

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Do not enter social security numbers on this form as it may be made public! ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u>A</u>	For th	e 2017 calendar year, or tax year beginning $JUN 1$, 2017 and	ending 1	MAY 31, 2018	
В	Check if applicat	C Name of organization		D Employer identified	cation number
Г	Addr	Chicago Jets Hockey Club, Inc.			
Ē	Name			36-4	319018
Ē	Initia returi		Room/suite		
Ē	Final	A7 W Division Ct Por 192		(312	
	termi			G Gross receipts \$	1,655,025.
	Amer	ided Chicago II 60610		H(a) Is this a group re	
	Appli		_	for subordinates	
	pend	same as C above		H(b), Are all subordinates in	
ī	Tax-ex	empt status X 501(c)(3)	or 527	7 77	list (see instructions)
J	Websi	te: ▶ http://www.chicagojetshockey.org/	1	H(c) Group exemption	•
K	Form o	forganization: X Corporation Trust Association Other	L Year		State of legal domicile: IL
P	art I	Summary			
a)	1	Briefly describe the organization's mission or most significant activities A YO	UTH HC	CKEY CLUB F	ELDING
Governance		BOYS & GIRLS TEAMS FOR CHILDREN RANGING	FROM 6	TO 14 YEARS	S OLD.
rus	2	Check this box If the organization discontinued its operations or dispose	sed of more	e than 25% of its net as	sets
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	9
a×	4	Number of independent voting members of the governing body (Part VI, line 1b)	\	4	8
0 :8	5	Total number of individuals employed in calendar year 2017 (Pan V line ed)	<u> </u>	5	0
罚	6	Total number of volunteers (estimate if necessary)	Ö\	6	0
O 2019 Activities	7 a	Total unrelated business revenue from Part VIII, column 12	/ <u>&</u> /	7a	0.
∞	b		<u> ۲۲</u>	7b	<u> </u>
٢			\	Prior Year	Current Year
ie Ar	8	Contributions and grants (Part VIII line 1h)		0.	<u>75,000.</u>
Revenue	9	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,177,122.	<u>1,465,554.</u>
۾ ر	10		_	260.	<u> 153.</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10e, and 11e)	-	79,705.	94,733.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,257,087.	1,635,440.
)	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	_	82,364.	77,488.
en	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ř	_b	Total fundraising expenses (Part IX, column (D), line 25)	44.	1 012 072	1 (22 157
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,213,073.	1,633,157.
	1 .	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,295,437.	1,710,645.
-Sa	19	Revenue less expenses Subtract line 18 from line 12	0.0	<38,350.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Ве	ginning of Current Year 162,615.	End of Year 162,926.
Ass	21	Total liabilities (Part X, line 16)		9,825.	85,341.
Net	22	Net assets or fund balances Subtract line 21 from line 20		152,790.	77,585.
P	art II	Signature Block		132,130.	77,303.
		alties of perjury, I declare that I have examined this return, including accompanying schedules	s and statem	ents, and to the hest of my	knowledge and belief ut is
		ct, and comprese. Declaration of preparer (other than officer) is based on all information of wh			Miowioago ana bonoi, it is
	,		proparor	1/2/10	
Sig	n	Signature of officer		bate ///	
Her		Christopher D'Andrea, Treasurer		, ,	
		Type or print name and title		_	
		Print/Type preparer's name Preparer's engliature Preparer's engliature	1	Date Check	PTIN
Paid	đ	Mary Lou Pier Hayaru	_ lo	1/02/19 of self-employed	P00239383
Pre	parer	Firm's name Pier & Associates, LTD		Firm's EIN	36-4128203
Use	Only	Firm's address 556 W. Randolph Street, 5E			
_		Chicago, IL 60661		Phone no. 312	26298443
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
	01 11-2		ons.		Form 990 (2017)

		.C. 36-4319018 Page 2
Pa	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	,	
	WE ARE A YOUTH HOCKEY CLUB FIELDING BOYS	& GIRLS TEAMS FOR CHILDREN
	RANGING FROM 6 TO 14 YEARS OLD.	
2	Did the organization undertake any significant program services during the year wh	
	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 cond	ucts, any program 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	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of	grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported	1 465 004
4a	, , , , , , , , , , , , , , , , , , , ,	
	PROVISION OF HOCKEY SERVICES TO YOUTH PLA	
	GAMES AND PRACTICE, COACHING, LEAGUE, AND	
	FINANCIAL AID AND FULL SCHOLARSHIPS FOR S	EVERAL PLAYERS.
		
4b	Code) (Expenses \$ including grants of \$) (Revenue \$)
4¢	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)	
-	(Expenses \$ Including grants of \$) (Revenue \$
4e	1 601 000	
		Form 990 (2017)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	ļ
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	1		
	during the tax year? If "Yes," complete Schedule C, Part II	4_		X
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_		<u>X</u>
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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			1
	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		X_
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		X
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		<u> </u>
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	<u>X</u>	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	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	44.	1	v
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	14b		<u> </u>
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	45		v
16		15		<u> </u>
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	40		v
17		16		<u> </u>
	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	,		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		<u> </u>
.0	1c and 8a? If "Yes," complete Schedule G, Part II	40	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	Λ	
13	complete Schedule G, Part III	40		v
	complete considure of Lart III		990 (X

			Yes	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			i
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	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		ĺ	
	Schedule J	23		X
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	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		X
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			
	Schedule L, Part I	25b		X
26	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	26		Х
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			ľ
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	_30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			1
	If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			ĺ
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	35b		<u> </u>
36	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	36		X
37	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	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 ((2017)

Form 990 (2017) Chicago Jets Hockey Club, Inc.

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable							
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming]	İ					
	(gambling) winnings to prize winners?	1c						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 0							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	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						
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)?	4a		X				
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)		İ					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		ľ					
	any contributions that were not tax deductible as charitable contributions?	6a		<u> </u>				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).		ĺ					
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?	7a		<u> </u>				
Þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	٦. ا	- 1	v				
А	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		<u>X</u>				
u a	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f						
ď	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		_				
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						
9	Sponsoring organizations maintaining donor advised funds.		Ī					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter							
· а	Initiation fees and capital contributions included on Part VIII, line 12		l					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		ŀ					
11	Section 501(c)(12) organizations. Enter.							
а	Gross income from members or shareholders 11a							
þ	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them)		- 1					
	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	i						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O							
þ	Enter the amount of reserves the organization is required to maintain by the states in which the		ĺ					
_	organization is licensed to issue qualified health plans Enter the amount of receives an hand							
	Enter the amount of reserves on hand Did the argonization receive any payments for indeed to provide the transfer of the second district the seco	44						
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in School to C	14a	\dashv	X				
<u> 0</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 (2017)				

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 9								
	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 O.								
b	Enter the number of voting members included in line 1a, above, who are independent 1b								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	İ							
	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	i							
	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?	4_		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5_		X					
6									
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					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
a	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		٦.						
