. Part 1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) 23454 10-18-16       Schedule B (Form 990, 990-EZ, or 990-PF) (2016)		Transferee's name, address, and	1 <b>ZI</b> P + 4	Relationship of transferor to transferee
Part I Pa				·
Part I Pa				
Part I Pa	-			
Part I Pa	(a) No.			
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee 23454 10-18-16 Schedule B (Form 990, 990-EZ, or 990-PF) (2016	from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee	rarti			
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee				
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee				
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee			· · - · ·	
23454 10-18-16 Schedule B (Form 990, 990-EZ, or 990-PF) (2016			(e) Transfer of gift	
23454 10-18-16 Schedule B (Form 990, 990-EZ, or 990-PF) (2016		Transferee's name address and	17IP + 4	Relationship of transferor to transferee
	-			
	623454 10-18-16	3	<u>Э</u> Л	Scneaule B (Form 990, 990-EZ, or 990-PF) (2016

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			al Financial Statements		OMB No. 1545-0047
(⊦orr	n 990)	Part IV, line 6, 7, 8, 9, 10	anization answered "Yes" on Form 990, 1, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		
	ment of the Treasury I Revenue Service		Attach to Form 990. rm 990) and its instructions is at <i>www.irs.gov</i>	/form990.	Open to Public Inspection
	e of the organization			Employer	identification number $5-6542234$
Pa	t I Organiza	ations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts.	Complete if the
	organization	n answered "Yes" on Form 990, Part IV, lir			
			(a) Donor advised funds	(b) Funds and	d other accounts
1		nd of year			
2		f contributions to (during year)			
3		f grants from (during year)			
4 5		t end of year	l writing that the assets held in donor advised fu	Inde	
5	-		exclusive legal control?		Yes No
6			advisors in writing that grant funds can be used		
•	•	<b>u</b>	or donor advisor, or for any other purpose conf		
				0	Yes No
Pa	tll Conserva	ation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part I	IV, line 7.	
1	Purpose(s) of cons	servation easements held by the organizat	ion (check all th <u>at a</u> pply).		
	Preservation	of land for public use (e.g., recreation or e	education)	lly important la	ind area
		f natural habitat	Preservation of a certified	historic struct	ure
	Preservation	of open space			
2	Complete lines 2a	through 2d if the organization held a quali	fied conservation contribution in the form of a		
	day of the tax year				at the End of the Tax Year
-					
b					
c b			ructure included in (a)	2c	
a			,	2d	
3			leased, extinguished, or terminated by the org		in the tax
Ŭ	vear ►		icased, extinguished, or terminated by the eng		
4		where property subject to conservation ea	sement is located		
5		tion have a written policy regarding the pe			
	violations, and enfo	orcement of the conservation easements i	it holds?		Yes No
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva		ts during the year
	▶				
7	Amount of expens	es incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	easements du	ring the year
	▶\$				
8			ve satisfy the requirements of section 170(h)(4)		
					Yes No
9		•	ion easements in its revenue and expense stat	-	
			tion's financial statements that describes the o	organization's a	accounting for
Da	conservation ease		f Art, Historical Treasures, or Othe	r Similar A	sate
1 0		the organization answered "Yes" on Form			55613.
12		-	SC 958), not to report in its revenue statement	and balance s	heet works of art
14	-		hibition, education, or research in furtherance		
		note to its financial statements that descr			, provido, irr drevin,
b			SC 958), to report in its revenue statement and	l balance shee	t works of art, historical
			ducation, or research in furtherance of public s		
	relating to these ite				C C
	-			▶\$	
2			easures, or other similar assets for financial gain		
		ints required to be reported under SFAS 1			
		eduction Act Notice, see the Instruction	s for Form 990.	Sche	dule D (Form 990) 2016
63205	1 08-29-16		25		
			4 J		

