Form Decartment of the Trees.

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)

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.

OMB No. 1545-0047 2018 Open to Public Inspection

For the 2018 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable RALEIGH'S PLACE Address change RALEIGH'S PLACE 13-4290926 Doing business as Name shange Number and street (or P.D. box if it 205-755-9615 391 COUNTY ROAD 1028 mitial return City or town, state or province, country, and ZIP or foreign postal code Final return terminahad 122,991 CLANTON AL 35046 G Gross receipts \$ Amended return Name and address of principal officer H(a) is this a group return for subordinates? Approation pending TIM KING 391 COUNTY ROAD 1028 H(b) Are all subordinates included? If "No" attach a list (see instructions CLANTON AL 35046 X 501(c)(3) (insert no.) 4947(a)(1) or 527 N/A Website: H(c) Group exemption number X Corporation Trust 2006 AL Year of formation: M State of legal domicile Association Other > Form of organization Part I Summary 1 Briefly describe the organization's mission or most significant activities. See Schedule O Governance 2. Check this box > if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 11 3 ٥Ö 11 4 Number of independent voting members of the governing body (Part VI, line 1b) Activities 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 0 5 0 6 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 7b 0 b Net unrelated business taxable income from Form 990-T, line 38 Prior Year **Current Year** 994 122,990 8 Contributions and grants (Part VIII, line 1h) 167 0 9 Program service revenue (Part VIII, line 2g) 42 1 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 168,036 122.991 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 85,052 67,450 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 85,052 67,450 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 55,541 82,984 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 551,392 571. 710 20 Total assets (Part X, line 16) 0 0 21 Total liabilities (Part X, line 26) 551 392 571 710 22 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign SHARON KING VICE PRESIDENT/SEC Here Type or print name and title Phrit/Type preparer's name Preparer's signature PTIN Check Paid 04/23/19 Janice L. Hull P00471682 Preparer HULL & RUSSELL, 63-1160392 PC Firm's EIN Firm's name Use Only 502 2ND AVENUE SOUTH 205-755-0655 CLANTON, AL 35045-3514 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes Form 990 (2018)

	LEIGH'S PLACE		13-4290926	Page
	ment of Program Service		in this Dart III	5
training fundamental of district and district the state of the same of the same	he organization's mission:	response or note to any line	in this Part in	and the state of t
See Sched				
Did the organiza	tion undertake any significant pro	gram services during the year which v	were not listed on the	
prior Form 990 c				Yes X No
	e these new services on Schedule	e O ignificant changes in how it conducts	any program	
services?	non couse por adding, or mane a	grinosit oranges ir note it consucis		Yes X No
	e these changes on Schedule O			
expenses. Sect	non 501(c)(3) and 501(c)(4) organ	zations are required to report the amo	est program services, as measured by ount of grants and allocations to others,	
4a (Code	ses, and revenue, if any, for each	including grants of \$) (Revenue \$	
	nome for abandone		, , , , , , , , , , , , , , , , , , , ,	~ /
i depe				
4b (Code) (Expenses \$	including grants of \$) (Revenue \$)
N/A				
4c (Code) (Expenses \$	including grants of \$) (Revenue \$	1
N/A				
	services (Describe in Schedule O			
(Expenses \$		ling grants of \$) (Revenue \$	1
4e Total program :	service expenses >	66,812		^^^

Dew W. Chaptilat of Constant Cab

	504 VV		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		x	
2	is the organization required to complete Schedule B. Schedule of Contributors (see instructions)?	1 2	1	x
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		-	1
•	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 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,		1	
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes." complete Schedule D. Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D. Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	1		_
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10				
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11				
	VII, VIII, tX, or X as applicable.			
•	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	11a	x	
	complete Schedule D. Part VI b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	1		1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116		x
	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		X
	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	L	X
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X	111		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	-	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a	-	X
ь				1
	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	14b	1	x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140	 	-
19	for any foreign organization? If "Yes." complete Schedule F. Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	1.0	 	+
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes." complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		-	1
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G. Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes " complete Schedule G, Part III	19		x
20a		20a		X
b		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			T
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