10-	Did the expenses have local charters broughes as efficience	40	Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>					
ь	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?	404							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	-	Х					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	100	x						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120							
·	in Schedule O how this was done	12c	x						
13	Did the organization have a written whistleblower policy?	13	-	Х					
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?								
а	The organization's CEO, Executive Director, or top management official	15a		X					
	Other officers or key employees of the organization	15b		X					
	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								
	taxable entity during the year?	16a		Х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b	l						
Sec	tion C. Disclosure		•						
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) a	vailab	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, and	financ	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.								
	Christopher D'Andrea - 312-341-9999								
	53 W. Jackson Blvd. Suite 260, Chicago, IL 60604								
732006	11-28-17	Form	990 (2017)					

Form 990 (2017)

Chicago Jets Hockey Club, Inc.

36-4319018

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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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related	(list any hours for related organizations below below hours below hours for related organizations below hours for related organizations below hours for related hours for rela	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations					
(1) TOM MORO	2.00								-	
BOARD MEMBER		X	<u> </u>					0.	0.	0
(2) BRANT BOOKER	2.00									
BOARD MEMBER		X						0.	0.	0
(3) CHRIS HUGHES	2.00									
REGISTRAR		X						0.	0.	0
(4) KENT ALLEN	40.00	ļ								
HOCKEY DIRECTÓR		X						77,488.	0.	0
(5) ANDY DOTI	2.00								_	
BOARD MEMBER		Х						0.	0.	0
(6) JEFF LEZOTTE	10.00								_	_
PRESIDENT				X		_		0.	0.	0
(7) MELISSA ROTUNNO	5.00									_
VICE PRESIDENT	10.00			X				0.	0.	0
(8) CHRIS D'ANDREA	10.00	ļ								
TREASURER	F 00			Х				0.	0.	0
(9) ALISON FINLEY	5.00							_		•
SECRETARY				Х	_	\vdash		0.	0.	0
	```									·
										_
					_					
									-	
									-	

Form **990** (2017)

	Section A. Officers, Directors, 11 ds	ices, ivey Lin	עטוק	CCS	, all	<u>u 111</u>	gne	31 1	Compensated Employe	es (continued)				
	<b>(A)</b> Name and title	(B) Average			Pos				(D) Reportable	<b>(E)</b> Reportable		E۶	(F) stimate	ed
		hours per week	box	, unle	ss pe	rson	than is bot or/trus	th an	compensation	compensation		an	nount	of
		(list any	h					Ť	from the	from related organizations			other pensa	
		hours for related	or dire	8			xated		organization	(W-2/1099-MISC	;)		om th	
		organizations	trustee	al trust		yee	iii diii		(W-2/1099-MISC)			_	anızat d relat	
		below	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former					anızatı	
	-	line)	Ē	i i	₽	ã	₹5	æ			_	_		
							l							
							-				_			
							İ							
									-	-	$\dashv$			
_														
											4			
										<del>-</del>	$\dashv$		-	
		,												
	Sub-total								77,488.		).			0.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A							77,488.		).			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d at	ove	e) wh	10 r			<u>, • )</u>			<u> </u>
	compensation from the organization													0
2	Did the error to let any factor officer					1-			bb		Г		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		stee	, ке	y err	ъю	yee,	or	nignest compensated ei	npioyee on		3		х
4	For any individual listed on line 1a, is the su		е со	mpe	ensa	tion	and	otl	her compensation from t	he organization	F			
	and related organizations greater than \$150									•	-	4		X
5	Did any person listed on line 1a receive or a					-		elat	ed organization or indivi	dual for services		_		v
Sec	rendered to the organization? If "Yes," com tion B. Independent Contractors	piete Scrieduie	<del>2</del> J 10	or Su	ich j	jers	on					5		X
1	Complete this table for your five highest co	mpensated inc	lepe	nde	nt co	ontr	acto	rs t	hat received more than	\$100,000 of compe	ensa	tion fr	om	
	the organization Report compensation for	the calendar ye	ear e	ndır	ng w	ith c	or wi	thir		rear				
	(A) Name and business	address	NC	NE	•				( <b>B)</b> Description of s	ervices	Co	(C mpen		า
			110	/11L										
										`				
								$\dashv$						
								ĺ						
		<u></u>												
				_				$\dashv$						
2	Total number of independent contractors (ii	ncluding but no	ot lin	nited	l to 1	thos	se lis	ted	above) who received m	ore than				
	\$100,000 of compensation from the organiz					C								
												· (	വവ ഗ	017

	1 990 rt <b>VI</b> I	(2017) Chica	<u>ago Jets</u> nue	Hockey (	Club, Inc.		36-431	9018 Page 9
		Check if Schedule O cont		se or note to any li	ne in this Part VIII			
	_	0.100K II 00.100d.io 0 00.11	ano a rospone	or note to any ii	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Revenue Contributions, Gifts, Grants Anounts Anounts	b c d e f	Federaled campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f  Hockey Fees	ts, and ve 1f 1	-	75,000.			
Program Rev		All other program service reve		-	1,465,554.			
	3 4 5	Investment income (including other similar amounts) Income from investment of tax Royalties		erest, and	153.			153.
	7 a b c d	Gross rents Less rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(i) Securities	(ii) Personal			-	,
ther Revenue	8 a b	contributions reported on line Part IV, line 18 Less direct expenses	of 1c) See	a 99,386.				

732009 11-28-17

11 a

94,539. Form **990** (2017)

0.

94,386.

14,932.

14,585

Business Code

94,386.

347.

635,440.1

**b** Less direct expenses

Part IV, line 19 **b** Less direct expenses

and allowances

b Less cost of goods sold

e Total. Add lines 11a-11d

Total revenue. See instructions.

