SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Employer Identification number Name of the Organization Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Part I **Employees** (A) (B) (C) (D) (F) (E) Name and Title Average hours Position (check all that apply) Reportable Reportable Estimated per week compensation compensation amount of Officer Former Individual trustee or director Institutional trustee Key employee Highest compensated employee from from related other organizations compensation the organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization and related organizations