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		NT TRUST				95-65			
Par	t III Organizations Maintaining C								
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a s	significant	use of its	collectio	n iter	ns
	(check all that apply):								
а	Public exhibition	d		hange programs					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	-	-	-		ose in Par	t XIII.		
5	During the year, did the organization solicit o		,	,			-		-
	to be sold to raise funds rather than to be ma		0				Yes		_ No
Par	t IV Escrow and Custodial Arran		te if the organizatio	n answered "Yes" o	n Form 990	), Part IV,	line 9, or		
	reported an amount on Form 990, Pa								
<b>1</b> a	Is the organization an agent, trustee, custod						7		٦
	on Form 990, Part X?					L	Yes		_ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:		<b></b>				
							Amount		
	Beginning balance								
	Additions during the year								
e	Distributions during the year								
t	Ending balance								<b></b>
	Did the organization include an amount on F				• • • • • • • • • • • • • • • • • • • •	L	Yes		_  No
Par	If "Yes," explain the arrangement in Part XIII.								
Fai	<b>t V Endowment Funds.</b> Complete i					aava baali	( ) <b>F</b> aur		heal
		(a) Current year	(b) Prior year	(c) Two years back					
	Beginning of year balance	5,576,597.	5,582,254.		,	40,729.	4		,443.
	Contributions	20,199.	680,143.	,		20,206.			,393.
	Net investment earnings, gains, and losses	780,547.	-387,760.	,		42,709.			,170.
	Grants or scholarships	266,713.	261,461.	235,373.	2	15,966.		190	,894.
е	Other expenditures for facilities								
	and programs	24 441	26 570	24.240		20 022			202
	Administrative expenses	34,441.	36,579.			28,933.			<u>,383.</u>
g	End of year balance	6,076,189.	5,576,597.		5,5	58,745.	4	,640	,729.
2	Provide the estimated percentage of the cur	· · · · ·		a)) held as:					
a	Board designated or quasi-endowment	9.70	_%						
b	Permanent endowment  84.00	<u> </u>							
С	· · · · · · · · · · · · · · · · · · ·	6.30 %							
	The percentages on lines 2a, 2b, and 2c sho	-							
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organiz	zation	г		T
	by:							Yes	No X
	(i) unrelated organizations							v	
	(ii) related organizations						3a(ii)	X	
b	If "Yes" on line 3a(ii), are the related organiza						3b	Х	
4	Describe in Part XIII the intended uses of the	<u> </u>	wment funds.						
Par	<b>t VI</b> Land, Buildings, and Equipm								
	Complete if the organization answere								
	Description of property	(a) Cost or ot basis (investm			Accumulate	a	(d) Bool	< valu	le
	Land				produción				
	Buildings								
	Leasehold improvements								
	Equipment								
	Other								
	Add lines 1a through 1e. (Column (d) must e		X, column (B). line 1	0c.)					0.
				,		Schedule	D (Form	n 990	

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Schedule D (Form 990) 2016 ENDOWMENT T	RUST	9	5-6542234 <sub>Page</sub> 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or Category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) HEDGE FUNDS	877,058.	END-OF-YEAR MARKE	T VALUE
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	877,058.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets.			
	on Form 000 Port IV line	11d Soc Form 000 Part V line 15	
Complete if the organization answered "Yes"	Description	The See Form 990, Fart A, line 13.	(b) Book value
	Description		
<u>(1)</u> (2)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	o 15 )		•
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 2	25
1.         (a) Description of liability		(b) Book value	-0.
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8) (9)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	<u>a 25 )</u>		
<ol> <li>Liability for uncertain tax positions. In Part XIII, provide</li> </ol>		the organization's financial statement	s that reports the
organization's liability for uncertain tax positions. In Part Ain, provide			
organization s hability for uncertain tax positions under	1 11 40 (AGC 7 40). CITECK		

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Sche	dule D (Form 990) 2016 ENDOWMENT TRUST		95-6542234	Page <b>4</b>
	t XI Reconciliation of Revenue per Audited Financial St	atements With Reve		
	Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 12a.		
1	Total revenue, gains, and other support per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)	5	
Pa	t XII Reconciliation of Expenses per Audited Financial S	tatements With Expe	enses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 12a.		
1	Total expenses and losses per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses	2c		
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Pa	t 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.

### PART V, LINE 4:

THE TRUSTEES USE THE EARNINGS OF THE ENDOWMENT TO ASSIST IN THE LONG-TERM

NEEDS OF THE SANTA BARBARA SYMPHONY ORCHESTRA ASSOCIATION IN PROVIDING A

QUALITY, IMPACTFUL, MUSICAL PROGRAM IN THE COMMUNITY.

