DO NOT FILE WITH THE INTERNAL REVENUE SERVICE

EXTENDED TO MAY 15, 2018

Form **990** 

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016
Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. and ending JUN 30, 2017 A For the 2016 calendar year, or tax year beginning JUL 1, 2016 B Check if applicable D Employer identification number C Name of organization Address change SHORE COMMUNITY SERVICES INC 36-2384323 Doing business as Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite 847-982-2030 8350 LARAMIE term 5,765,340. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return SKOKIE, IL 60077 H(a) Is this a group return Applica-F Name and address of principal officer: INDIA ALEXIS EHIOBA Yes X No for subordinates? pendina SAME AS C ABOVE \_ Yes ∟ **H(b)** Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) ( 527 ) ◀ (insert no.) [ 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► SHORESERVICES.ORG **H(c)** Group exemption number ▶ L Year of formation: 1957 M State of legal domicile: IL K Form of organization: X Corporation Association Other > Part I Summary Briefly describe the organization's mission or most significant activities: DEVELOP DAY SERVICES FOR PERSONS Activities & Governance WITH DEVELOPMENTAL DISABILITIES Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 21 Number of voting members of the governing body (Part VI, line 1a) 21 Number of independent voting members of the governing body (Part VI, line 1b) 119 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 238 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7b **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 1,083,469. 3,090,647. Contributions and grants (Part VIII, line 1h) Revenue 2,285,564. 4,050,610. Program service revenue (Part VIII, line 2g) 45,289. 58,420. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 454,105. 14,541. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,207,040. 5,875,605. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ...... 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Λ. **14** Benefits paid to or for members (Part IX, column (A), line 4) 4,349,641. 4,179,601. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,730,144. 1,811,626. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,909,745. 6,161,267. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -954,227. -34,140.19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 10,378,298. 10,021,072. 20 Total assets (Part X, line 16) 3,743,407. 4,352,505. 21 Total liabilities (Part X, line 26) zet m 6,634,891. 5,668,567. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Feb. 16.2018 Signature of office Sign INDIA ALEXIS EHIOBA, EXECUTIVE DIRECTOR Here Type or print name and title Print/Type preparer's name Preparer's signature Onto 2/15/18 P01985511 Paid RON MARKLUND self-employed Firm's name DUGAN & LOPATKA, CPA'S PC Firm's EIN Preparer 36-2886485 Firm's address 104 E. ROOSEVELT ROAD SUITE 102 Use Only WHEATON, IL 60187-5267 Phone no. 630 - 665 - 4440

X Yes No

May the IRS discuss this return with the preparer shown above? (see instructions)

Form	990 (2016) SHORE COMMUNITY SERVICES INC	36-2384323 Page <b>2</b>
Pai	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:  DEVELOP DAY SERVICES FOR PERSONS WITH DEVELOPMENT	TAL DISABILITIES.
	VOCATIONAL AND WORKSHOP PROGRAMS WERE EXPANDED T	
	TRAINING CENTERS AND ADULT RESIDENTIAL SERVICES	TO IMPROVE THE QUALITY
	OF LIFE FOR DEVELOPMENTALLY DISABLED INDIVIDUALS	THROUGH
2	Did the organization undertake any significant program services during the year which were not li	sted on the
	prior Form 990 or 990-EZ?	Yes 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 prog	ram services? Yes 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	m services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo	
	revenue, if any, for each program service reported.	outlone to others, the total expenses, and
4a	1 (04 1 [ 4	) (Revenue \$ 1,476,803.)
70	SHORE TRAINING CENTER - PROVIDES DEVELOPMENTAL T	
	EMPLOYMENT AND JOB PLACEMENT SERVICES FOR OVER 1	
	INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIE	
	READY TO WORK IN THE COMMUNITY, THE JOB PLACEMEN	
	FIND THE MOST SUITABLE JOB AND ENCOURAGES THEM T	
	VOCATIONAL OPPORTUNITIES ARE AVAILABLE TO INDIVI	
	DEMAND CLOSER SUPERVISION AND GUIDANCE AT THE KO	
	INDIVIDUALS EARN A WAGE ACCORDING TO THEIR PRODU	
	LOCAL BUSINESSES CONTRACT WITH SHORE FOR COLLATI	
	SHRINK-WRAPPING TYPE JOBS. BY EARNING A WAGE AN	
	SKILLS, INDIVIDUALS ARE BUILDING A MORE SELF-SUF	FICIENT DIFESTILE.
	1 176 000	) (Revenue \$ 930,310.)
4b	(Code: ) (Expenses \$ 1,176,982. including grants of \$	
	LOIS LLOYD CENTER - HOUSES THE ADULT SERVICES &	
	LIFE IN MOTION - YOUR CHOICE PROGRAM, WHICH OFFE	
	TRAINING FOR ADULTS 18 YEARS AND OLDER WHO MAY H	
	DISABILITIES, INCLUDING SEVERE/PROFOUND TO MODER	
	DISABILITIES, BE PHYSICALLY CHALLENGED AND MEDIC	
	PROGRAMS TEACHES ADAPTIVE DAILY LIVING SKILLS AN	
	THE SENIORS PROGRAM, WHICH IS A RETIREMENT OPTIO	
	OR OLDER. IT IS A MORE RELAXED AND SOCIAL EXPER	
	INDIVIDUALS WHO WANT TO RETIRE FROM REGULAR VOCA	
	IN MOTION IS AN ALTERNATIVE DAY PROGRAM THAT IS	
	EMPOWERS INDIVIDUALS TO ACHIEVE GREATER INDEPEND	
	SELF-GOVERNANCE. THE PROGRAM SUPPORTS INDIVIDUAL	
4c	(Code:) (Expenses \$ 1,169,268. including grants of \$	) (Revenue \$ 439,155.
	THE BUEHLER HOUSE/SHORE HOMES EAST IN EVANSTON A	
	SKOKIE - HOUSES 24 RESIDENTS IN A 24-HOUR STAFF	
	ENVIRONMENT AS SIMILAR AS POSSIBLE TO LIFE IN MA	
	RESIDENTS ARE ENCOURAGED TO INTERACT WITH THEIR	
		SIDENTS ARE ENGAGED IN
	DAYTIME EMPLOYMENT, TRAINING OR SENIOR LEISURE P	ROGRAMMING.
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 1,124,029 • including grants of \$ ) (Revenue	1,212,276.)
4e	Total program service expenses ► 5,154,433.	
		Form <b>990</b> (2016)
63200	2 11-11-16 SEE SCHEDULE O FOR CONTIN	

Form 990 (2016) SHORE COMMUNITY SERVICES INC

36-238<u>4323</u> Page **3** 

Га	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Х	
•	If "Yes," complete Schedule A  Is the organization required to complete Schedule B, Schedule of Contributors?	1 2	X	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2	71	
3	public office? If "Yes," complete Schedule C, Part I	3		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		Х
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 98-19? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		X
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		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		х
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?  If "Yes," complete Schedule D, Part IV	9		Х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	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 VII	11b		X
С	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	11c		х
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 IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	-
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		X
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13 14a		14a		X
	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1-1-0		<del></del>
J	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		х
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? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G. Part III			v
	COMBINETE CONTRULTE CI. Fail III	1 10		

Form **990** (2016)

Schedule L. Part I

SHORE COMMUNITY SERVICES INC

36-2384323

Page 4

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

24a

24b

24c

24d

25a

25b

26

27

28a

29

30

31

32

33

34

35a

35b

36

37

Part IV Checklist of Required Schedules (continued) No X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 X 23

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....

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
 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

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

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

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):

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
 c 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 direc

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations?