(Secondary)	m 990 (2018) RALEIGH'S PLACE	13-4290926		F	age 4
	art IV Checklist of Required Schedules (continued)			7	
22	Dud the assessmention speed many than \$5,000 of grants as all as assistant			Yes	No
- 22	Did the organization report more than \$5,000 of grants or other assistance. Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	e to or for domestic individuals on			x
23	Did the organization answer "Yes" to Part VII. Section A. line 3, 4, or 5 ab	out companiestion of the	22	+	-
••	organization's current and former officers, directors, trustees, key employ				
100	employees? If "Yes," complete Schedule J	ses, and highest compensated	23		x
24a		incinal amount of more than	120	1	-
-	\$100,000 as of the last day of the year, that was issued after December 3				
	through 24d and complete Schedule K. If "No," go to line 25a	1, 2002 1 N 100, 01101101 III.00 270	24a		X
b		mporary period exception?	24b		
· e					
	to defease any tax-exempt bonds?		24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding a	t any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organizations	inization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete S	chedule L, Part I	25a		X
b	is the organization aware that it engaged in an excess benefit transaction w	rith a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organiza	tion'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 receiva	bles from or payables to any			
	current or former officers, directors, trustees, key employees, highest comp	ensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II		26	-	X
27	Did the organization provide a grant or other assistance to an officer director				
	substantial contributor or employee thereof, a grant selection committee mei		27		x
	entity or family member of any of these persons? If "Yes," complete Schedul		27		_
28	Was the organization a party to a business transaction with one of the follow	1.7.1		7	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions		28a		x
b	A current or former officer, director, trustee, or key employee? If "Yes," comp. A family member of a current or former officer, director, trustee, or key employee.		202	_	
b	Schedule L. Part IV	yeer in res, complete	28b		x
c	An entity of which a current or former officer, director, trustee, or key employe	e (or a family member thereof)	1 200		-
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete	Table 1 or of the rest of	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If		29		X
	Did the organization receive contributions of art, historical treasures, or other	22 DE 2 2 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
	conservation contributions? # "Yes." complete Schedule M		30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If	"Yes." complete Schedule N, Part I	31		X
12 0	Did the organization sell, exchange, dispose of, or transfer more than 25% of i	ts net assets? If "Yes,"			T
C	omplete Schedule N, Part II		32	<u> </u>	X
3 D	id the organization own 100% of an entity disregarded as separate from the o	rganization under Regulations			
\$6	ections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I		33		X
. w	as the organization related to any tax-exempt or taxable entity? If "Yes," com	plete Schedule R. Part II, III,			
or	IV, and Part V, line 1		34		X
a Die	the organization have a controlled entity within the meaning of section 512(0)(13)?	35a		X
o 1f "	Yes" to line 35a, did the organization receive any payment from or engage in	any transaction with a			
cor	strolled entity within the meaning of section 512(b)(13)? If "Yes," complete So	hedule R, Part V, line 2	35b		
Sec	ction 501(c)(3) organizations. Did the organization make any transfers to a	n exempt non-charitable			
rela	ted organization? If "Yes," complete Schedule R. Part V. line 2		36		X
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," co	mplete Schedule R. Part VI	37		X
Did I	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
art V	Statements Regarding Other IRS Filings and Tax Co	mpliance		-	-
-	Check if Schedule O contains a response or note to any		1		
				Yes	No
Enter	the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0	1		7
	the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		dent to	
-	e organization comply with backup withholding rules for reportable payment	· · · · · · · · · · · · · · · · · · ·			
	able gaming (gambling) winnings to prize winners?		1c		x
1.00	The state of the s			-	-

