SCHEDULE D (Form 990)

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

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Day	Ouganizations Maintaining Dancy Advi	and Frieds or Othor Similar Fried	lo or Appoints				
Par	Organizations Maintaining Donor Advi Complete if the organization answered "		is or Accounts.				
	Complete ii and organization anowered	(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year) .						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor	advisors in writing that the assets he	ld in donor advised				
	funds are the organization's property, subject to the	e organization's exclusive legal control	?				
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used						
	only for charitable purposes and not for the benefi						
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·				
Par							
	Complete if the organization answered "						
1	Purpose(s) of conservation easements held by the c						
	Preservation of land for public use (e.g., recreati	·					
	Protection of natural habitat	☐ Preservation of	a certified historic structure				
2	☐ Preservation of open space Complete lines 2a through 2d if the organization he	d a qualified conservation contribution	in the form of a conservation				
_	easement on the last day of the tax year.	a a quamica conscivation contribution	Held at the End of the Tax Year				
а			_				
b	Total acreage restricted by conservation easements		 				
c	Number of conservation easements on a certified h						
d	Number of conservation easements included in (. ,					
			1 1				
3	Number of conservation easements modified, trans	ferred, released, extinguished, or term	inated by the organization during the				
	tax year ►						
4	Number of states where property subject to conserv	vation easement is located ►					
5	Does the organization have a written policy reg						
	violations, and enforcement of the conservation eas						
6	Staff and volunteer hours devoted to monitoring, inspecti	ng, handling of violations, and enforcing co	onservation easements during the year				
_	>						
7	Amount of expenses incurred in monitoring, inspecting \$\blacktriangleright*	g, handling of violations, and enforcing c	onservation easements during the year				
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of s	section 170(h)(4)(B)(i)				
	and section 170(h)(4)(B)(ii)?		· · · · ·				
9	In Part XIII, describe how the organization reports c	onservation easements in its revenue a	and expense statement, and				
	balance sheet, and include, if applicable, the text of	<u> </u>	ncial statements that describes the				
	organization's accounting for conservation easement						
Part			Other Similar Assets.				
	Complete if the organization answered "						
та	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar						
	public service, provide, in Part XIII, the text of the fo	•	,				
b	If the organization elected, as permitted under SF						
b	works of art, historical treasures, or other similar						
	public service, provide the following amounts relating	•	realient, or research in farther affect of				
	(i) Revenue included on Form 990, Part VIII, line 1	=	• \$				
	(ii) Assets included in Form 990, Part X						
2	If the organization received or held works of art,						
	following amounts required to be reported under SF						
а	Revenue included on Form 990, Part VIII, line 1 .		> \$				
b	Assets included in Form 990, Part X						

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Par	3 3 1 1 1 1 3 1	-		-	, ,
3	Using the organization's acquisition, accelection items (check all that apply):	ession, and other reco	ords, check any of the	ne following that are a	significant use of it
а	☐ Public exhibition	d	☐ Loan or exchange	ge programs	
b	☐ Scholarly research	е			
С	☐ Preservation for future generations				
4	Provide a description of the organization' XIII.	s collections and expl	ain how they further	the organization's exc	empt purpose in Par
5	During the year, did the organization soli assets to be sold to raise funds rather tha				
Part	IV Escrow and Custodial Arrange	ements.			
	Complete if the organization and 990, Part X, line 21.			·	
1a	Is the organization an agent, trustee, cus				not
	included on Form 990, Part X?				· Yes No
b	If "Yes," explain the arrangement in Part X	(III and complete the f	ollowing table:		
					Amount
С	Beginning balance			1c	
d	Additions during the year			1d	
е	Distributions during the year			1e	
f	Ending balance			1f	
2a	Did the organization include an amount or			ustodial account liabili	ity? 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Part X				•
Par	t V Endowment Funds.		•	•	
	Complete if the organization and	swered "Yes" on Fo	rm 990, Part IV, lin	e 10.	
	·		ior year (c) Two yea		ack (e) Four years back
1a	Beginning of year balance				
b	Contributions				
С	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	urrent veer and belen	as (line 1g. solumn (s	a)) hold as:	
2	Provide the estimated percentage of the c		ce (line 1g, column (a	a)) neid as:	
a	Board designated or quasi-endowment				
b		6			
С	Temporarily restricted endowment	%			
3a	The percentages on lines 2a, 2b, and 2c s Are there endowment funds not in the po organization by:		ization that are held	and administered for	
	=				Yes No
	(i) unrelated organizations				. 3a(i)
	(ii) related organizations				. 3a(ii)
ь 4	If "Yes" on line 3a(ii), are the related organ Describe in Part XIII the intended uses of			·	. 3b
			owincht fullus.		
Part			rm 000 Dar+ IV !:	0 110 Coo Earm 000	0 Dart V line 10
	Complete if the organization and				
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
		((53101)	asp. solution	
1a	Land				
b	Buildings				
_	LARCADOIG IMPROVAMENTS	i .	1	1	

