Part III Support Schedule for Organizations Described in Section 509(a)(2)

| Oupport Contour of Congainment of Co |
|--|
| (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.) |

| Sec | tion A. Public Support | | * | | | | |
|------|---|-----------------------|--|------------------------|--|--|-----------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | | | | | |
| | received. (Do not include any "unusual grants.") | | | | | | 0 |
| 2 | Gross receipts from admissions, merchandise | | | | | | |
| | sold or services performed, or facilities furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | | | | | Δ. | 0 |
| 3 | Gross receipts from activities that are not an | * | | | | The same of the sa | |
| Ĩ | unrelated trade or business under section 513 | | | | 4 | - Land | 0 |
| 4. | Tax revenues levied for the | | | | 1 | | |
| | organization's benefit and either paid to | | | | A STATE OF THE PARTY OF THE PAR | 4 | |
| | or expended on its behalf | A A | | | 4 | | 0 |
| 5 | The value of services or facilities | | | | The state of the s | | |
| • | furnished by a governmental unit to the | | | | 1 1 | | |
| | organization without charge | | | | V 1 | | 0 |
| 6 | Total. Add lines 1 through 5 | 0 | 0 | 0 | 0 | 1 | 0 0 |
| | Amounts included on lines 1, 2, and 3 | | | | | | |
| | received from disqualified persons | | | | | | 0 |
| h | Amounts included on lines 2 and 3 | | | | 17 | | |
| | received from other than disqualified | | | | and a | | |
| | persons that exceed the greater of \$5,000 | | | 4 4 | | | |
| | or 1% of the amount on line 13 for the year | | 41 | To the same | | | 0 |
| c | Add lines 7a and 7b | 0 | , O | 0 | 0 | | 0 0 |
| 8 | Public support (Subtract line 7c from | | | | | | |
| Ĩ | line 6.) | 12 | | | | | 0 |
| Sec | tion B. Total Support | | | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
| 9 | Amounts from line 6 | 0 | 0 | 0 | 0 | | 0 0 |
| 10a | Gross income from interest, dividends, | 4 | | | | | |
| | payments received on securities loans, rents, | 1 | On The State of th | | | | |
| | royalties, and income from similar sources | 400 | - O | | | | 0 |
| b | Unrelated business taxable income (less | 4 | 4 | | | | |
| | section 511 taxes) from businesses | | | "" - " 1 | | | |
| | acquired after June 30, 1975 | | | | | | 0 |
| С | Add lines 10a and 10b | 0 | 0 | 0 | 0 | | 0 0 |
| 11 | Net income from unrelated business | 1 | | | | | |
| | activities not included on line 10b, whether | The Marie | | | | | |
| | or not the business is regularly carried on . | | | | | | 0 |
| 12 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | | | | | | 0 |
| 13 | Total support. (Add lines 9, 10c, 11, | | | lo. | | | |
| | and 12.) , | 0 | 0 | 0 | | | 0 0 |
| 14 | First 5 years. If the Form 990 is for the orga | nization's first, sec | ond, third, fourth, o | or fifth tax year as a | a section 501(c)(3) | | |
| | organization, check this box and stop here . | | | | | * * * * * * * | ▶ ∟ |
| Sec | ction C. Computation of Public Sup | port Percenta | age | | | | |
| 15 | Public support percentage for 2021 (line 8, c | olumn (f), divided l | y line 13, column | (f)) | | 15 | 0.00% |
| 16 | Public support percentage from 2020 Schedu | | | | | 16 | 0.00% |
| | ction D. Computation of Investmen | | | | | | |
| 17 | Investment income percentage for 2021 (line | | | column (f)) | | 17 | 0.00% |
| 18 | Investment income percentage from 2020 So | | | | | 18 | 0.00% |
| 19a | 33 1/3% support tests-2021. If the organi. | zation did not ched | k the box on line 1 | 4, and line 15 is m | ore than 33 1/3%, | | |
| | not more than 33 1/3%, check this box and s | stop here. The org | anization qualifies | as a publicly supp | orted organization | | ▶ 🔲 |
| b | 33 1/3% support tests-2020. If the organi | zation did not ched | k a box on line 14 | or line 19a, and lin | ne 16 is more than | 33 1/3%, and | |
| | | | | | | | |
| | line 18 is not more than 33 1/3%, check this Private foundation. If the organization did r | box and stop here | . The organization | n qualifies as a pub | licly supported org | anization | |