If "Yes," complete Schedule N, Part I

Note. All Form 990 filers are required to complete Schedule O

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
 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? /f "Yes," complete Schedule R, Part I

Was the organization related to any tax-exempt or taxable entity? /f "Yes," complete Schedule R, Part II, III, or IV, and

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, an Part V, line 1
 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?
 If "Yes," complete Schedule R, Part V, line 2
 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

38 X Form **990** (2016)

SHORE COMMUNITY SERVICES INC

36-2384323

Page 5

The Enter the number reported in Box 3 of Form 1086. Enter -0 if not applicable 1 a 28 b 1 to 0 o 1 to 1 to 1 to 1 to 1 to 1 to	Pai						
ta Enter the number reported in Box 3 of Form 1096. Enter -0** Into applicable 15 0 0  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming gampling winnings to prize wirmers?  2a Enter the number of repmic years reported on Form W-3, Transmittal of Wage and Tax Statements, 123 119  b If at least one is reported on line 2a, did the organization file all regular deferal employment tax returns?  2b If at least one is reported on line 2a, did the organization file all regular deferal employment tax returns?  2c Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3c Did the organization have unrelated business gross income of \$1.000 or more during the year?  3a X  3b If V*es, *has if filed a form 990-T for this year? If Ve, *to line 80, provide an explanation in Schedule 0  3d A any time during the calendar year, did the organization have an interest in, or a significant or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5a Was the organization are of the foreign country. See instructions for filling requirements for FinCR Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization are party to a prohibited tax shefer transaction at any time during the tax year?  5a Did any contributions that were not tax deductible as charitable contributions?  5b If V*es,* to line 6a or 5b, did the organization file Form 8886.T?  5c Constitutions that the very accelerate that was or is a party to a prohibite tax shefer transaction of the transaction and party for goods and services provided to the payor?  7a Did the organization shell excitable with the was or shefer than south contributions or gifts were not tax deductible?  7b Organization shefer was payment in excess of 5s made party as a contribution and party for goods and services provided to the payor?  7b Did the organization shee		Check if Schedule O contains a response or note to any line in this Part V			— Т		
b Enter the number of Forms W2G included in line 1a. Enter 0-if not applicable of Did the organization comply with backup with backing rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, lited for the calendar year ending with or within the year covered by this return  5 If It least one is reported on line 2a, did the organization file all required federal employment tax returns?  2b X Note. If the sum of line 1s and 2 is greater than 250, you may be required to e-file (see instructions)  3c Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a It least one is reported on line 2a, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign ountry (such as a bank account, securities account, or other financial account if a foreign country (such as a bank account, securities account, or other financial account if a foreign country (such as a bank account, securities account, or other financial account if a foreign country (such as a bank account, securities account, or other financial account)?  4a X any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account if a financial Accounts (FBAR).  5b If Yes, if the term organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, if the security of the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, if the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles of scharibated contributions?  5c If Yes, if the organization shelt with a second in the second party of the second party of the		Established Annual Control of the Co	Lal	2 9 □		Yes	No
Did the organization comply with backup withhelding rules for reportable payments to vendors and reportable gaming (grandbling) winnings to prize winners?  2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  5 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  8 Note. If the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  8 Did the organization have unreaded business gross income of \$1,000 or more during the year?  9 3a X X is filed a Form 990-T for this year? 17 No. 10 line 3b, provide an explanation in Schedule O  8 At any time during the calendar year, did the organization have interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  9 If "Yes," their the name of the foreign country (such as a bank account, securities account, or other financial account)?  9 If "Yes," their the name of the foreign country (such as a bank account, securities account, or other financial account)?  9 If "Yes," their the came of the foreign country (such as a bank account, securities account, or other financial account)?  9 If "Yes," their the came of the foreign country (such as a bank account, securities account, or other financial account)?  9 If "Yes," their the came of the foreign country (such as a bank account, securities account, or other financial account(securities).  9 If "Yes," their the came of the foreign country (such as a bank account, securities account, or other financial account(securities).  9 If "Yes," their the came of the foreign country (such as a bank account, securities account, or other financial account(securities).  9 If "Yes," their the came of the foreign country (such as a bank account, securities).  9 If "Yes," their the organization than the very solution							
a Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements.  a field for the calendar year anding with or within the year covered by this return  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  2b X  Note. If the sum of lines 1 and 2 ais greater than 250, you may be required to e-fife (see instructions)  3c Did the organization have unrelated business gross income of \$1,000 or more during the year?  3c Did the organization have unrelated business gross income of \$1,000 or more during the year?  3c Did the organization have unrelated business gross income of \$1,000 or more during the year?  3d A 3d Arany time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5d Was the organization and the organization file of the organization and an abria was a bank account, securities account, or other financial accounts (FBAR).  5d Was the organization than the organization file organization and the variety of the organization and partly for goods and services provided to the payor?  5d A 5d Was the organization and the organization and schartifable contributions?  5d If Y'es, 'did the organization monthly the donor of the value of the goods or services provided?  5d If Y'es, 'did the organization notify the donor of the value of the goods or services provided?  5d If Y'es, 'idulate the organization monthly the donor of the value of the goods or services provided?  5d If the organization neceived an							
2a Eiter the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements, lifed for the calendary year ending with or within the year covered by this return  b If all least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a X  b If "Yes," has it filled a Form 990.T for this year? If "No," to line 30, provide an explanation in Schedule O  3b A 2 At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a At any time the name of the foreign country.  5b If "Yes," interest the name of the foreign country.  5c If "Yes," to line 5a or 55, did the organization file Form 886617  6c Did any taxable party notify the organization file Form 886617  6d Does the organization have namual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  5c Did If "Yes," did the organization include with every solicitation an expenses statement that such contributions or grifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8 If Yes," did the organization near house yeal contributions under section 170(c).  9 If Yes," did the organization neceive apyment in excess of \$5'' made partly as a contribution of any partly for goods and services provided to the payor?  7c Organization state, acchange, or otherwise dispose of tangible personal property for which it was required to the foreign accounts?  9 If Yes," did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c	C			-	10		
bil fat least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  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 in a foreign country, such as a bank account, securities account, or other financial accountly over, a financial account in a foreign country, levels as a bank account, securities account, or other financial accountly over, a financial account in a foreign country, levels as a bank account, securities account, or other financial accountly over, a financial accountly over, a financial account in a foreign country, levels as a bank account, securities account, or other financial accountly over, a financial account in	22		I I		10		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a X  b If 'Yes,' has it filed a Form 990 T for this year? If 'No,' to line 3b, provide an explanation in Schedule O  3b A At any time during the calendary year, did the organization have an instreast in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountly?  b If 'Yes,' enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b If wes, 'to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5b If Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8d If the organization received a payment in excess of 35's made party as a contribution of and party for goods and services provided to the payor?  7a X X  7b If Yes,' indicate the number of Forms 8282 filed during the year  9c Did the organization received a payment in excess of 35's made party as a contribution of organization received a contribution of organization property, did the organization file approximation pro	24		22	119			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?  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 in a foreign country, when as a bank account, a country country (such as a bank account, a country country (such as a bank account, a country or other financial accountry over, a financial account in a foreign country, when a bank account, a country or other financial accountry over, a financial account in a foreign country. So see instructions for fining requirements for FinCEN Form 114, Report of Foreign Bank and Financial accountry (FBAR).  5a Was the organization are fining requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5b Uard any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b Uard of Interest of the organization in the foreign country of the organization and the organization are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6c X  b If Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Yes, "did the organization include with every solicitation and parity for poods and services provided to the payor?  6c If Yes, "did the organization include with every solicitation and parity for poods and services provided to the payor?  6c If Yes, "did the organization of the value of the goods or services provided or the payor?  7c Variant organization with the donor of the value of the goods or services provided?  7d If Yes, "did the organization or ceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d If Yes, "did the organization or ceived a contribution	h				2h	х	
3a					20		
b If "Yes," has it flied a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  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 in a foreign country (such as a bank account, securities account, or other financial account)?  5 b If "Yes," enter the name of the foreign country; ►  5 c If "Yes," carter the name of the foreign country; ►  5 c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 d If "Yes," to line Sa or 5b, lidt the organization file Form 8886-T?  6 d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twen on tax deductible as charitable contributions?  6 d Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions?  6 d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6 o If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6 o If "Yes," 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?  7 o Transizations that may receive deductible contributions under section 170(c).  8 o If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8282 filed during the year  9 o Did the organization receive any funds, directly or indirectly, or pay premiums on a personal benefit contract?  7 o If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  1 of the organization received a contribution of cars, boats, airplanes, or other vehicl	3a	Diddle			3a		х
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 in a foreign country (such as a bank account, securities account, or other financial account?  b If 'Yes,' enter the name of the foreign country: ▶  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization regular to a prohibited tax shelter transaction at any time during the tax year?  5a Does the organization flat that it was or is a party to a prohibited tax shelter transaction?  5b J X  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b J X  c If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c J Yes,' did the organization total was a munal 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 totude with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 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?  7 b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?  7 b If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  7 c X  1 bid the organization, during the year, pay premiums of personal benefit contract?  7 c X  1 bid the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 c X  1 bid the organization received a contribution of cars, boats, alignates, or other vehicles, did the organization self.  1 bid the o		• • • • • • • • • • • • • • • • • • • •	- 0				
firancial account in a foreign country (such as a bank account, securities account, or other financial accountity?  b If "Yes," enter the name of the foreign country;  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  Sae Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c I"Yes," to line Sa or Sb, did the organization file Form 8886.72  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  5c I"Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b 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?  7b If "Yes," did the organization onlyfy the donor of the value of the goods or services provided?  7c Old the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  7c If "Yes," indicate the number of Forms 8282 filed during the year  8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e X  7f If I we generalization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  77 Ti X  9 If the organization receive any funds, directly or indirectly, on a personal benefit contract?  77 Ti X  9 If the organization receive any many manufaction for organization file Form 8899 as required?  10 If the solution orga					55		<del> </del>