PART X, LINE 2:

THE SYMPHONY IS UNAWARE OF ANY UNCERTAIN TAX POSITIONS AT JUNE 30, 2017,

### OR FOR ANY PERIOD FOR WHICH THE NORMAL STATUTE OF LIMITATIONS REMAINS

OPEN.

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	NTA BARBARA SYMPHONY ORCHESTRA DOWMENT TRUST	95-6542234	Page
hedule D (Form 990) 2016 ENI art XIII Supplemental Information	on (continued)		r age
		Schedule D (Form 99	90) 2

SCHEDULE I         Form 990)         Department of the Treasury         Internal Revenue Service											
······································	RBARA SYMP	HONY ORCHES					Employer identification number				
ENDOWMEN Part I General Information on Grants							95-6542234				
1 Does the organization maintain record criteria used to award the grants or as	s to substantiate th sistance?				, ,						
2 Describe in Part IV the organization's p Part II Grants and Other Assistance t	o Domestic Organ	izations and Domest	i <b>c Governments.</b> C	omplete if the org	anization answered "	/es" on Form 990, Par	t IV, line 21, for any				
recipient that received more that <b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance				
SANTA BARBARA SYMPHONY ORCHESTRA ASSOCIATION - 1330 STATE STREET - SANTA BARBARA, CA 93101	95-2104089	501 (C) 3	266,713.	0.			GENERAL SUPPORT				
2 Enter total number of section 501(c)(3)	and government o	rganizations listed in t	he line 1 table			ı 	▶ <u>1.</u>				
3 Enter total number of other organization											

Schedule I (Form 990) (2016)

ENDOWMENT TRUST

95-6542234

Page 2

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.

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2

THE TRUSTEES OF THE SYMPHONY ENDOWMENT TRUST FOLLOW THE ACTIVITIES OF

THE SANTA BARBARA SYMPHONY ORCHESTRA ASSOCIATION AND RECEIVE REPORTS

FROM ITS EXECUTIVE DIRECTOR.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

### 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. ► Attach to Form 990 or 990-EZ.

 Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

 SANTA BARBARA SYMPHONY ORCHESTRA
 Emplo

 ENDOWMENT TRUST
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95-6542234

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SYMPHONY ENDOWMENT IN ORDER TO PROVIDE GENERAL SUPPORT FOR THE SANTA

BARBARA SYMPHONY ORCHESTRA ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 2:

A.C. MOORE IS BRETT MOORE'S FATHER, BOTH ARE TRUSTEES OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 WILL BE REVIEWED BY THE FINANCE COMMITTEE AND AUDIT COMMITTEE OF

THE SANTA BARBARA SYMPHONY ORCHESTRA ASSOCIATION, A RELATED ORGANIZATION.

AFTER THE APPROVAL OF THE 990 BY THE FINANCE & AUDIT COMMITTEES, THEY WILL

PRESENT IT TO THE TRUSTEES OF THE ENDOWMENT FOR ANY COMMENTS AND QUESTIONS

PRIOR TO FILING THE RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

THE SYMPHONY ENDOWMENT TRUST HAS BOTH A WRITTEN CONFLICT OF INTEREST POLICY AND AN ANNUAL DISCLOSURE OF CONFLICTS. THE GOVERNANCE COMMITTEE OF THE ENDOWMENT TRUST OVERSEES DISTRIBUTION OF THE POLICY TO NEW TRUSTEES AND THE COLLECTION OF ANNUAL DISCLOSURES OF CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS OF THE ENDOWMENT TRUST ARE AVAILABLE FOR INSPECTION AT THE OFFICES OF THE SYMPHONY DURING REGULAR BUSINESS HOURS, SUBJECT TO AN APPOINTMENT MADE THROUGH THE MANAGING DIRECTOR'S OFFICE.

 FORM 990, PART XI, LINE 2C

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2016)

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Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization SANTA BARBARA SYMPHONY ORCHESTRA ENDOWMENT TRUST	Employer identification number 95-6542234
THE FINANCE AND AUDIT COMMITTEES OF THE SANTA BARBARA SYM	PHONY
ORCHESTRA ASSOCIATION REVIEW THE AUDITED FINANCIAL STATEM	ENTS AND 990
THEN PRESENT THEM TO THE BOARD OF DIRECTORS OF THE SYMPHO	NY ENDOWMENT.
THE AUDIT COMMITTEE RECOMMENDS INDEPENDENT AUDITORS AND T	HE BOARD OF
DIRECTORS CHOOSES THE AUDITOR. THE PROCESS HAS NOT CHANGE	D SINCE THE
PRIOR YEAR.	

