## SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Related Organizations and Unrelated Partnerships** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Employer identification number

Part I	Identification of Disregarded Entities. Complete	te if the or	rganization	answered "Yes	s" on	Form 990, Par	t IV, line 33.			
	(a) Name, address, and EIN (if applicable) of disregarded entity			<b>(b)</b> ary activity	Lega or t	(c) (d) gal domicile (state or foreign country)		(e) End-of-year assets	(f) Direct controlli entity	
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
Part II	Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations du	ations. Co	l omplete if tl ax year.	he organization	n ans	wered "Yes" or	n Form 990, Pa	rt IV, line 34 beca	ause it h	ad
	(a) Name, address, and EIN of related organization		(b) ry activity	(c) Legal domicile (state or foreign country	ate E	(d) Exempt Code section	(e)	(f) us Direct controlling	g Section cor	(g) 512(b)(13 atrolled atity?
									Yes	No
(1)										
(2)										
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(7)										

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) ortionate ations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
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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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d)	(e) Type of entity (C corp, S corp, or trust)	(f)	(g) Share of end-of-year assets	(h) Percentage ownership	Section 5 contr enti	) 12(b)(13) olled ity?
								Yes	No
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organization is labeled in parts III-V/7  1 A Receipt of (i) interest, (ii) annuties, (iii) royalties, or (iii) vert from a controlled entity  2 Gift, grant, or capital contribution to related organization(s)  3 Gift, grant, or capital contribution from related organization(s)  4 Loans or loan guarantees to or for related organization(s)  5 Loans or loan guarantees by related organization(s)  6 Loans or loan guarantees by related organization(s)  7 Dividends from related organization(s)  8 Sale of assests to related organization(s)  9 Sale of assests to related organization(s)  1 Exchange of assests from related organization(s)  1 Lease of facilities, equipment, or other assests to related organization(s)  1 Performance of services or membership or fundralising solicitations for related organization(s)  1 Performance of services or membership or fundralising solicitations for related organization(s)  1 Performance of services or membership or fundralising solicitations for related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  1 Performance of services or membership or fundralising solicitations by related organization(s)  2 Performance of services or membershi	Note	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Ye	s No
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## 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.

	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				sections 512-514)	Yes	No			Yes	No		Yes	No	
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Schedule R (Form 990) 2016 Pag								
Part VII	Supplemental Information.  Provide additional information for responses to questions on Schedule R. See Instructions.							