b If "Yes," enter the name of the foreign country.   See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  Sa Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?   5a X X   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 that it was or is a party to a prohibited tax shelter transaction?   5c C    6c   6c   6d   7d   Coes 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?   6d   8d   8d    X   8d    1f "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?   7organizations that may receive deductible contributions under section 170(c).   8d 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?   7d Did the organization notify the donor of the value of the goods or services provided?   7d Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required   7to life Form 8282?   7to X   7to X   7to X   7to I Did the organization make any terminal property of indirectly, to pay premiums on a personal benefit contract?   7to X   7to I Did the organization received a contribution of qualified intellectual property, did the organization file Form 198-C?   7th X   7th I free organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 198-C?   7th I free organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 198-C?   7th I free organization received a contribution of cars, boats, airplanes, or other vehicles, did t	44		-	1	42		x
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b Tyes,* to line 5a or 5b, did the organization file Form 8886-T?  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  5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Te X  g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  8 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions un	h		raccounty:		Tu		
b Did any taxable party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  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 deductibles as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 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?  b If "Yes," did the organization notify the donor of the value of the goods or services provided required to file Form \$282?  c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 D If "Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 D If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 D If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 D If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 D If the organization make a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4			Accounts (FRAF	3)			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6 If 'Yes,' to line 5a or 5b, did the organization file Form 88667?  8 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?  6 If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 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?  9 If 'Yes,' did the organization notify the donor of the value of the goods or services provided?  10 If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  10 If 'Yes,' indicate the number of Forms 8282 filed during the year  10 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 To X  10 If the organization receive any funds, directly or indirectly, on a personal benefit contract?  7 To IV  10 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  11 Did the organization mage and property in the organization file a Form 1098-C?  12 Seponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?  12 Seponsoring organization make any taxable distributions under section 4966?  13 Did the sponsoring organization make any taxable distributions under section 4966?  14 Did the organization selected on Form 990, Part VIII, line 12  15 Gross receipts, included on Form 990, Part VIII, line 12  16 Gross receipts, included on Form 990, Part VIII, line 12  17 Cor	5a				5a		х
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  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?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$5^{\circ}\$ made partly as a contribution and partly for goods and services provided to the payor?  5 If "Yes," did the organization notify the donor of the value of the goods or services provided?  6 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  6 If "Yes," indicate the number of Forms 8282 filed during the year  7 If Id the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 If Id the organization received a contribution of qualified intellectual property, did the organization flee a Form 1098-C?  8 Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distribution under section 4966?  9 Sponsoring organization make any taxable distribution sunder section 4966?  9 Did the sponsoring organization make any taxable distribution sunder section 4966?  9 Did the sponsoring organization make any taxable distribution sunder section 4966?  9 Did the sponsoring organization make and the stribution of the contribution of o					$\overline{}$		
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?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or giffs were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization nested a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 Ta X  5 If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Te X  g If the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required?  h If the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required?  7 Th Did the organization meceived a contribution of orax, boats, airplanes, or other vehicles, did the organization flee Form 1098-C?  8 Sponsoring organization manitarining donor advised funds. Did a donor advised fund maritarined by the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Section 501(c)(12) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  6 Gross income from members or shareholders  b Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 501(c)(12) organizations. Enter:  a It is the organization incensed to i					-		
any contributions that were not tax deductible as charitable contributions?  b     Y'Yes, " did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7   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? b     Y'Yes, " did the organization notify the donor of the value of the goods or services provided?  C   Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d					-		
b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 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?  b if "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization, during the year, pay premiums, directly, to pay premiums on a personal benefit contract?  7 To X  g if the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 To X  g if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  9 a Did the sponsoring organization make any taxable distributions under section 4966?  9 a Did the sponsoring organization make any taxable distributions under section 4966?  9 a Did the sponsoring organization make any taxable distributions under section 4966?  9 a Did the sponsoring organization make any taxable distributions under section 4966?  9 a Did the sponsoring organization make any taxable distributions under section 4966?  9 a Did the sponsoring organization make any taxable distributions under section 4966?  9 a Did the sponsoring organization make any taxable distributions under section 4966?  9 a Did the organization the section 4966?  9 a Did the organization the section 4966?  9	ou				6a		х
were not tax deductible?  7 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?  5 If "Yes," did the organization notify the donor of the value of the goods or services provided?  6 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  7 C X  7 D X  7 D X  7 D X  7 D X  7 D X  7 D X  7 D X  7 D X  7 D X  7 D X  7 D X  7 D X  7 D X  8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? filed during the year  8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  1 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  8 Sponsoring organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution of a donor, donor advised property in the year of the sponsoring organizations. Enter:  1 Initiation fees and capital contributions included on Part VIII, line 12  10 Section 501(c)(12) organizations. Enter:  10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Did  10 Did  11 Section 501(c)(12) organizations. Enter:  12 Gross income from other sources (Do not ne	b				-		
7 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? 7	-				6b		
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?  b if "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c	7						
b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c			ervices provided to	o the payor?	7a	Х	
to file Form 8282?  7c  X  X  If "Yes," indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate the number of Forms 8282 filed during the year  Pick indicate or of the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7  Pick indicate a form 8289 as required?  Pick indicate organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7  Pick indicate organization fleat a Form 1098-C7  Pick indicate organization	_			_	_		
to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Tit X  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Ital  Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves on hand  Center the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?							
d If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organizations. Enter:  10 Section 501(c)(7) organizations. Enter:  11 Section 501(c)(12) organizations. Enter:  12 Gross income from members or shareholders  Did Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  13 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  14 Yes," enter the amount of tax-exempt interest received or accrued during the year  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 in more than one state?  13b  15c Enter the amount of reserves on					7c		X
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  8 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10a  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a 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.  a Is the organization licensed to issue qualified health plans in more than one state?  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  c Enter the amount of reserves on hand  13b  14a Did the organization is a contribution of tanning services during the tax	d						
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Cid the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  13a  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  13b  13c  Little The Agents of the Agents of the Agents of the properties of the propertie					7e		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  13c  Lita X	f				7f		Х
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 b Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	g				7g		
Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Did the sponsoring organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Did Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Did be Gross income from members or shareholders  Did Gross income from members or shareholders  Did Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Did be Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Did be Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Did be Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Did be Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Did be Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Did be Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Did be organization licensed to issue qualified health plans in more than one state?  Did be organization incomes of the alth pla	h						
sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	8						
a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b  10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X					8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  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  c Enter the amount of reserves on hand  13b  Indicating the state of the state of the plans of the plans of the tax year?  14a X	9	Sponsoring organizations maintaining donor advised funds.					
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13b  Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  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 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves any payments for indoor tanning services during the tax year?  14a X	10	Section 501(c)(7) organizations. Enter:					
Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves any payments for indoor tanning services during the tax year?  14a X	а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 15 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 15 Section 501(c)(29) qualified nonprofit health insurance issuers. 16 Is the organization licensed to issue qualified health plans in more than one state? 18 Note. See the instructions for additional information the organization must report on Schedule O. 19 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 15 C Enter the amount of reserves on hand 16 Did the organization receive any payments for indoor tanning services during the tax year? 18 A X	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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 Did the organization receive any payments for indoor tanning services during the tax year? 14a X	11	Section 501(c)(12) organizations. Enter:					
amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  13b  13c  14a X	а	Gross income from members or shareholders	11a				
Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?  12a  12b  13a  13a  13a  13b  13b  2 Inter the amount of reserves on hand  X	b	Gross income from other sources (Do not net amounts due or paid to other sources against					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  13b  13c  14a X		amounts due or received from them.)	11b				
Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  13b  13c  14a  X	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	m 1041?	L	12a		
a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?  13a  13b  13b  13c  14a  X	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
Note. See the instructions for additional information the organization must report on Schedule O.  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  c Enter the amount of reserves on hand  13c  14a  X	13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
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  c Enter the amount of reserves on hand  13c  14a  X	а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a  X		<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.					
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	b						
14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X		organization is licensed to issue qualified health plans	13b				
	С	Enter the amount of reserves on hand	13c				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					14a		X
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ule O		14b		