Part IV Suppo

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A D, and F. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

| | Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete | CTAIL | v.) | |
|------|--|------------------------|--|------------|
| Sect | ion A. All Supporting Organizations | | Yes | No |
| | Are all of the organization's supported organizations listed by name in the organization's governing | 0.000 | 163 | 140 |
| 1 | documents? If "No," describe in Part VI how the supported organizations are designated. If designated by | L. S. A. M. | | |
| | class or purpose, describe the designation. If historic and continuing relationship, explain. | 1 | | 104175-10- |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status | | | |
| 2 | 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). | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer | 1920 | | |
| Ja | lines 3b and 3c below. | 3a | | |
| 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 | | 213 | |
| | organization made the determination. | 3b | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) | 4 | | a Vita |
| | (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | 3с | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If | STEWN | | |
| | "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. | 4a | | |
| 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 | Secret | | Barrey |
| | despite being controlled or supervised by or in connection with its supported organizations. | 4b | | |
| C | Did the organization support any foreign supported organization that does not have an IRS determination | | V. Page | |
| | under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used | | 5 | |
| | to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) | G64 191 | B) LOVE | BOX H |
| | purposes. | 4c | | 10720510 |
| 5a | | | | |
| | answer lines 5b and 5c 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 | 5a | | STANFER. |
| | was accomplished (such as by amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already | Total | 200000 | 4 |
| b | designated in the organization's organizing document? | 5b | C. C | NAME AND |
| С | and the state of t | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to | | Mari- | |
| U | 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. | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor | | M POR | MA |
| | (as 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). | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? | TO THE PERSON NAMED IN | | THE STATE |
| | If "Yes," complete Part I of Schedule L (Form 990). | 8 | | |
| 9a | | | | |
| | disqualified persons, as defined in section 4946 (other than foundation managers and organizations | | 400 | |
| | described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | 9a | | |
| b | Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which | | | |
| | the supporting organization had an interest? If "Yes," provide detail in Part VI. | 9b | | |
| C | | | | 23/11 |
| | from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. | 9с | | |
| 10a | | | 180 | 115 |
| | 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated | 40- | West State | P. Carlo |
| | supporting organizations)? If "Yes," answer line 10b below. | 10a | W. J. Mil | |
| b | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to | 7 19 | THE ROOM | 1 |

determine whether the organization had excess business holdings.)

| Part | IV Supporting Organizations (continued) | | | |
|------|--|--------------|-----------|-----------|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | XV 11 | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and | | A JATE | |
| | 11c below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described on line 11a above? | 11b | | |
| С | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide | 10000 | | |
| | detail in Part VI. | 11c | | L |
| Sect | ion B. Type I Supporting Organizations | | Yes | No |
| , | Division of the state of the st | | 162 | MO |
| 1 | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers. | | | |
| | directors, or trustees at all times during the tax year? If "No," describe in Part VI 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 officers, 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 | | E-D | 7-44 |
| - | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part | 1610 | | 点 |
| | VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | 24/1 |
| | supervised, or controlled the supporting organization. | 2 | | |
| Sect | ion 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 | 2123 | | |
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | Pag A |
| | or management of the supporting organization was vested in the same persons that controlled or managed | 100 | | |
| | the supported organization(s). | 1 | | |
| Sect | ion D. All Type III Supporting Organizations | | Yes | No |
| | Did the association associate to each of the associations by the leat day of the fifth month of the | - | Tes | 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 | | */DHOHERO |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | TO THE | Year | |
| - | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described on line 2, above, did the organization's supported organizations have | | | 10 6 |
| | a significant voice in the organization's investment policies and in directing the use of the organization's | 7.5 | ik e | all be to |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | MAR | |
| | supported organizations played in this regard. | 3 | | |
| Sect | ion 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 year (see ins | truction | s). | |
| 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 governmental entity (s | see instruct | tions). | |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| a | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | A COUNTY | e veh | 12.71 |
| | 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, | | | 7.90 21 |
| | how the organization was responsive to those supported organizations, and how the organization determined | | TATE OF S | |
| | that these activities constituted substantially all of its activities. | 2a | | |
| b | Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, | | | MV, TTY |
| | one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in | | | |
| | Part VI the reasons for the organization's position that its supported organization(s) would have engaged in | | | |
| | these activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. Answer lines 3a and 3b below. | 57125 | / Marie | No. |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | TANK DE | II Ala |
| 21 | trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. | 3a | NJ CHIN | ngseart. |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard | 3b | 162531 | BL (SE) |
| | ours suppopued organizations (). Test describe in Fact VI the role played by the programming this repart | I OU | 1 | 1 |

| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting C | | | Tage 9 |
|--|--------|-------------------------------|-----------------------------|
| 1 Check here if the organization satisfied the Integral Part Test as a qualifying | | | |
| instructions. All other Type III non-functionally integrated supporting orga | nizat | ions must complete Sections | A through E. |
| Section 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 | 0 | 0 |
| 5 Depreciation and depletion | 5 | Δ. | |
| 6 Portion of operating expenses paid or incurred for production or collection of | | | |
| gross income or for management, conservation, or maintenance of property | | Land A | |
| 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 | 0 | 0 |
| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 Aggregate fair market value of all non-exempt-use assets (see | | 7 | |
| instructions for short tax year or assets held for part of year): | | | |
| a Average monthly value of securities | 1a | | |
| b Average monthly cash balances | 1b | | |
| c Fair market value of other non-exempt-use assets | 1c | | |
| d Total (add lines 1a, 1b, and 1c) | 1d | 0 | 0 |
| e Discount claimed for blockage or other factors | 400 | | |
| (explain in detail in Part VI): | 0 | | |
| 2 Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 Subtract line 2 from line 1d. | 3 | 0 | 0 |
| 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | 0 | |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | 0 | 0 |
| 6 Multiply line 5 by 0.035. | 6 | 0 | 0 |
| 7 Recoveries of prior-year distributions | 7 | 0 | |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 | 0 | 0 |
| | 10 | U U | U |
| Section C - Distributable Amount | | | Current Year |
| 1 Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | 0 |
| 2 Enter 0.85 of line 1. | 2 | | 0 |
| 3 Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | | 0 |
| 4 Enter greater of line 2 or line 3. | 4 | | 0 |
| 5 Income tax imposed in prior year | 5 | | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| emergency temporary reduction (see instructions). | 6 | | 0 |
| 7 Check here if the current year is the organization's first as a non-functionall | y inte | egrated Type III supporting o | rganization (see |

| Part | Type III Non-Functionally Integrated 509(a)(3 on D - Distributions |) Supporting Organ | izations (continue | ed) | Current Year |
|-------|--|----------------------------------|--|--------------|---|
| Secur | | | | | Ourrent rear |
| 1 | Amounts paid to supported organizations to accomplish exe | | | 1_ | |
| 2 | Amounts paid to perform activity that directly furthers exem | pt purposes of supported | 1 | _ | |
| | organizations, in excess of income from activity | | -11 | 2 | |
| | Administrative expenses paid to accomplish exempt purpos | ses of supported organization | ations | 3 | |
| | Amounts paid to acquire exempt-use assets | : 1 1 1 1 1 1 D - 4 11 | n | 4 | |
| | Qualified set-aside amounts (prior IRS approval required— | provide details in Part V | 0 | 5 | |
| | Other distributions (describe in Part VI). See instructions. | | | 6 | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 7 | 0 |
| 8 | Distributions to attentive supported organizations to which t | ne organization is respo | nsive | Depart | A |
| | (provide details in Part VI). See instructions. | | | 8 | 0 |
| 9 | Distributable amount for 2021 from Section C, line 6 | | | 9 | |
| 10 | Line 8 amount divided by line 9 amount | | - CH | 10 | 0.000 |
| \$ | Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributio Pre-2021 | ns | (iii) Distributable Amount for 2021 |
| 1 | Distributable amount for 2021 from Section C, line 6 | | The same of the sa | of all | 0 |
| 2 | Underdistributions, if any, for years prior to 2021 | | | | |
| | (reasonable cause required—explain in Part VI). See | | No. | | |
| | instructions. | | | | |
| 3 | Excess distributions carryover, if any, to 2021 | | and the same | TALL | |
| а | From 2016 | o W To | | -1800 | |
| b | From 2017 | | | | |
| С | From 2018 | 4 6 9 | | | |
| d | From 2019 | | | | |
| е | From 2020 | | | THE STATE OF | ne to refer to the time. |
| f | Total of lines 3a through 3e | 0 | | | |
| g | Applied to underdistributions of prior years | | | 0 | |
| h | Applied to 2021 distributable amount | | | | 0 |
| i | Carryover from 2016 not applied (see instructions) | | | 17.15 | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | 0 | | | |
| 4 | Distributions for 2021 from Section D, line 7: \$ 0 | | | | |
| а | Applied to underdistributions of prior years | | | 0 | |
| b | Applied to 2021 distributable amount | | | | 0 |
| С | Remainder. Subtract lines 4a and 4b from line 4. | 0 | | | |
| 5 | Remaining underdistributions for years prior to 2021, if | | | | |
| | any. Subtract lines 3g and 4a from line 2. For result | | | | |
| | greater than zero, explain in Part VI. See instructions. | | | 0 | |
| 6 | Remaining underdistributions for 2021. Subtract lines 3h | | | | |
| | and 4b from line 1. For result greater than zero, explain | | | | |
| | in Part VI. See instructions. | | | | 0 |
| 7 | Excess distributions carryover to 2022. Add lines 3j | | | | |
| | and 4c. | 0 | | 4,8 | |
| 8 | Breakdown of line 7: | | | | |
| а | Excess from 2017 0 | | | | |
| b | Excess from 2018 0 | | | | |
| С | Excess from 2019 0 | | | | |
| d | Excess from 2020 0 | | | Made | |
| ~ | Evenes from 2021 | | | W. III | |

| Part VI | Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) |
|--------------|---|
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Schedule B (Form 990)

Department of the Treasury

Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Employer identification number

Name of the organization Historic Deadwood-Lead Arts Council 46-0415834 Organization type (check one): Filers of: Section: Form 990 or 990-FZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it

must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).