FORM 990, PART XI, LINE 8

THE SYMPHONY ENDOWMENT RECORDED THE VALUE AS OF JUNE 30, 2016, OF A

CHARITABLE REMAINDER TRUST (CRT) AS A REDUCTION OF NET ASSESTS AS THE

CRT IS RECORDED ON THE RELATED ENTITY WHICH IS THE BENEFICIARY.

FORM 990, PART VI, LINE 15B

THE SANTA BARBARA SYMPHONY ORCHESTRA ENDOWMENT TRUST CURRENTLY DOES NOT

COMPENSATE OFFICERS OR KEY EMPLOYEES.

SCHEDULE R	Related Organizations and Unrelated Partnerships					
(Form 990)	Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.		2016			
Department of the Treasury Internal Revenue Service	Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.	Open to Public Inspection				
Name of the organizati	on SANTA BARBARA SYMPHONY ORCHESTRA	Employer iden	tification number			
	ENDOWMENT TRUST	95-654	2234			
Part I Identificati	on of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity

## 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.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	<b>(f)</b> Direct controlling entity	cont	<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
SANTA BARBARA SYMPHONY ORCHESTRA ASSOCIATION	PROVIDES PERFORMANCES OF						
- 95-2104089, 1330 STATE STREET, SANTA	CLASSICAL MUSIC TO THE						
BARBARA, CA 93101	COMMUNITY.	CALIFORNIA	501 (C) 3	9			х
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2016

Schedule R (Form 990) 2016 ENDOWMENT TRUST

95-6542234 Page 2

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.

(a)	(b)	(c)	(d)	(e)	(f)	(g)		n)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partne	<sup>I or</sup> Percentage <sup>ing</sup> ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	lo
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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.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	Sec 512( contr ent	(i) ction (b)(13) trolled tity?
		country)		or trusty		235013			No

### SANTA BARBARA SYMPHONY ORCHESTRA ENDOWMENT TRUST

Schedule R (Form 990) 2016

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No			
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?						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х			
	Gift, grant, or capital contribution to related organization(s)	1b	Х				
	Gift, grant, or capital contribution from related organization(s)	1c		Х			
d	Loans or loan guarantees to or for related organization(s)	1d		Х			
	Loans or loan guarantees by related organization(s)	1e		Х			
f	Dividends from related organization(s)	1f		X			
g	Sale of assets to related organization(s)	1g		X			
h	Purchase of assets from related organization(s)	1h		Х			
i	Exchange of assets with related organization(s)	1i		Х			
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х			
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х			
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х			
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х			
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х			
	Sharing of paid employees with related organization(s)	10		Х			
р	Reimbursement paid to related organization(s) for expenses	1p		Х			
q	Reimbursement paid by related organization(s) for expenses	1q		Х			
r	Other transfer of cash or property to related organization(s)	1r		Х			
s	Other transfer of cash or property from related organization(s)	1s		Х			
2	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.						

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amount involved
SANTA BARBARA SYMPHONY ORCHESTRA (1) ASSOCIATION	В	266,713.	FMV
<u>(2)</u>			
(3)			
(4)			
(5)			
_(6)	26		

Schedule R (Form 990) 2016 ENDOWMENT TRUST

### Part VI 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.

(-)	(h)		(a)			(4)	( 11)		-)	(1)	(3)	(1.)
(a)	(b)	(c)	(d)	(€ Are partner 501(c org	<b>all</b>	(f)	(g)		1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partner	rs sec.	Share of	Share of	Dispr tior	opor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin	Percentage
of entity		(state or foreign	excluded from tax under	org	s.?	total	end-of-year	alloca	tions?	of Schedule K-1	partner?	ownersnip
		country)	sections 512-514)	Yes	No	income	assets	Yes	No	(Form 1065)	Yes No	
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Schedule R (Form 990) 2016

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ENDOWN	<b>IENT</b>	TRUS	ST	

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Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

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