SHORE COMMUNITY SERVICES INC

36-2384323 Page 6

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.

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 21										
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.										
b	Enter the number of voting members included in line 1a, above, who are independent 21			7.7.2							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			37							
_	officer, director, trustee, or key employee?	2		X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			- v							
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X							
	6 Did the organization have members or stockholders?										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		х							
h	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	1a									
b		7b		x							
8	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	10									
	The governing body?	8a	X								
b	Each committee with authority to act on behalf of the governing body?	8b	Х	<del>                                     </del>							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		X							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			l							
	in Schedule O how this was done	12c		X							
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?	14	X								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		77								
	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b	X								
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10-		Х							
L	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		Α.							
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
		16b									
Sec	tion C. Disclosure	ווטט									
17	List the states with which a copy of this Form 990 is required to be filed ►IL										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	le								
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial								
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records:										
	CAROLYN SAYRE - 847-982-2030										
	8350 LARAMIE, SKOKIE, IL 60077										
		_		(0010)							

632006 11-11-16

#### SHORE COMMUNITY SERVICES INC

36-2384323

Page 7

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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.

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

(A) Name and Title	(B) Average hours per week	(do box	not c , unle	Posi heck ss pe	ition		one th an	(D)  Reportable compensation from	(E)  Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) NATALIE ROMANO	1.00								0	0
PRESIDENT	1 00	Х	_	X	_	_	-	0.	0.	0.
(2) LARRY BERG	1.00									•
VICE PRESIDENT	1 00	Х		Х	_	_		0.	0.	0.
(3) DAVID LLOYD	1.00									•
VICE PRESIDENT	4 00	Х		X		_		0.	0.	0.
(4) ROBIN THOMAS	1.00									
VICE PRESIDENT	1 00	X		X	_			0.	0.	0.
(5) JAMES DADES	1.00									
TREASURER	4 00	Х		Х				0.	0.	0.
(6) SANDRA BUZARD	1.00									
DIRECTOR	1 00	Х				_	_	0.	0.	0.
(7) JANNET CHANG	1.00									
DIRECTOR		X						0.	0.	0.
(8) AMY DANIELS	1.00									
DIRECTOR		Х						0.	0.	0.
(9) SETH HOPKINS	1.00									
DIRECTOR		Х						0.	0.	0.
(10) KEVIN KATZ	1.00	_								
DIRECTOR		Х						0.	0.	0.
(11) KATIE KOENIG	1.00								_	_
DIRECTOR		Х	_				_	0.	0.	0.
(12) WILLIAM LESKE	1.00								_	
DIRECTOR		Х						0.	0.	0.
(13) CARL LIEBERMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(14) MATTHEW MARGOLIS	1.00	1							_	_
DIRECTOR		Х					_	0.	0.	0.
(15) GLORIA MOORE	1.00									
DIRECTOR	1	Х	_	_	_	_	_	0.	0.	0.
(16) LYNN RYAN	1.00	١								
DIRECTOR	1 00	X	_	_	_	_	_	0.	0.	0.
(17) JENNIFER SCANLON	1.00	١								_
DIRECTOR		X						0.	0.	0.

632007 11-11-16

Form **990** (2016)

Form 990 (2016) SHORE COMMUNITY SERVICES INC 36
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) SHORE COMMUNITY SERVICES INC

