## **SCHEDULE L** (Form 990 or 990-EZ)

## **Transactions With Interested Persons**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Name of	the organization							Emplo	yer ide	ntificati	on nui	mber			
Part								11(c)(29) organiz 5a or 25b, or Fo				V. line	40b.		
	·	(b) Relationship between disqualified person and										rected?			
1 (a) Name of disqualified person		person	organization				(c) Description of trans			nsaction	action		Yes	No	
(1)															
(2)															
(3)															
(4)															
(5) (6)															
	Enter the amount	of tax incurred	d by the organ	nizatio	n manac	ners or disc	 gualif	ied nersons du	rina t	he ve	ar				
	under section 4958				_		-			l	<u>\$</u>	<b>`</b>			
3	Enter the amount o	f tax, if any, or	line 2, above,	reimb	oursed by	the organi	izatior	ı		1	▶ \$				
					-										
Part I	Complete if th	or From Interple organization eported an am	answered "Ye	s" on	Form 990 Part X, line	0-EZ, Part \ e 5, 6, or 22	V, line 2.	38a or Form 99	90, Pa	ırt IV,	line 2	6; or i	f the		
		(b) Relationship with organization			oan to or om the anization?	(e) Origin principal am				(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				То	From				Yes	No	Yes	No	Yes	No	
(1)															
(2)															
(3)											<u> </u>				
(4)											<u> </u>				
(5)											<u> </u>				
(6)				-											
(7) (8)															
(9)															
(10)															
Total				٠	<del></del>		. ▶	\$							
Part I		sistance Bene ne organization	fiting Interest	ed Pe	ersons.		ine 27	7.							
		ship between inter and the organization	(c) Amount of assistance		(d) Type of assistance			(e) Purpose of assistance							
(1)															
(2)															
(3)															
(4)							-								
(5) (6)							-								
(6) (7)															
(8)							-								
(9)															
(10)															
	erwork Reduction A	ct Notice, see t	he Instructions	for Fo	rm 990 or	990-FZ	Ca	at. No. 50056A	Sche	dule L	(Form	990 or	990-EZ	 2) 2018	

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