c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See

c Net income or (loss) from gaming activities

c Net income or (loss) from sales of inventory

Miscellaneous Revenue

10 a Gross sales of inventory, less returns

465,901

347

<u>Sec</u>	tion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a respo			omplete column (A)	
	not include amounts reported on lines 6b.	(A)	(B)	(C)	
	8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21		<u> </u>		
2	Grants and other assistance to domestic	i			
	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,	77 400			
_	trustees, and key employees	77,488.	77,488.		
6	Compensation not included above, to disqualified				•
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)				<del> </del>
7	Other salaries and wages				
8	Pension plan accruals and contributions (include		•		
•	section 401(k) and 403(b) employer contributions) Other employee benefits	_			
9 10	Payroll taxes				
11	Fees for services (non-employees)	<del></del>			•
'' a					
a b					
	Accounting	9,213.		9,213.	<del></del>
d		7,213.	,	9,213.	
م	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
3	column (A) amount, list line 11g expenses on Sch 0.)	658,197.	658,197.		
12	Advertising and promotion	211.	211.		
13	Office expenses	16,409.		16,409.	<del> </del>
14	Information technology				
15	Royalties				
16	Occupancy	573,888.	573,888.		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				-
20	Interest				
21	Payments to affiliates		_		
22	Depreciation, depletion, and amortization	4,602.	4,602.		
23	Insurance	1,480.		1,480.	
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.)				
а	EQUIPMENT AND UNIFORMS	154,442.	154,442.		
b		126,279.	126,279.		
c	WOTH BBBG	46,537.	46,537.		
d	CDD D T T C T T C T T T T T T T T T T T	30,481.	30,481.		
e	All other expenses	11,418.	9,174.		2,244.
25	Total functional expenses. Add lines 1 through 24e	1,710,645.	1,681,299.	27,102.	2,244.
26	Joint costs. Complete this line only if the organization			-	
	reported in column (B) joint costs from a combined	Ì			
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Part	: X	Balance Sheet					
		Check if Schedule O contains a response or no	te to a	ny line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing			66,178.	1	117,914
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for	ormer o	officers, directors,		İ	
		trustees, key employees, and highest compens	ated er	nployees Complete	<b>.</b> .		
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual	ified pe	ersons (as defined under			
		section 4958(f)(1)), persons described in section	n 4958	(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec			<b>.</b> .		
2		employees' beneficiary organizations (see instr)	Comp	lete Part II of Sch L	_	6	
Assets	7	Notes and loans receivable, net				7	
۲	8	Inventories for sale or use			5,827.	8	
	9	Prepaid expenses and deferred charges			21,492.	9_	<u> 17,619</u>
•	10a	Land, buildings, and equipment, cost or other	1				
		basis Complete Part VI of Schedule D	10a	25,422.			
	b	Less accumulated depreciation	10b	15,410.	8,811.	10c	10,012
-	11	Investments - publicly traded securities				11	
-	12	Investments - other securities See Part IV, line		12			
-	13	Investments - program-related See Part IV, line		13			
•	14	Intangible assets		14			
-	15	Other assets See Part IV, line 11	60,307.	15	17,381		
	16	Total assets. Add lines 1 through 15 (must equ	al line :	34)	162,615.	16	162,926
-	17	Accounts payable and accrued expenses			6,132.	17	35,001
-	18	Grants payable		18			
•	19	Deferred revenue		19	42,845		
2	20	Tax-exempt bond liabilities				20	
2	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D	<del>-</del> :	21	
<u>ا</u> ا	22	Loans and other payables to current and former	r office	rs, directors, trustees,			•
[ }		key employees, highest compensated employee	es, and	disqualified persons			_
		Complete Part II of Schedule L				22	
i   2	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
2	24	Unsecured notes and loans payable to unrelate	d third	parties		24	<u>-</u>
2	25	Other liabilities (including federal income tax, pa	yables	to related third	<del></del>		· <del></del>
		parties, and other liabilities not included on lines	s 17·24	). Complete Part X of			
		Schedule D			3,693.	25	7,495
2	26	Total liabilities. Add lines 17 through 25			9,825.	26	85,341
		Organizations that follow SFAS 117 (ASC 958	3), ched	ck here  and			
g		complete lines 27 through 29, and lines 33 an	nd 34.				_
2	27	Unrestricted net assets				27	
2	28	Temporarily restricted net assets				28	
2	29	Permanently restricted net assets				29	
5		Organizations that do not follow SFAS 117 (A	SC 95	8), check here 🕨 🗓			
5		and complete lines 30 through 34.			_		
}   a	30	Capital stock or trust principal, or current funds		0.	30	<u> </u>	
5	31	Paid-in or capital surplus, or land, building, or ed		nt fund	0.	31	0.
;   a	32	Retained earnings, endowment, accumulated in		ř	152,790.	32	77,585.
:   a	33	Total net assets or fund balances	•		152,790.	33	77,585.
	34	Total liabilities and net assets/fund balances		Ì	162,615.	34	162,926.

Form **990** (2017)

•	•				
	990 (2017) Chicago Jets Hockey Club, Inc.	<u> 36-43</u>	19018	Pag	<u>e 12</u>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>		[	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,635	, 44	10.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,710	,64	<u> 15.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	<75	, 20	)5 <u>.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	152	,79	<b>∂0.</b>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
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,				
	column (B))	10	77	, 58	<u>35.</u>
Pa	rt XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response or note to any line in this Part XII			[	
			\ <u>`</u>	es	No
1	Accounting method used to prepare the Form 990	<u></u>			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
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		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both				
	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	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	<b>90</b> (2	017)

732012 11-28-17

## SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

		Chic	ago Jets H	lockey Club,	Inc.				6-4319018		
Pa	ırt I	Reason for Public	Charity Status	All organizations must c	omplete th	ııs part.) S	ee instructions	s			
The	organ	ization is not a private found	lation because it is	(For lines 1 through 12,	check only	one box)					
1		A church, convention of ch	urches, or associati	on of churches describe	d in sectio	n 170(b)(	1)(A)(i).		A9		
2		A school described in sect	ion 170(b)(1)(A)(ii).	(Attach Schedule E (Forr	n 990 or 9	90-EZ))			U		
3		A hospital or a cooperative	hospital service org	anization described in s	ection 170	)(b)(1)(A)(i	ii).		- (		
4		A medical research organiz	ation operated in co	njunction with a hospita	l describe	d in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,		
		city, and state									
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section 170(b)(1)(A)(iv). (Complete Part II)									
6		A federal, state, or local go	vernment or governi	mental unit described in	section 17	70(b)(1)(A)	(v).				
7		An organization that norma						ne general	public described in		
		section 170(b)(1)(A)(vi). (C	omplete Part II)		_						
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	tII)						
9		An agricultural research org	anization described	I in section 170(b)(1)(A)	(ix) operate	ed in conju	inction with a	land-grant	college		
		or university or a non-land-g	grant college of agric	culture (see instructions)	Enter the	name, city	y, and state of	the colleg	je or		
		university:									
10	$\mathbf{X}$	An organization that norma	lly receives (1) more	than 33 1/3% of its sup	port from	contributi	ons, members	hip fees, a	and gross receipts from		
		activities related to its exen	npt functions - subje	ct to certain exceptions,	, and (2) no	more tha	n 33 1/3% of	ts suppor	t from gross investment		
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the org	ganization	after June 30, 1975		
		See section 509(a)(2). (Cor	mplete Part III.)								