36-23<u>84323 Page</u>8

(A)		Picy	ees			igne	Sic	T		Г	<b>(E)</b>	
<b>(A)</b> Name and title	( <b>B</b> ) Average	(do	not c	Pos	itior	1 than	one	<b>(D)</b> Reportable	<b>(E)</b> Reportable	E	<b>(F)</b> stimate	ed
	hours per week	box	, unle	ss pe	rson	is bot	h an	compensation from	compensation from related		mount other	•
	(list any hours for	Individual trustee or director				p		the organization	organizations (W-2/1099-MISC)		npensa rom th	
	related	stee or	ustee			ensate		(W-2/1099-MISC)	(** =/ *********************************		ganiza	
	organizations below	nal tru	ional tr		ployee	tcomp					nd rela <sup>.</sup> anizat	
	line)	Individ	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			l	ariizat	10115
(18) DOUGLAS SCHWARTZ	1.00											_
DIRECTOR (19) MICHAEL SELWAY	1.00	Х	-	_	_	$\vdash$	_	0.	0.	-		0.
DIRECTOR	1.00	$ \mathbf{x} $						0.	0.			0.
(20) ROBERT TRANTER	1.00	<del> </del>	$\vdash$		$\vdash$	$\vdash$	$\vdash$					
DIRECTOR		x						0.	0.			0.
(21) KIMBERLY WILLIAMS	1.00											
DIRECTOR		Х						0.	0.			0.
(22) DEBORA BRAUN	40.00	-		3,7				117 264				0
FORMER EXECUTIVE DIRECTOR	40.00	$\vdash$	├-	Х	-	$\vdash$	$\vdash$	117,264.	0.	-		0.
(23) INDIA ALEXIS EHIOBA EXECUTIVE DIRECTOR	40.00	1		x				25,962.	0.			0.
		$\vdash$			$\vdash$	T		2075021				
		1_										
		-										
		$\vdash$	-	-	-	+	$\vdash$			1		
		1										
1b Sub-total								143,226.	0.			0.
c Total from continuation sheets to Par								0.	0.			0.
d Total (add lines 1b and 1c)							<u> </u>	143,226.	0.	<u> </u>		0.
<ul> <li>Total number of individuals (including but compensation from the organization</li> </ul>		nose	liste	ed a	bov	e) w	ho r	received more than \$100	0,000 of reportable			1
compensation from the organization											Yes	No
3 Did the organization list any former office	er, director, or tr	uste	e, ke	ey er	mplo	oyee	, or	highest compensated e	employee on			
line 1a? If "Yes," complete Schedule J fo	or such individua									3		X
4 For any individual listed on line 1a, is the		ole co	omp	ensa	atio	n an	d ot	ther compensation from	the organization			1,,
and related organizations greater than \$										4		X
5 Did any person listed on line 1a receive rendered to the organization? If "Yes," or						_	relat	ted organization or indiv	idual for services	5		X
Section B. Independent Contractors	ompiete Scriedu	10 0 1	101 3	ucn	per	3011				1 3		1 22
Complete this table for your five highest	compensated in	dep	ende	ent c	cont	ract	ors '	that received more than	\$100,000 of compen	sation	from	
the organization. Report compensation												
(A) Name and busin	aca addraca	B.T.	O N T	177				(B) Description of s	continos	) Compe	C)	on
name and busin		1/1	ON:	<u> </u>			-	Description of s	services	Compe		JII
	10°											
2 Total number of independent contracto	rs (including but	not l	imite	ed to	the	ose I	iste	Ld above) who received r	more than			
\$100,000 of compensation from the org	,					0						
										Form	990	(2016)

Form 990 (2016) SHORE C

SHORE COMMUNITY SERVICES INC

36-2384323 Page **9** 

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
Gra	b	Membership dues						
ts, An	С	Fundraising events	1c	126,222.				
ig i	d	Related organizations	1d					
ns,	е	Government grants (contribut	ions) 1e	540,777.				
e Sign	f	All other contributions, gifts, grant	ts, and					
혈취		similar amounts not included above	ve 1f	416,470.				
dat	g	Noncash contributions included in lines	1a-1f: \$	21,541.				
<u>8</u>	h	Total. Add lines 1a-1f		<b>&gt;</b>	1,083,469.			
				<b>Business Code</b>				
e e		DAY PROGRAMS		900099	2,953,368.	2,953,368.		
e vi	b	RENTAL		900099	593,599.	593,599.		
Sch	С		HOP	900099	225,384.	225,384.		
lev ev	d			900099		170,670.		
Program Service Revenue	е	SECOND TIME ARO	UND	900099	107,589.	107,589.		
ا ته	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f			4,050,610.			
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)			39,383.			39,383.
	4	Income from investment of tax						
	5	Royalties		<b>&gt;</b>				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
		Net rental income or (loss)		<b>&gt;</b>				
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	513,058.					
	b	Less: cost or other basis						
		and sales expenses	494,021.					
	С	Gain or (loss)	19,037.	,				
	d	Net gain or (loss)		<b>&gt;</b>	19,037.			19,037.
Ф		Gross income from fundraising						
enne		including \$ 126,2	22. of					
eve		contributions reported on line	1c). See					
Other Rev		· ·	, a	70,886.				
the	b	Less: direct expenses		64,279.				
0		Net income or (loss) from fund		<b>&gt;</b>	6,607.			6,607.
		Gross income from gaming ac	· ·					
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam		<b>&gt;</b>				
		Gross sales of inventory, less	-					
		and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sale		<b>&gt;</b>				
		Miscellaneous Revenu		Business Code				
	11 a	MITCORI I ANIBOTTO		900099	7,934.	7,934.		
	b					,		
	С							1
	d	All other revenue						1
	е	Total. Add lines 11a-11d			7,934.			
	12	Total revenue. See instructions.			5,207,040.	4,058,544.	0.	65,027.
62200	0 11 1							

SHORE COMMUNITY SERVICES INC

36-2384323 Page **10** 

Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	4.5			
	trustees, and key employees	107,201.	95,409.	11,792.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 254 244	0.015.000	422 010	
7	Other salaries and wages	3,351,211.	2,917,392.	433,819.	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	628,185.	558,020.	70,165.	
9	Other employee benefits	263,044.	228,183.	34,861.	
10	Payroll taxes	203,044.	220,103.	34,001.	
11	Fees for services (non-employees):				
	Management	15,153.		15,153.	
	Legal	17,035.	7,100.	9,935.	
	Accounting	17,033.	7,100.	7,755.	
u	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g.	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	244,026.	206,048.	37,978.	
12	Advertising and promotion				
13	Office expenses	273,514.	222,821.	50,693.	
14	Information technology	11,294.	5,376.	5,918.	
15	Royalties				
16	Occupancy	453,348.	348,294.	105,054.	
17	Travel	239,693.	231,294.	8,399.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	12,085.	1,719.	10,366.	
20	Interest	181,564.	54,206.	127,358.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	249,300.	210,014.	39,286.	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	24 420	F 163	00 006	
a	OTHER EXPENSES	34,439.	5,163.	29,276.	
b	DAY PROGRAM FEES	34,172. 16,265.	34,172.		
C	OUTSIDE SERVICES	13,512.	16,265. 12,203.	1 200	
d		16,226.	754.	1,309. 10,695.	4,777.
	All other expenses	6,161,267.	5,154,433.	1,002,057.	4,777.
25 26	Joint costs. Complete this line only if the organization	0,101,207.	3,134,433.	1,002,037.	4,///•
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
_					

632010 11-11-16

Form **990** (2016)

SHORE COMMUNITY SERVICES INC

36-2384323 Page 11

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 717,290. 88,145. Cash - non-interest-bearing 880,244. Savings and temporary cash investments 1,775,110. 2 2 252,521. Pledges and grants receivable, net 3 3 1,061,388. 257,617. Accounts receivable, net 4 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 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 employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 7 Inventories for sale or use 8 8 13,292. 43,047. Prepaid expenses and deferred charges ..... 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 12,002,581. 10a 4,716,465. 7,286,116. b Less: accumulated depreciation 10b 6,811,217. 10c 1,213,382. Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 10,378,298. 10,021,072. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 312,211. 568,818. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 23,574. 10,242. Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 3,167,979. 3,736,702. 23 Secured mortgages and notes payable to unrelated third parties 23 34,965. 24 Unsecured notes and loans payable to unrelated third parties 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 239,643. 1,778. Schedule D 25 3,743,407. 4,352,505. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 5,630,097. 3,982,834. 27 Unrestricted net assets 1,004,794. 1,685,733. Temporarily restricted net assets 28 28 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32

Form **990** (2016)

5,668,567.

10,021,072.

33

6,634,891.

10,378,298.

