SCHEDULE R-1 (Form 990)

Continuation Sheet for Schedule R

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of filing organization

Attach to Schedule R to list additional information for Part I, Part II, Part III, Part IV, Part V, line 2, or Part VI.



Employer identification number

Continuation of Identification of Disregarded Entities Part I (A) (B) (C) (D) (E) (F) Name, address, and EIN of disregarded entity Legal Domicile (State Primary Activity Total income End-of-year assets **Direct Controlling** or Foreign Country) (\$) (\$) Entity

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II

Continuation of Identification of Related Tax-Exempt Organizations

/A)	(P)	(0)		(E)	(5)
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal Domicile (State or Foreign Country)	(D) Exempt Code section	(E) Public charity status (if 501(c)(3))	(F) Direct Controlling Entity
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Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(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, investment, unrelated)	(F) Share of total income (\$)	(G) Share of end-of-year assets (\$)	(H Dispropo allocat	ortionate	(I) Code V-UBI amount on Box 20 of K-1 (\$)	Gene Mana	J) eral or aging ther?
						1	Yes	No		Yes	No
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Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal Domicile	(D) Direct Controlling	(E) Type of entity	(F) Share of total income	(G) Share of	(H)
		(State or Foreign Country)	Entity	Type of entity (C corp, S corp, or trust)	(\$)	end-of-year assets (\$)	Percentage ownership
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	(A) Name of other organization	(B) Transaction type (a)-(r)	(C) Amount involved (\$)
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Part VI Continuation of Unrelated Organizations Taxable as a Partnership

(A) Name, address, and EIN of entity	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Are all partners 501(c)(3) organization	(E) Share of end-of-year assets s? (\$)	(F) Disproportiona allocations?		(G) phate S? Code V-UBI amount on Box 20 of K-1 (\$)		(H) General or Managing Partner?	
			Yes No	2	Yes	No		Yes	No	
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