11		An organization organized a	and operated exclus	sively to test for public sa	afety. See :	section 50	09(a)(4).				
12		An organization organized a	and operated exclus	sively for the benefit of, to	o perform	the functio	ons of, or to ca	rry out the	purposes of one or		
		more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2)	See section 5	09(a)(3). ⁽	Check the box in		
		lines 12a through 12d that	describes the type o	of supporting organization	n and con	plete lines	s 12e, 12f, and	l 12g.			
а		Type I. A supporting orga	ınızatıon operated, s	supervised, or controlled	by its sup	ported org	ganization(s), t	ypically by	giving		
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	supporting		
		organization You must o	omplete Part IV, Se	ections A and B.							
b		Type II. A supporting org	anization supervised	d or controlled in connec	tion with it	s support	ed organizatio	n(s), by ha	iving		
		control or management o	f the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	ge the sup	ported		
		organization(s) You mus	t complete Part IV,	Sections A and C.							
C			grated. A supportin	g organization operated	ın connec	tion with, a	and functional	ly integrate	ed with,		
	_	ts supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.				
d			<b>integrated</b> . A supp	porting organization oper	rated in co	nnection v	vith its suppor	ted organı	zation(s)		
		that is not functionally int	egrated The organi	zation generally must sa	tisfy a dist	ribution re	quirement and	an attent	iveness		
	_	requirement (see instructi	ions). <b>You must co</b> r	nplete Part IV, Sections	s A and D,	and Part	V.				
е		Check this box if the orga					Type I, Type	II, Type III			
	_	functionally integrated, or	•	nally integrated support	ing organiz	zation					
		er the number of supported of	•								
g		vide the following information  i) Name of supported	n about the supporte	(iii) Type of organization	(iv) is the orga	nization listed	(v) Amount of	monetany	(vi) Amount of other		
	,	organization	(11) 2.11	(described on lines 1-10	ın your governi Yes	ng document?	support (see in:	-	support (see instructions)		
				above (see instructions))	162	140					
							:				
		-				<u> </u>			_		
							_				
	_			· · · · · · · · · · · · · · · · · · ·					<del></del>		

Schedule A (Form 990 or 990-EZ) 2017 C	<u>hicago Je</u>	ts Hockey	Club, In	C.	36-431	9018 Page 2
Part II Support Schedule for						
(Complete only if you checked				on failed to qualify	under Part III If the	e organization
fails to qualify under the tests	listed below, plea	ise complete Part	III )			
Section A. Public Support		<del>,</del>				<u> </u>
Calendar year (or fiscal year beginning in) ►	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and		$\setminus$				
membership fees received (Do not						
include any "unusual grants ")						
2 Tax revenues levied for the organ-					/	
ization's benefit and either paid to				1	1	
or expended on its behalf						
3 The value of services or facilities		\	-	/		
furnished by a governmental unit to		\ \ \ \				
the organization without charge			\			
4 Total. Add lines 1 through 3				1		
5 The portion of total contributions			1	1		
by each person (other than a			<b>\</b> .		İ	
governmental unit or publicly			\ /			
supported organization) included			\			
on line 1 that exceeds 2% of the	:		X			
amount shown on line 11,						
column (f)			/ \			
6 Public support. Subtract line 5 from line 4						
Section B. Total Support			1			
Calendar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	(4) = 0 + 0	/	10/2010	10,20.0	(0) 20 17	(1) 1014
8 Gross income from interest,		ĺ		\		
dividends, payments received on				\		
securities loans, rents, royalties,						
and income from similar sources				\	İ	
9 Net income from unrelated business		ĺ				
activities, whether or not the				\		
business is regularly carried on			!	\		
10 Other income Do not include gain	-	<i>;</i>			<b>\</b>	
or loss from the sale of capital					\	
assets (Explain in Part VI.)					\	
11 Total support. Add lines 7 through 10					1	
12 Gross receipts from related activities,	etc (see/instruction	ons)			12	
13 First five years. If the Form 990 is for	. /	•	d. fourth, or fifth ta	x vear as a sectio	<u> </u>	
organization, check this box and stop	,			•	````\	ightharpoons
Section C. Computation of Publi		rcentage				
14 Public support percentage for 2017 (lg	ne 6, column (f) di	vided by line 11, c	olumn (f))	.==	14	%
15 Public support percentage from 2016	Schedule A, Part	II, line 14			15	%
16a 33 1/3% support test - 2017. If the o	rganization did no	t check the box or	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
stop here. The organization qualifies a	as a publicly supp	orted organization			/	. ▶□
b 33 1/3% support test - 2016. If the o	rganization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
and stop here. The organization qualit	fies as a publicly s	supported organiza	ation			<b>→</b> □
17a 10% -facts-and-circumstances test	- 2017. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
and if the organization meets the "fact						1
meets the "facts-and-circumstances" t					-	<b>\</b> ▶□
b 10% -facts-and-circumstances test	-	•		•	17a, and line 15 is	10% or \
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organization meets the "facts-and-circ						▶`\
18 Private foundation. If the organization						s_ •
					dule A (Form 990	

### 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)

Called syreat (or fiscal year beginning in   Dec   (a) 2013   (b) 2014   (c) 2015   (d) 2016   (e) 2017   (f) Total   (dist, grants, contributions, and membership fees received (f) on orth cubic and "unusual grants"   795.278   916.445   998.991   1280559   1639940   5631213   795.278   2600   22,450   14,932   143,683   240,681   265,620   22,450   14,932   143,683   240,681   240,681   25,620   22,450   14,932   143,683   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,681   240,68	Se	ction A. Public Support	111					
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or expended on its behalf  5. The value of services or facilities turnished by a governmental unit to the organization without charge  6. Total. Add lines 1 through 5  7a Amounts included on lines 1, 2, and 3 received from disqualified persons in 1 b Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the given of 5,000 or 1% of the amount on line 13 for may year.  5 Add lines 7 and 7 b  8 Public support. (Signique r/ beining i)   9 Amounts from line 6  9 Amounts from line 6  9 Amounts from line 6  9 Amounts from line 6  9 Lindeld business lazable income from minterest, dividends, payments received on securities class, rents, royalties, and income from aminar sources  5 Unified business lazable income (less section 51 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  459. 378. 275. 260. 153. 1,525.  1 Net income from unrelated business acquired after June 30, 1975  c Add lines 10a and 10b  459. 378. 275. 260. 153. 1,525.  1 Net income from unrelated business acquired after June 30, 1975  c Add lines 10a and 10b  459. 378. 275. 260. 153. 1,525.  1 Net income from unrelated business acquired after June 30, 1975  c Add lines 10a and 10b  459. 378. 275. 260. 153. 1,525.  1 Net income from unrelated business acquired after June 30, 1975  c Add lines 10a and 10b  459. 378. 275. 260. 153. 1,525.  1 Net income from unrelated business acquired after June 30, 1975  c Add lines 10a and 10b  459. 378. 275. 260. 153. 1,525.  1 Net income Do not include gan or loss from the sale of capital sastes (Explain in Part VI)  1 Total support / Red lines, 10a, 11, and 12)  1 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section D. Computation of Public Support Percentage  1 Investment income percentage for 2017 (line 8, column (f) divided by line 13, column (f))  1 1 1 Lines 1 Significant Percentage for 2017 (line 8, column (f) divided by line 1	-7	•						