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

	990 (2016) SHORE COMMUNITY SERVICES INC	36-238	34323	Pag	ge <b>12</b>				
Pai	t XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
			F 20'	<b>7</b> 0	4.0				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,20	7,0	40.				
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,16						
3	Revenue less expenses. Subtract line 2 from line 1	3	-95						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,63						
5	Net unrealized gains (losses) on investments	5	9	4,8	78.				
6	Donated services and use of facilities	6							
7	Investment expenses	7	10		7-				
8	Prior period adjustments	8	-10	b, 9					
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,			۰ -	<b>C</b> 17				
D-	column (B))	10	5,66	8,5	67.				
Pal	t XII Financial Statements and Reporting				37				
	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				37				
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	X					
	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:								
	X Separate basis 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								
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X					
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.								
3a	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit								
	Act and OMB Circular A-133?		3a	X					
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X					
			Form	990	(2016)				

632012 11-11-16

## **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number

		SHOR	E COMMUNIT	Y SERVICES I	NC			3	6-2384323					
Pa	rt I	Reason for Public (	Charity Status (A	All organizations must co	mplete thi	is part.) Se	e instructions							
The	organi	ization is not a private found						,						
1		A church, convention of chu	urches, or associatio	n of churches described	in <b>sectio</b>	n 170(b)(1	)(A)(i).							
2		A school described in secti	on 170(b)(1)(A)(ii). (A	Attach Schedule E (Form	990 or 99	90-EZ).)								
3		A hospital or a cooperative		•			i).							
4		A medical research organiza					-	(iii). Enter	the hospital's name.					
		city, and state:		,				(,	,					
5		An organization operated for	or the benefit of a col	llege or university owned	l or operat	ed by a go	overnmental u	nit describ	ed in					
·		section 170(b)(1)(A)(iv). (C		nogo or armyorony overloo	or operat	.ou by u g	ovorminoritar a	THE GOODING						
6				pental unit described in s	ection 17	O(b)(1)(A)	(v)							
_	X	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in												
'														
		section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8						d in coniu	nation with a	land arant	college					
9		An agricultural research org							-					
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	e or					
40		university:												
10		An organization that normal												
		activities related to its exem												
		income and unrelated busin		(less section 511 tax) fro	om busine	sses acqu	ired by the or	ganization	after June 30, 1975.					
		See <b>section 509(a)(2).</b> (Cor												
11	$\vdash$	An organization organized a	•		•									
12		An organization organized a						-						
		more publicly supported or		,					neck the box in					
		lines 12a through 12d that							-1.1					
а														
		the supported organization			majority o	of the aired	ctors or truste	es of the s	upporting					
		organization. You must o					1	(-)   h   h	. da a					
b		☐ Type II. A supporting org	•				_		-					
		control or management o			ame perso	ons that co	ontrol or mana	ge the sup	ported					
		organization(s). You mus				مادان برموند	and functions	ll. intonunt	a d with					
С		☐ Type III functionally inte						ly integrate	ed with,					
		its supported organization						tad araani	Tation(a)					
d		☐ Type III non-functionally							. ,					
		that is not functionally int					-	an alleni	iveriess					
_		requirement (see instruct	,	•				II. Tuna III.						
е		☐ Check this box if the orga					r rype i, rype	ii, Type iii						
	F1-	functionally integrated, or	,,	nally integrated supporti	ng organiz	zation.								
'		er the number of supported of	_	od organization(s)										
9		vide the following information  i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other					
	,	organization	(-,	(described on lines 1-10	Yes	No No	support (see in	-	support (see instructions)					
				above (see instructions))										
				1		1	1		I .					

Schedule A (Form 990 or 990-EZ) 2016 SHORE COMMUNITY SERVICES INC

36-2384323 Page 2

#### Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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.)

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	3,107,243.	3,105,171.	2,878,764.	3,090,647.	1,083,469.	13,265,294.			
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						10.055.001			
	Total. Add lines 1 through 3	3,107,243.	3,105,171.	2,878,764.	3,090,647.	1,083,469.	13,265,294.			
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	( /						13,265,294.			
	Public support. Subtract line 5 from line 4.		l.	<u> </u>			13,203,234.			
	endar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total			
	Amounts from line 4	3,107,243.	3,105,171.	2,878,764.	3,090,647.	1,083,469.	13,265,294.			
	Gross income from interest,	, , , , , , , , , , , , , , , , , , , ,	,,	, , ,	, , ,	, ,	, , ,			
·	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources	47,639.	41,759.	35,340.	38,111.	39,383.	202,232.			
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.)	12,351.	-20,805.	50,541.	37,522.	7,934.	87,543.			
11	Total support. Add lines 7 through 10						13,555,069.			
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 14	,646,209.			
13	First five years. If the Form 990 is for	r the organization's	s first, second, third	I, fourth, or fifth tax	x year as a sectio	n 501(c)(3)				
	organization, check this box and stor						▶∟			
Se	ction C. Computation of Publ	ic Support Pe	rcentage			<b></b>				
14	Public support percentage for 2016 (					14	97.86 %			
	Public support percentage from 2015					15	90.58 %			
<b>16</b> a	a 33 1/3% support test - 2016. If the o						37			
	stop here. The organization qualifies									
t	33 1/3% support test - 2015. If the									
	and <b>stop here.</b> The organization qual									
17a	17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,									
	and if the organization meets the "fac			-						
	meets the "facts-and-circumstances"	-								
t	10% -facts-and-circumstances tes									
	more, and if the organization meets the						·			
10	organization meets the "facts-and-circ <b>Private foundation.</b> If the organization						s			
18	rivate loundation. If the organization	on did not check a	DOX OIT III TO, TO	i, 100, 17a, 01 170		edule A (Form 990				
							•			

Schedule A (Form 990 or 990-EZ) 2016 SHORE COMMUNITY SERVICES INC

36-2384323 Page 3

#### 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.)

Se	ction A. Public Support	ciow, piedee com	oroto i die ii.,				
	endar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total
1	Gifts, grants, contributions, and	, ,		. ,			
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	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				<u> </u>	<b>†</b>	
, ,	3 received from disqualified persons						
ŀ	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				<u> </u>	<b>+</b>	
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	endar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
		(a) 2012	(6) 2013	(6) 2014	(4) 2013	(6) 2010	(i) rotal
	Amounts from line 6		<b></b>			+	
100	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources					-	
	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975					<del> </del>	
	Add lines 10a and 10b				-	-	
11	Net income from unrelated business activities not included in line 10b,		-				
	whether or not the business is						
	regularly carried on						
12	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 fo	r the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a secti	on 501(c)(3) org	ganization,
							<b>&gt;</b>
	ction C. Computation of Publ						
	Public support percentage for 2016 (		-	column (f))		15	%
	Public support percentage from 2015					16	%
	ction D. Computation of Inve					т т	
17	Investment income percentage for 20	<b>)16</b> (line 10c, colu	mn (f) divided by li	ne 13, column (f))			%
	Investment income percentage from					18	%
19	a 33 1/3% support tests - 2016. If the						line 17 is not
	more than 33 1/3%, check this box a						▶∟
	<b>b 33 1/3</b> % <b>support tests - 2015.</b> If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	on did not check a	a box on line 14, 19	a, or 19b, check	this box and see ir	nstructions	<u>▶</u>

632023 09-21-16

Schedule A (Form 990 or 990-EZ) 2016

#### Part IV Supporting Organizations

(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, loan, 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.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b 5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b 90 or 9	90-E7	2016

Sche		-238432	3 Pa	age <b>5</b>
Par	t IV   Supporting Organizations <sub>(continued)</sub>			
			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	-	
	A family member of a person described in (a) above?	11b	-	
Sec	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. tion B. Type I Supporting Organizations	11c		L
	non b. Type i oupporting organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	
	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		
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		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		T.,	
	Did the constitution and ideal and the constitution in the last described as the COL constitution.		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 <b>Part VI</b> 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 <b>Part VI</b> 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 instruct	ons).		
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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (se	ee instructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	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 <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	Oh		
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Pid the expanization have the power to regularly appoint or elect a majority of the officers, directors, or			
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? <i>Provide details in Part VI.</i>	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	- Ga		
J	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