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

	· · · · · · · · · · · · · · · · · · ·		orm 990, Part IV, line		
	(a) Description of security or catego (including name of security)	ry	(b) Book value		hod of valuation: -of-year market value
Financia	l derivatives				
-	held equity interests				
Other					
(A)			-		
(B)			-		
(C)			-		
(D)			-		
(E) 			-		
(F) (G)			-		
(G) (H)			-		
`	 b) must equal Form 990, Part X, col. (B) line 12.) ▶		-		
art VIII	Investments—Program Relate				
ai C VIII	Complete if the organization and		orm 990 Part IV line	11c See Form	990 Part X line
	(a) Description of investment	Swered 165 offi	(b) Book value		thod of valuation:
	(a) Decemption of investment		(b) Book value		of-year market value
,)					
)					
)					
))					
)					
)					
)					
al. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	•			
Part IX	Other Assets.				
	Complete if the organization and	swered "Yes" on Fo	orm 990, Part IV, line	11d. See Form	990, Part X, line
		(a) Description			(b) Book value
)					
)					
(;) (;) (;)					
2) 3) 3) 5)					
2) 3) 					
)))))					
)))))					
))))))	mn (h) must aqual Form 000. Part V	col (R) line 15)			
c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (mn (b) must equal Form 990, Part X, o	col. (B) line 15.)		•	
2) 3) 5) 5) 5) 7) 8) 9) Vtal. (Colu	Other Liabilities.				Form 000 Part
2) 3) 5) 5) 5) 7) 8) 9) Vtal. (Colu	Other Liabilities. Complete if the organization and				e Form 990, Part)
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)))))) tal. (Colu	Other Liabilities. Complete if the organization and line 25. (a) Description of liability		orm 990, Part IV, line		e Form 990, Part)
))))) tal. (Colu	Other Liabilities. Complete if the organization and line 25.	swered "Yes" on Fo	orm 990, Part IV, line		e Form 990, Part)
tal. (Colu	Other Liabilities. Complete if the organization and line 25. (a) Description of liability	swered "Yes" on Fo			e Form 990, Part 2
tal. (Colu	Other Liabilities. Complete if the organization and line 25. (a) Description of liability	swered "Yes" on Fo			e Form 990, Part 2
) () () () () () () () () () () () () ()	Other Liabilities. Complete if the organization and line 25. (a) Description of liability	swered "Yes" on Fo	orm 990, Part IV, line		e Form 990, Part 2
e) e	Other Liabilities. Complete if the organization and line 25. (a) Description of liability	swered "Yes" on Fo	orm 990, Part IV, line		e Form 990, Part)
Part X) Federal in 2) 3) 4) 5)	Other Liabilities. Complete if the organization and line 25. (a) Description of liability	swered "Yes" on Fo	orm 990, Part IV, line		e Form 990, Part)
2) 2) 3) 4) 5) 5) 7) 8) 9) 1	Other Liabilities. Complete if the organization and line 25. (a) Description of liability	swered "Yes" on Fo	orm 990, Part IV, line		e Form 990, Part)
2) 2) 2) 3) 3) 3) 4) 5) 5) 5) 6) 7) 6) 7) 7) 8) 7) 8) 8) 8) 8) 8) 8) 8) 8) 8) 8) 8) 8) 8)	Other Liabilities. Complete if the organization and line 25. (a) Description of liability	swered "Yes" on Fo	orm 990, Part IV, line		e Form 990, Part X
2) 2) 2) 3) 3) 3) 4) 5) 5) 5) 6) 7) 6) 7) 7) 8) 7) 8) 8) 8) 8) 8) 8) 8) 8) 8) 8) 8) 8) 8)	Other Liabilities. Complete if the organization and line 25. (a) Description of liability	swered "Yes" on Fo	orm 990, Part IV, line		e Form 990, Part

Schedule D (Form 990) 2017 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990. Part VIII, line 12: 2 Net unrealized gains (losses) on investments 2a Donated services and use of facilities h Recoveries of prior year grants Other (Describe in Part XIII.) Add lines **2a** through **2d** 2e 3 Subtract line **2e** from line **1** 3 Amounts included on Form 990. Part VIII. line 12. but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b Add lines **4a** and **4b** . . . 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities 2a 2b Prior year adjustments Other losses 2c Other (Describe in Part XIII.) d Add lines 2a through 2d 2e 3 Subtract line **2e** from line **1** 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines **4a** and **4b** 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (For	m 990) 2017	Page 5
Part XIII	Supplemental Information (continued)	