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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)  13 Total support (Add lines 9, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2016 Schedule A, Part III, line 15  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2016 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 Line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 Line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	C	Add lines 10a and 10b	459.	378.	275.	260.	153.	1,525.
whether or not the business is regularly carried on programmed on the public gain or loss from the sale of capital assets (Explain in Part VI)  13 Total support (Add lines 9, 10c, 11, and 12)  836, 418. 982, 443. 999, 266. 1303269. 1655025. 5776421.  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2016 Schedule A, Part III, line 15  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2016 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 Department income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 Department income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  15 Department income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	11							
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or loss from the sale of capital assets (Explain in Part VI)  13 Total support (Add lines 9, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2016 Schedule A, Part III, line 15  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2016 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  19 investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  19 investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
assets (Explain in Part VI)  Total support (Add lines 9, 10c, 11, and 12)  836, 418. 982, 443. 999, 266. 1303269. 1655025. 5776421.  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2016 Schedule A, Part III, line 15  16 99.96 %  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2016 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  18 Investment income percentage from 2016 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 Investment income percentage from 2016 Schedule A, Part III, line 17  11 Investment income percentage from 2016 Schedule A, Part III, line 17  12 Investment income percentage from 2016 Schedule A, Part III, line 17  13 Investment income percentage from 2016 Schedule A, Part III, line 17  14 Investment income percentage from 2016 Schedule A, Part III, line 15  15 Investment income percentage from 2016 Schedule A, Part III,	12							
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Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2016 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  19a 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	15	Public support percentage for 2017 (I	ıne 8, column (f) dı	vided by line 13, c	olumn (f))		15	99.97 %
Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2016 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  19a 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	16	Public support percentage from 2016	Schedule A. Part	III, line 15	.,,		16	
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19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			•	•	,			
more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization <b>b</b> 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization					on line 14. and line	15 is more than 3		
b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		• •	-					
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	h		-	• ,	•	• •		
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### 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.	AII	Supporting	<b>Organizations</b>
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- 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
- 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?
- 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.
- 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)
- 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 )

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	edule'A (Form 990 or 990-EZ) 2017 Chicago Jets Hockey Clu			36-4319018 Page 6
Ma	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin			
1	Check here if the organization satisfied the Integral Part Test as a qualifying			n Part VI) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	ctions A through E	
Sec	tion 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	1 1		
	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		
Sec	tion 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		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	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		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

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) 2017

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2017

b Excess from 2014c Excess from 2015d Excess from 2016e Excess from 2017

Schedule A	(Form 990 or 990-EZ) 201	7 Chicago Jet:	s Hockey Club	Inc	36-4319018 Page 8
Rart VI	Supplemental Info Part IV, Section A, lines line 1, Part IV, Section D	<b>rmation.</b> Provide the ex 1, 2, 3b, 3c, 4b, 4c, 5a, 6, , lines 2 and 3; Part IV, Se	kplanations required by Pa 9a, 9b, 9c, 11a, 11b, and ction E, lines 1c, 2a, 2b, 3a	rt II, line 10, Part II, line 17a o 11c. Part IV. Section B. lines	or 17b, Part III, line 12, 1 and 2, Part IV, Section C, V, Section B, line 1e; Part V,
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## SCHEDULE D

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

**Employer identification number** 

	<u> Chicago Jets Hocke</u>	y Club,	Inc.		<u> </u>	<u> 36-4319018</u>
Pai	rt I Organizations Maintaining Donor Advise	ed Funds o	Other Similar F	unds or A	\ccou	Ints.Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6				
			nor advised funds	<u> </u>	(b) Fun	ds 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	advised fur	nds	
-	are the organization's property, subject to the organization's					Yes No
6	Did the organization inform all grantees, donors, and donor a	•		an be used o	only	
•	for charitable purposes and not for the benefit of the donor of		•		•	
	impermissible private benefit?	o. 00.101 agvic	n, or for any other par	p000 0011101	·····g	Yes No
Pai		ganization ans	wered "Yes" on Form	990 Part IV	line 7	1es110
1	Purpose(s) of conservation easements held by the organizat			550, r art rv	,	
•	Preservation of land for public use (e.g., recreation or e	•	Preservation of	a biotorically	ımnar	tant land area
	Protection of natural habitat	education		-	•	
	Preservation of open space		Preservation of	a cerunea ni	istoric s	structure
_	• •	£				
2	Complete lines 2a through 2d if the organization held a quali	neo conservat	on contribution in the	torm of a co		
	day of the tax year				$\overline{}$	Held at the End of the Tax Year
_	Total number of conservation easements				2a	
b	Total acreage restricted by conservation easements				2b	
C	Number of conservation easements on a certified historic str		• •		2c	
d	Number of conservation easements included in (c) acquired	after 7/25/06,	and not on a historic s	tructure		
	listed in the National Register				2d_	
3	Number of conservation easements modified, transferred, re	leased, extingi	ushed, or terminated l	by the organ	nization	during the tax
	year ▶					
4	Number of states where property subject to conservation ea			<del></del>		
5	Does the organization have a written policy regarding the pe		ng, inspection, handlir	ng of		
	violations, and enforcement of the conservation easements i					└─ Yes └─ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of vi	plations, and enforcing	; conservati	on ease	ements during the year
	<b></b>					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violatio	ns, and enforcing con	servation ea	ısemen	its during the year
	<b>\$</b>					
8	Does each conservation easement reported on line 2(d) above	ve satisfy the r	equirements of section	n 170(h)(4)(E	3)(1)	
	and section 170(h)(4)(B)(ii)?					L Yes No
9	In Part XIII, describe how the organization reports conservati		,			•
	include, if applicable, the text of the footnote to the organiza	tion's financial	statements that desc	ribes the org	ganızatı	ion's accounting for
<u> </u>	conservation easements			<u> </u>	<u> </u>	
Par	t III Organizations Maintaining Collections o			or Other	Simila	ar Assets.