632025 09-21-16

Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
_3_	Other gross income (see instructions)	3		
_4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
,	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
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		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2016

6

instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

	dule A (Form 990 or 990-EZ) 2016 SHORE COMMUNI	TY SERVICES IN		6-2384323 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			
	organizations, in excess of income from activity			
_3_	Administrative expenses paid to accomplish exempt purpos	es of supported organization	S	
_4_	Amounts paid to acquire exempt-use assets			
_5_	Qualified set-aside amounts (prior IRS approval required)			
_6_	Other distributions (describe in <b>Part VI</b> ). See instructions			
_7	Total annual distributions. Add lines 1 through 6	***************************************		
8	Distributions to attentive supported organizations to which t	he organization is responsive	)	
	(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:			
а				
b				
С	From 2013			
d	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
•	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
3	any. Subtract lines 3g and 4a from line 2. For result greater			
6	than zero, explain in Part VI. See instructions  Remaining underdistributions for 2016. Subtract lines 3h			
o	3			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions  Excess distributions carryover to 2017. Add lines 3j			
7				
	and 4c			
8	Breakdown of line 7:			
a	Fueron from 0040			
	Excess from 2013			
	Excess from 2014			
d	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

Schedule A	(Form 990 or 990-E	Z) 2016 SHORE	COMMUNITY	Y SERVICES	INC	36-2384323 Page
Part VI	Supplementa Part IV, Section A line 1; Part IV, Sec Section D, lines 5.	I Information. P., lines 1, 2, 3b, 3c, 4ction D, lines 2 and 3, 6, and 8; and Part	rovide the explana b, 4c, 5a, 6, 9a, 9b B; Part IV, Section B	tions required by Pa o, 9c, 11a, 11b, and E, lines 1c, 2a, 2b, 3a	rt II, line 10; Part 11c; Part IV, Sect a, and 3b; Part V,	II, line 17a or 17b; Part III, line 12; ion B, lines 1 and 2; Part IV, Section C, line 1; Part V, Section B, line 1e; Part V, r any additional information.
	(See instructions.)	)				
		-				
·····						
				·		

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 **16** Open to Public

Employer identification number Name of the organization

Inspection

	SHORE COMMUNITY SE	RVICES INC	36-2384323
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
-	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
Par			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the forn	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		1 1
	listed in the National Register		
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing co	nservation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ration easements during the year
			20/L\/4\/D\/2\
8	Does each conservation easement reported on line 2(d) abo		
•	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservationally describe how the treatment of the features to the average of the features to the feature		
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describe	s the organization's accounting for
Pai	t III   Organizations Maintaining Collections of	of Art. Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under SFAS 116 (A		ement and balance sheet works of art.
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that described the text of the footnote to its financial statements that described the text of the footnote to its financial statements that described the footnote to its financial statements the financial statements the financial statement is statement.		, , , , , , , , , , , , , , , , , , , ,
h	If the organization elected, as permitted under SFAS 116 (A		nt and balance sheet works of art, historical
-	treasures, or other similar assets held for public exhibition, e		
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
			•
2	If the organization received or held works of art, historical tre	easures or other similar assets for financ	
2	the following amounts required to be reported under SFAS		nai gairi, provido
_			<b>&gt;</b> \$
	Revenue included on Form 990, Part VIII, line 1		•
<u>d</u>	Assets included in Form 990, Part X		Schedule D (Form 990) 2016

632051 08-29-16

-		OMMUNITY S						36-23			је <b>2</b>
Par	t III   Organizations Maintaining C	Collections of A	rt, Hist	orical Tr	easures, c	or Othe	r Simila	ar Asse	<b>ts</b> (continu	ıed)	
3	Using the organization's acquisition, accessi	ion, and other record	ds, check	any of the	following tha	t are a sig	gnificant	use of its	collection	items	
	(check all that apply):										
а	Public exhibition	c			hange progra	ams					
b	Scholarly research	e	, [	Other							
С	Preservation for future generations										
4	Provide a description of the organization's control of the organization of the organiz	ollections and explai	n how th	ey further t	he organizati	on's exem	npt purpo	ose in Par	XIII.		
5	During the year, did the organization solicit of								,		
_	to be sold to raise funds rather than to be m								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered '	'Yes" on I	Form 990	), Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod								7		
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing to	able:							
									Amount		
	Beginning balance										
	Additions during the year										
е	Distributions during the year										
†	Ending balance								T.,		
	Did the organization include an amount on F								Yes	$\vdash$	No
	If "Yes," explain the arrangement in Part XIII <b>t V</b> Endowment Funds. Complete										
rai	Elidowinent Fullus. Complete							voore book	(a) Four	oore b	201
4.	De siente et combatence	(a) Current year	(b) Pi	rior year	(c) Two year	S Dack	a) Three y	rears back	(e) Four	/ears b	ack
1a	Beginning of year balance										
D	Contributions		-		-						
	Net investment earnings, gains, and losses										
d	Grants or scholarships										_
е	Other expenditures for facilities										
	and programs		-								
†	Administrative expenses				-						
g	End of year balance		/!: 1 .	l /-							
2	Provide the estimated percentage of the cur	,	,	g, column (a	a)) neid as:						
a	Board designated or quasi-endowment ▶  Permanent endowment ▶	<del></del> %	_%								
b	Temporarily restricted endowment	%									
C	The percentages on lines 2a, 2b, and 2c sho										
32	Are there endowment funds not in the posse		ation tha	t are held a	and administe	rad for th	o organi	zation			
Ja	by:	ession of the organiz	ation tha	t are rielu a	ind administe	red for th	e organiz	zation	Г	Yes	No
	(i) unrelated organizations								3a(i)		140
	(**)								3a(ii)	-+	
h	If "Yes" on line 3a(ii), are the related organizations	ations listed as requi								$\dashv$	
4	Describe in Part XIII the intended uses of the								00		
Pai	rt VI Land, Buildings, and Equipm		SWITTETT	urius.							
	Complete if the organization answere		0. Part IV	. line 11a. 9	See Form 990	). Part X. I	line 10				
	Description of property	(a) Cost or o			or other		cumulate	ed De	(d) Book	value	
	becomplien of property	basis (investi			(other)		reciation		(d) Dook	value	
1a	Land	<del></del>	,		1,361.		2.20.011		1,521	. 36	1.
	Buildings				1,014.	2. 7	37,7	20.	$\frac{1,321}{5,743}$	, 20	4.
c	Leasehold improvements			- , - 0	,		/ '		-,,	,	
	Equipment			83	9,421.	8	24,6	43.	14	,77	8.
	Other				0,785.		54,1			, 68	
	I. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	X colum				- / -		7.286		