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 95 <mark>8</mark> ), not to	report in its revenue s	statement ar	nd bala	nce sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, educa	tion, or research in fur	therance of	public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these iten	s			
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to rep	ort in its revenue state	ment and b	alance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or re	search in furtherance	of public sei	rvice, p	rovide the following amounts
	relating to these items					
	(i) Revenue included on Form 990, Part VIII, line 1				▶ \$	S
	(ii) Assets included in Form 990, Part X				▶ \$	§
2	If the organization received or held works of art, historical tre	asures, or othe	er sımılar assets for fın	ancıal gaın,		
	the following amounts required to be reported under SFAS 1	16 (ASC 958)	elating to these items			
а	Revenue included on Form 990, Part VIII, line 1				▶ \$	S
b	Assets included in Form 990, Part X				\$	<u> </u>
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 996	).			Schedule D (Form 990) 2017

732051 10-09-17

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets/continued/   Sung the organization's acquision, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)   A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII   Provide a description of the organization's collections and explain how they further the organization's collection?   Provided an analysis of the organization and collection?   Provided an analysis of the organization and collection?   Provided an analysis of the organization and collection?   Provided an analysis of the organization and collection of the provided an analysis of the organization and provided an analysis of the organization and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provided and provide			Jets Hock				or Other			19018	
Check all that apply											
a Public exhibition   d   Loan or exchange programs   b   Scholarly research   e   Other   c   Preservation for future generations   d   Provide a description of the organization's collections and explain how the further the organization's exempt purpose in Part XIII   During the year, did the organization scollections of art, historical treasures, or other similar assets   to be sold to raise funds rather than to be maintained as part of the organization's collection?   No   Part IV   Ecrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21   Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X   If "Yes," explain the arrangement in Part XIII and complete the following table.   Beginning balance   Annount	_		, , , , , , , , , , , , , , , , , , , ,	,							
b Scholarly research control truture generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sed for uses funds a martine has been for the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21  1a Is the organization an agent, frustee, cuistodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21  1b If "Yes," explain the arrangement in Part XIII and complete the following table.  C Beginning balance  1	а			a $\square$	Loan or exc	change progr	rams				
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds atther than to be maintained as part of the organization's collection?    Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21   Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21   Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21   Is Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrow or custodial account liability.   Is It Is Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It I	b	Scholarly research		e 🗀		0.0					
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds atther than to be maintained as part of the organization's collection?    Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21   Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21   Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21   Is Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrow or custodial account liability.   Is It Is Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It Is It I	С	Preservation for future generations								•	<del></del>
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be south to raise funds rather than to be maintained as part of the organization's collection?	4	<del>-</del>	ollections and expla	ın how t	hey further t	the organizat	ion's exem	pt purp	ose ın Par	lliX f	
To be sold to raise funds rather than to be maintained as part of the organization's collection?	5					=					
Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part XP   Yes   No   If "Yes", explain the arrangement in Part XIII and complete the following table.    C   Beginning balance										Yes	□ No
reported an amount on Form 990, Part X, line 21  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 19 in the arrangement in Part XIII and complete the following table.  C Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance  2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Yes No  b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part X, line 10  Fart V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10  (a) Current year (b) Phor year (c) Two years back (d) Three years back (e) Four years back or other understance and programs  d Grants or scholarships  c Net investment earnings, gains, and losses  d Grants or scholarships  c Net investment earnings, gains, and losses  g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  a Board despination or quasi-endowment Py6  T Temporarily restricted endowment Sadio are quieved on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment thinds  D Endought the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  D Escription of property  (a) Cost or other  D Description of property  (b) Cost or other  D Description of property  (c) Cost or other  D Description of property  (d) Book value  D Description of property  (d) Book value  D Description of property  (d) Book value  D Description of proper	Pai						"Yes" on F	orm 99	0, Part IV,		
No   Frm 990, Part X?   Yes   No   No   No   No   No   No   No   N					•				,	,	
b   f "Yes," explain the arrangement in Part XIII and complete the following table.    C   Beginning balance   1   C   1   C   1   C   C   C   C   C	1a	Is the organization an agent, trustee, custodi	an or other interme	diary for	contributio	ns or other a	ssets not in	cluded			
Amount   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Compan				•						Yes	☐ No
Amount   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Companies   Compan	b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table.					_	
d Additions during the year    Ending blailance   10 the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?   Yes   No   If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII   Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10    Administrative expenses   (a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years ba				_						Amount	
e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10  1a Beginning of year balance b Contributions 1b Contributions 1c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment \( \bigcite{\frac{9}{3}} \) % The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iv) related organizations (iv) feather organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations	С	Beginning balance						1c			
d Ending balance 2a Dut the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	d	Additions during the year						1d			
d Ending balance 2a Dut the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	e										
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four yea	f										
Body   Fire Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.   Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10   1a   Beginning of year balance   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three years back   (f) Three yea	2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for	escrow or c	ustodial acco	ount liability	, <del>,</del>		Yes	No
ta Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property (a) Cost or other basis (other)  1a Land b Buildings c Leasehold improvements d Equipment 25,422. 15,410. 10,012.											
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ % b Permainent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  A Describe in Part XII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property (a) Cost or other basis (investment) b Buildings c Leasihold improvements d Equipment  25,422, 15,410, 10,012, e Other  Other  Other	Pai	t V Endowment Funds. Complete if	f the organization ar	nswered	"Yes" on Fo	orm 990, Par	t IV, line 10				
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ % b Permainent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  A Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property (a) Cost or other basis (investment) basis (other) (b) Cost or other basis (other) depreciation  1a Land b Buildings c Leasihold improvements d Equipment C Other Other  1 25,422. 15,410. 10,012.			(a) Current year	(b) F	Prior year	(c) Two year	rs back (d	) Three y	ears back	(e) Four ye	ars back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶	1a	Beginning of year balance									
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation  1a Land b Buildings c Leasehold improvements d Equipment 25,422, 15,410, 10,012.	b	Contributions									
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation  1a Land b Buildings c Leasehold improvements d Equipment 25,422, 15,410, 10,012.	С	Net investment earnings, gains, and losses									
and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment  % b Permanent endowment  % The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations b if "Yes" on line 3a(i), are the related organization issted as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property (a) Cost or other basis (other) (c) Accumulated depreciation  1a Land b Buildings c Leasehold improvements d Equipment 25,422. 15,410. 10,012. e Other	d							_			
and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment  % b Permanent endowment  % The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations b if "Yes" on line 3a(i), are the related organization issted as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property (a) Cost or other basis (other) (c) Accumulated depreciation  1a Land b Buildings c Leasehold improvements d Equipment 25,422. 15,410. 10,012. e Other	е	Other expenditures for facilities			-						
g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  Board designated or quasi-endowment ▶											
g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  Board designated or quasi-endowment ▶ %  Permanent endowment ▶ %  The percentages on lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations  (ii) related organizations  (ii) related organizations  (ii) related organizations  (iii) related organizations  2a(i) 3a(i) 3a(ii) 3a(ii) 3a(ii) 3a(ii) 3a(ii) 3a(ii) 3a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(ii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(iii) 4a(	f	· -									
Provide the estimated percentage of the current year end balance (line 1g, column (al)) held as  a Board designated or quasi-endowment ▶	a	·									
a Board designated or quasi-endowment ▶			ent vear end balanc	ce (line 1	a. column (a	a)) held as					
b Permanent endowment ▶	а		•	-	•	,,					
The percentages on lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations  (ii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other	b	_	%	<del></del>							
The percentages on lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations  (ii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other	С	Temporarily restricted endowment ▶	<del></del>								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment											
No   No   No   No   No   No   No   No	За	_	•	ation tha	at are held a	ind administe	ered for the	organiz	ation		
(ii) unrelated organizations (iii) related organizations  b   ff "Yes" on line 3a(ii), are the related organization's listed as required on Schedule R?  4   Describe in Part XIII the intended uses of the organization's endowment funds  Part VI   Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property   (a) Cost or other basis (other)   (c) Accumulated depreciation    1a Land   b Buildings								3		Ye	es No
(ii) related organizations b If "Yes" on line 3a(ii), are the related organization's listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  Buildings  Leasehold improvements  d Equipment  25,422. 15,410. 10,012.		•						~			1.0
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  basis (other)  basis (other)  basis (other)  c Leasehold improvements  d Equipment  c Other											
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  Buildings  Land  Buildings  Leasehold improvements  d Equipment  Other	b		tions listed as requi	red on S	Schedule R?						
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation  1a Land		_	•							0.0	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other  Ci) Accumulated depreciation  (d) Book value  25,422.  15,410.  10,012.	Par										
Description of property  (a) Cost or other basis (investment)  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  25, 422.  15, 410.  10,012.				0, Part I\	/, line 11a S	See Form 990	). Part X. Iır	e 10			
basis (investment) basis (other) depreciation  1a Land b Buildings c Leasehold improvements d Equipment e Other	_	. — —							d	(d) Book v	alue
1a Land		. ,	1						-	(3) 2001 1	
b Buildings c Leasehold improvements d Equipment 25,422. 15,410. 10,012. e Other	1a	Land	1		<u> </u>	· /	- F- 1-			_	
c Leasehold improvements       25,422.       15,410.       10,012.         e Other       25,422.       15,410.       10,012.					<del></del>	-					
d Equipment 25,422. 15,410. 10,012. e Other		· ·							<del>-   -</del>	_	
e Other		•			2	5.422	1	5 4	10.	1 0	012
		, ·			- 4	-	<del>_</del>			ΞΟ,	<u> </u>
			gual Form 990. Part	X. colun	nn (B). line 1	'0c )				10.	012.

Schedule D (Form 990) 2017

732053 10-09-17

	ockey Club, Inc.		<u>-4319018 Page 4</u>
Part XI Reconciliation of Revenue per Audited		ith Revenue per Retur	n.
Complete if the organization answered "Yes" on Fo			1 625 440
1 Total revenue, gains, and other support per audited finance		<u>  1</u>	1,635,440.
2 Amounts included on line 1 but not on Form 990, Part VIII,	1	i	
a Net unrealized gains (losses) on investments     b Donated services and use of facilities	2a	<del></del>	iii
c Recoveries of prior year grants	2b 2c		
d Other (Describe in Part XIII )	20		
e Add lines 2a through 2d	Zu	2e	0.
3 Subtract line 2e from line 1		3	1,635,440.
4 Amounts included on Form 990, Part VIII, line 12, but not of	on line 1.		2,000,1100
a Investment expenses not included on Form 990, Part VIII,	1 1		
b Other (Describe in Part XIII)	4b		
c Add lines 4a and 4b	<del></del>	4c	0.
5 Total revenue Add lines 3 and 4c. (This must equal Form 9		5	1,635,440.
Part XII Reconciliation of Expenses per Audited	d Financial Statements V	Vith Expenses per Reti	ırn.
Complete if the organization answered "Yes" on Fo	rm 990, Part IV, line 12a		
1 Total expenses and losses per audited financial statements	s	1	1,710,645.
2 Amounts included on line 1 but not on Form 990, Part IX, II	ne 25	,	
a Donated services and use of facilities	<u>2a</u>	<del>                                     </del>	
<b>b</b> Prior year adjustments	2b		
c Other losses			
d Other (Describe in Part XIII.)			
e Add lines 2a through 2d		<u>2e</u>	0.
3 Subtract line 2e from line 1		3_	1,710,645.
4 Amounts included on Form 990, Part IX, line 25, but not on	, i		
a Investment expenses not included on Form 990, Part VIII, I			
b Other (Describe in Part XIII )			
c Add lines 4a and 4b		<u>4c</u>	0.