Schedule D (Form 990) 2016

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2016

632053 08-29-16

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

	dule D (Form 990) 2016 SHORE COMMUNITY SERVICES IN				238 <b>4</b> 323 Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	nts With	Revenue per R	eturn	ı <b>.</b>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	5,297,141.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	94,878.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants				
	Other (Describe in Part XIII.)	2d			04 070
	Add lines 2a through 2d			2e	94,878.
3	Subtract line 2e from line 1			3	5,202,263.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b		4 777		
	Other (Describe in Part XIII.)	4b	4,777.		4 555
С	Add lines 4a and 4b			4c	4,777.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	5,207,040.
Pai	T XII Reconciliation of Expenses per Audited Financial Statement	ents Witi	h Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				6 156 100
1	Total expenses and losses per audited financial statements			1	6,156,490.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities	2a			
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)	2d			0
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	6,156,490.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1			
	Investment expenses not included on Form 990, Part VIII, line 7b		4 555		
b	Other (Describe in Part XIII.)	4b	4,777.		4 555
	Add lines 4a and 4b			4c	4,777.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,161,267.
	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I			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 and the same and	tional infor	mation.		
	0				
PAI	RT X, LINE 2:				
~					
SH	DRE FILES INFORMATIONAL RETURNS IN THE U.S.	. FEDE	RAL JURISD	ICT.	ION AND
					~
$\overline{\text{IP}}$	LINOIS. WITH FEW EXCEPTIONS, SHORE IS NO I	LONGER	SUBJECT T	O U	·S.
FEI	DERAL, STATE AND LOCAL, OR NON-U.S. INCOME	TAX E	EXAMINATION	S B	Y TAX
AU'	THORITIES FOR YEARS BEFORE 2013. SHORE DO	ES NOT	EXPECT A	MAT:	ERIAL NET
				-	
CH	ANGE IN UNRECOGNIZED TAX BENEFITS IN THE N	EXT TW	ELVE MONTH	S.	
PAI	RT XI, LINE 4B - OTHER ADJUSTMENTS:				
FU	NDRAISING EXPENSES				4,777.
PA	RT XII, LINE 4B - OTHER ADJUSTMENTS:				
FU.	NDRAISING EXPENSES				4,777.
63205	4 08-29-16			Sche	dule D (Form 990) 2016

Schedule D (Form 990) 2016	SHORE COMMUNITY	SERVICES INC	36-2384323 Page 5
Schedule D (Form 990) 2016 Part XIII Supplemental Info	rmation (continued)		
-			
			7

Schedule D (Form 990) 2016

### **SCHEDULE G**

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ. line 6a.

OMB No. 1545-0047

Open to Public

Department of the Treasury ► Attach to Form 990 or Form 990-EZ. Internal Revenue Service Inspection Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** SHORE COMMUNITY SERVICES INC 36-2384323 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations e L Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or \_\_ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) to (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser or control of contributions' organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

632081 09-12-16

Schedule G (Form 990 or 990-EZ) 2016

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

PUBLIC INSPECTION COPY Schedule G (Form 990 or 990-EZ) 2016 SHORE COMMUNITY SERVICES INC 36-2384323 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events SPRING NONE (add col. (a) through BENEFIT GOLF OUTING col. (c)) (event type) (total number) (event type) Revenue 155,134. 41,974 197,108. 1 Gross receipts 103,664. 22,558. 126,222. 2 Less: Contributions 51,470. 19,416. 70,886. 3 Gross income (line 1 minus line 2) 4 Cash prizes 19,450. 4,091. 23,541. 5 Noncash prizes Direct Expenses 6,335. 6,335. Rent/facility costs 18,869. 3,600 22,469. 7 Food and beverages 8 Entertainment 696. 11,934. 11,238. Other direct expenses 64,279. 10 Direct expense summary. Add lines 4 through 9 in column (d) 6,607. 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes % Volunteer labor No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d)

9 Enter the state(s) in which the organization	tion conducts gaming activities:				
a Is the organization licensed to conduc	gaming activities in each of these states?		Yes		No
<b>b</b> If "No," explain:					
10a Were any of the organization's gaming	licenses revoked, suspended, or terminated during the tax year?	? [	Yes		No
<b>b</b> If "Yes," explain:					
632082 09-12-16		Schedule G (Form 9	990 or 990	-EZ) :	2016

Schedule G (Form 990 or 990-EZ) 2016 SHORE COMMUNITY SERVICES INC 36	6-238 <b>4</b> 323 <sub>Page</sub> ;
11 Does the organization conduct gaming activities with nonmembers?	
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	13a
<b>b</b> An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
gammig openial ordine been and recorded	
Name	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount	
of gaming revenue retained by the third party  \$\sum_{\text{s},"} \text{ enter name and address of the third party:}	
c in res, enter name and address of the third party.	
Name	
Address ►	
16 Gaming manager information:	
Name	
Gaming manager compensation ▶ \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	
organization's own exempt activities during the tax year ▶ \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	III. lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	,,,,
rod, ro, and rro, ac applicable. rice provide any additional information. Coo included one	

Schedule G	(Form 990 or 990-EZ)	SHORE COMMUNIT	Y SERVICES	INC	36-2384323	Page 4
Part IV	Supplemental Infor	SHORE COMMUNITY  rmation (continued)				
-						
_						

632084 04-01-16

#### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

**Employer identification number** 

SHORE COMMUNITY SERVICES INC 36-2384323 FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COMMUNITY-BASED SERVICES. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: DECISIONS ABOUT HOW THEY SPEND THEIR DAY IN THE COMMUNITY -VOLUNTEERING, JOB SHADOWING AND PARTICIPATING IN OTHER ACTIVITIES. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: CILA EXPENSES \$ 823,556. INCLUDING GRANTS OF \$ 0. REVENUE \$ 961,277. SUPPORTED LIVING ARRANGEMENT EXPENSES \$ 103,377. INCLUDING GRANTS OF \$ 0. REVENUE \$ 96,790. SECOND TIME AROUND EXPENSES \$ 91,451. INCLUDING GRANTS OF \$ 0. REVENUE \$ 107,589. RESPITE CARE EXPENSES \$ 54,819. INCLUDING GRANTS OF \$ 0. REVENUE \$ 26,242. DHS TRAINING EXPENSES \$ 34,682. INCLUDING GRANTS OF \$ 0. REVENUE \$ 20,378. SLS 55A INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 16,144.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization	Employer identification number
SHORE COMMUNITY SERVICES INC	36-2384323
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS REVIEWED BY THE BOARD OF DIRECTORS	
FORM 990, PART VI, SECTION B, LINE 15:	
1. CONDUCTING AN ANNUAL PERFORMANCE EVALUATION TO ASSESS	HOW THE CEO
PERFORMED IN RELATION TO MUTUALLY AGREED UPON GOALS THAT	INCLUDE:
FUNDRAISING GOALS, EMPLOYEE RELATIONS, MANAGEMENT PHILOSO	PHIES AND TACTICS,
CONTINUING EDUCATION ACTIVITIES, OVERALL FINANCIAL PERFOR	MANCE OF THE
ORGANIZATION AS WELL AS EXCELLENCE IN MEETING PROGRAMMATI	C GOALS OF MAJOR
FUNDING SOURCES AND CERTIFYING BODY.	
2. INTERVIEWING OTHER MANAGEMENT STAFF TO GAIN INSIGHT AN	D PERSPECTIVE OF
CEO PERFORMANCE.	
3. COMPARING CEO CURRENT SALARY WITH PEER ORGANIZATIONS I	N THE NONPROFIT
DEVELOPMENTAL DISABILITIES FIELD BY REVIEWING AND ANALYZI	NG SALARY REPORTS
FROM IARF-ILLINOIS ASSOCIATION OF REHABILITATION FACILITIES	ES AS WELL AS
GENERAL INDUSTRY SURVEY BY COMPANIES SUCH AS PAYSCALE AND	BY REVIEWING
OTHER IRS 990 DOCUMENTS FROM SIMILAR ORGANIZATION.	
4. THE EXECUTIVE BOARD THEN ANALYSES ALL OF THE INFORMATI	ON AND RESULTS OF
STEPS 1-3 AND ADJUSTS IT TO FIT AND SUPPORT SHORE'S OVERA	LL FINANCIAL
STATUS AND STABILITY.	
FORM 990, PART VI, SECTION C, LINE 19:	
ALL ORGANIZATIONAL DOCUMENTS ARE AVAILABLE UPON REQUEST	
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM PREVIOUS YEARS.	