5 Total expenses Add lines 3 and 4c. (This must equal Form Part XIII Supplemental Information.	990, Part I, line 18 )	5	1,710,645.
Provide the descriptions required for Part II, lines 3, 5, and 9, Par	t III. lines 1s and 4. Part IV. lines	1h and 0h Dort V line 4: Don	V Inc O Dort VI
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this			I.A, IIII e 2, Part AI,
mice 2a and 45, and 1 are mi, mice 2a and 45 7 100 complete tine	part to provide any additional in	iomation.	
		<del> </del>	
	,		
732054 10-09-17		Scher	dule D (Form 990) 2017

## SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## **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.

► Attach to Form 990 or Form 990-EZ.

► Go to www.lrs.gov/Form990 for the latest instructions.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization **Employer identification number** Chicago Jets Hockey Club, Inc. 36-4319018 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply □ Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations c 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? Yes 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 or control of (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity 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

732081 09-13-17

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

Schedule G (Form 990 or 990-EZ) 2017

	edule G (Form 990 or 990-EZ) 2017 Chicago Irt II Fundraising Events. Complete if the	e organization answered	"Yes" on Form 990 Par		4319018 Page 2
	of fundraising event contributions and gro				
		(a) Event #1	(b) Event #2	(c) Other events	
		1		• •	(d) Total events
		Golf Outing	Skate Escape	1	(add col. (a) through
-		(event type)	(event type)	(total number)	col (c))
Revenue					
eve	1 Gross receipts	6,641.	35,758.		42,399.
Œ	•				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)	6,641.	35,758.		42,399.
	4 Cash prizes				
	5 Noncash prizes				
Direct Expenses					
ben	6 Rent/facility costs	5,000.			5,000.
E					
ect	7 Food and beverages			· · · · · · · · · · · · · · · · · · ·	
۵					
	8 Entertainment				
	9 Other direct expenses				5 000
	10 Direct expense summary Add lines 4 through	• •		<b>•</b>	5,000.
Da	11 Net income summary. Subtract line 10 from line III Gaming. Complete if the organization a		990 Part IV June 19 or r	enorted more than	37,399.
	\$15,000 on Form 990-EZ, line 6a	answered res on rom	1000,1 art 14, iiile 10, 011	eported more than	
	\$15,000 011 0111 330 EZ, line 02	<del></del>	(b) Pull tabs/instant	<del></del>	(d) Total gaming (add
Jue		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col (c))
Revenue					
~	1 Gross revenue				
	1 0.000 (0.00)				
<b>"</b>	2 Cash prizes				
Direct Expenses			· · · · · ·		
þe	3 Noncash prizes				
Ψ̈́]	į				
Je C	4 Rent/facility costs				
۵	•				
	5 Other direct expenses				
		Yes %	Yes %	Yes %	
ľ	6 Volunteer labor	No	No No	No No	
	7 Direct expense summary Add lines 2 through	5 ın column (d)		▶.	
ļ	8 Net gaming income summary Subtract line 7	from line 1, column (d)	<del></del> -		<u> </u>
	Enter the state(s) in which the organization condu		<del></del>		
	Is the organization licensed to conduct gaming ac		states?		└─_ Yes └─ No
b	If "No," explain:				<del></del>
				<del></del>	<u> </u>
	Were any of the organization's gaming licenses re	· · · · · ·		/ear?	L Yes L No
b	If "Yes," explain	<del></del> -		<del></del>	
		<del></del> _			
		· · · · · · · · · · · · · · · · · · ·			
/3208	32 09-13-17			Schedule G (For	rm 990 or 990-EZ) 2017

Sch	edule G (Form 990 or 990 EZ) 2017 Chicago Jets Hockey Club, Inc. 36-	<u>4319018</u>	Page 3							
	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No							
	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							
12	Indicate the percentage of gaming activity conducted in									
	The organization's facility	13a	%							
	An outside facility	13b	%							
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records									
	Nome N									
	Name ▶									
	Address >	<del></del>								
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No							
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount									
	of gaming revenue retained by the third party > \$									
С	If "Yes," enter name and address of the third party									
	Name									
	Address >									
16	Gaming manager information									
	Name									
	0									
	Gaming manager compensation ▶ \$									
	Description of services provided									
	Director/officer Employee Independent contractor									
17	Mandatory distributions.									
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to									
_	retain the state gaming license?	Yes	☐ No							
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the									
U	organization's own exempt activities during the tax year > \$									
Рa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, I	ince 9 9b 10	h 15h							
· u		1165 3, 30, 10	υ, 130,							
	15c, 16, and 17b, as applicable Also provide any additional information. See instructions									
			<u></u>							
_										

Schedule C	G (Form 990 or 990-EZ)	Chicago Jets ormation (continued)	Hockey	Club,	Inc.	36-4319018	Page 4
Partiv	Supplementaring	ormation (continuea)					
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#### SCHEDULE L

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

## **Transactions With Interested Persons**

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

► Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form99

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

OMB No 1545-0047

2017

Open To Public Inspection

Name of the organization Employer identification number 36-4319018 Chicago Jets Hockey Club, Inc. Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (h) Approved (a) Name of (b) Relationship (c) Purpose (e) Original (d) Loan to or **(g)** In (i) Written (f) Balance due by board or from the agreement? interested person with organization of loan principal amount default? committee? organization? To From Yes_ No Yes No **\$** Total Grants or Assistance Benefiting Interested Persons. | Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (c) Amount of (d) Type of (e) Purpose of (b) Relationship between assistance assistance assistance interested person and the organization

732131 10-18-17

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

Schedule L (Form 990 or 990-EZ) 2017

### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Chicago Jets Hockey Club, Inc.	<u>  36-4319018                                   </u>
Form 990, Part VI, Section B, line 11b:	
Treasurer reviews information submitted by tax preparer	prior to signing
the tax return.	
Form 990, Part VI, Section B, Line 12c:	
Discussed at Board Meetings.	
Form 990, Part VI, Section C, Line 19:	
Available upon request.	
Form 990, Part IX, Line 11g, Other Fees:	
Referees:	
Program service expenses	23,461.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	23,461.
Coaching:	
Program service expenses	634,736.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	634,736.
Total Other Fees on Form 990, Part IX, line 11g, Col A	658,197.
·	

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

Schedule O (Form 990 or 990-EZ) (2017)