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance	e (continued)			age
			-	Yes	No
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 ins	tructions)	100		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year	r?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in So	chedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature of	or other authority over.			
	a financial account in a foreign country (such as a bank account, securities account, or other		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 Fin	nancial Accounts (FBAR)	- 11		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter		5b		X
c	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, ar	nd did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b					
	gifts were not tax deductible?		6b		
7.	Organizations that may receive deductible contributions under section 170(c).		e many e	(The party	skills report
a		rtly for goods			
	and services provided to the payor?	10.4	7a		
t	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for whi	ich it was			
	required to file Form 8282?		7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	F-100		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal be	enefit contract?	7e		
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benef	it contract?	7f		
ç	If the organization received a contribution of qualified intellectual property, did the organization	file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the o	rganization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund m	aintained by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
a	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	on?	9b		
10	Section 501(c)(7) organizations. Enter:	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			- 6-6
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	legit july and		
11	Section 501(c)(12) organizations. Enter		Sec.		
а	Gross income from members or shareholders	11a	12		12000
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them)	[116]	n with		961
12a		1 1	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			-	
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.			
b		11		. Solar	
	the organization is licensed to issue qualified health plans	13b			
C	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes" has it filed a Form 720 to report these payments? If "No," provide an explanation in Sc		14b		
15	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in re	emuneration or			
	excess parachute payment(s) during the year?		15		X
0.000	If "Yes," see instructions and file Form 4720, Schedule N.		68,802	10.5	
16	is the organization an educational institution subject to the section 4968 excise tax on net inves	stment income?	16		X
	If "Yes," complete Form 4720, Schedule O.				

	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
, b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	distribute	ROT SOL
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		- 1
	describe in Schedule O how this was done	12c	
13	Did the organization have a written whistleblower policy?	13	X
14	Did the organization have a written document retention and destruction policy?	14	X
15	Did the process for determining compensation of the following persons include a review and approval by		A from the second
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	X
b	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	X
h	If "Yes" did the organization follow a written policy or procedure requiring the organization to evaluate its		1

		osure

17	List the states	with which	a copy of t	his Form 990	is required to be filed	None
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organization's exempt status with respect to such arrangements?

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website Upon request Other (explain in Schedule O)

participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records ▶ SHARON KING

CLANTON

391 COUNTY ROAD 1028

205-755-9615

Page 7

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Part VII	Compensation of Officers, Directors,	, Trustees, K	ey 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

tal 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) (C) Average hours per (de not check more than o box unless person is both fours for contract of the contra					s both a	n [(D) Reportable compensation from the organization	-	(E) Reportable compensation from related organizations (W-2):1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		(TD ISSUMBLE)	organization and related organizations
(1) TIM KING PRESIDENT	0.00			х					0	0	C
(2) SHARON KING VICE PRESIDENT/SEC	0.00			х					0	0	
(3)	0.00			-			1			, and the second	
(4)									*		
(5)											
(6)									1		
(7)									1		
(8)											
(9)											antita tirantini kunin tauri makantini kunin
(10)											
(11)											

RALIEGHSPLC 04/23/2019 4 40 PM Form 990 (2018) RALEIGH'S PLACE 13-4290926 Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (0) (F) Position Estimated me and title Average Reportable Reportable nours per (do not check more than one compensation compensation from amount of box, unless person is both an from related officer (list ary officer and a directority stee the organizations compensation (W-2/1099-MISC) hours for organization from the Celeier individual trustee (W-2/1099-MISC) organization and related organizations employee below dotted organizations ine: 1b Sub-total • Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

			162	NO
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		x
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the			
	organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	\$100 F		
	individual	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual	Strange V	Market Comment	11,7,712
	for services rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation. Report compensation for the calendar year ending with or within the organization's tax year.

(A)

(B)

(C)

Name and business address

Description of services

(C)

Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶

0

Section B. Independent Contractors

Part V	III. Statement of Rev Check if Schedule	O contains a	response or	the same of			
				(A). Total revenue	Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from lax under sections 512-514
12 1a	Federated campaigns	1a					
D 0	Membership dues	1b					
E	Fundraising events	1c					
d d	Related organizations	1d					
E e	Government grants (contributions)	1e	122,990				
and Other Similar Amounts	All other contributions, gifts, grants, and similar amounts not included above	1f					
O g	Noncash contributions included in lines 1.	a-1f \$					
i h	Total. Add lines 1a-1f		>	122,990			
9			Busn. Code				
2a							
2 b							
2 0							
Ser			1.5				
E e							
Program Service Revenue	All other program service revi	enue					
4 9	Total. Add lines 2a-2f		>				
3	Investment income (including	dividends intere	est.				
	and other similar amounts)			1	1		
4	Income from investment of ta	x-exempt bond p	proceeds >				
5	Royalties		>				
	(i) Real	(n	i) Personal				
6a	Gross rents			the series committee the above with a commit	material forth or with the in Embrace and in marting	and the first of the state of t	The second secon
b	Less rental exps					a a a	
C	Rental inc. or (loss)				reciae i necessirio restan	and the second second	
d			>				
7a	Gross amount from (i) Securitie	rs .	(ii) Other		,		
	sales of assets other than inventory				idet i garattioala accinación un sistemado	agus viggis ruse i sa siverità i trebitada, suscitura	on, and the freeze and the control of the control o
b	Less cost or other						
-	basis & sales exps				a record angle is the manufactor	en moneyari compazitive comp	- Vertical and the
C	Gain or (loss)						1,000
d	Net gain or (loss)		>				
. 8a	Gross income from fundraising evi	ents		The way to be a second of the	27 The Secretary of the	and the control of the second of	The second second
2	(not including \$						
2	of contributions reported on line 10	:)		er - Commence and a c			to the second second
2	See Part IV. line 18	a					and the second second
Other Revenue	Less direct expenses	b					
ح ا ٥	Net income or (loss) from fund	draising events	>				
1 -	Gross income from gaming activiti	-		23.7			136
	See Part IV, line 19	a				98 1	
h	Less: direct expenses	b		para sa anti-da a dia kampana any antona ao amin' Ny INSEE dia mampiasa ny kaodim-dehitra dia mampiasa ny fivondrona ao amin'ny fivondrona ao amin'ny fivondrona I Amerika dia mandrona ny faritr'ora ny faritr'ora ny faritr'ora ny faritr'ora ny faritr'ora ny faritr'ora ny	a contract of the second secon	grander i de maior material de la companya de la co	
c	Net income or (loss) from gan	ning activities	•		FI		
	Gross sales of inventory, less		-	Sport of Salar Barrier South Commence of the C	Audiok - our fireway and a		
1.50	returns and allowances	a		Min and the second seco	grant to a first of the same o	g - sprig - uto pur - sy mensikrydopower de	
1	Less cost of goods sold	b		7			
1				s = x (8)		* 0.0	
C	Net income or (loss) from sale Miscellaneous Revenue		Busn. Code				
	Miscellaneous Revenue		Bush. Code				
11a							
b							
C							
d	All other revenue						
e	Total. Add lines 11a-11d		>			A Property of the Park of the	
12	Total revenue. See instructio	ns.	•	122,991	1	0	0

Form 990 (2018) RALEIGH'S PLACE Part IX Statement of Functional Ex Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respo			ete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				0.00
À	and domestic governments. See Part IV. line 21				
2					
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				in the same and the of
	individuals. See Part IV, lines 15 and 16	and also the control of the control			
4	Benefits paid to or for members				
5	Compensation of current officers directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified	*			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	-			
9	Other employee benefits Payroll taxes				
10	Fees for services (non-employees):				
a	THE MAN TO SELECT THE PARTY OF	5 0 0			
b					
c		600	600		
d	Lobbying				Andread and the Andread
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (if line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule ()				
12	Advertising and promotion	2,540	2,540		
13	Office expenses	3,083	2,445	638	
14	Information technology		***************************************		
15	Royalties				
16	Occupancy	24,437	24,437		
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	19,949	19,949	-	
24	Other expenses: Itemize expenses not covered		Charles Market and the second second second second		Calculation Calculation
	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 ()	Company of the second s	the process to design the second second		erentary opine appropria
а	CAMP SUPPLIES	9,353	9,353		
b	REPAIRS	4,258	4,258		
c	COUNSELOR STIPENDS	3,230	3,230		
d			5/200		
	All other expenses				
		67,450	66,812	638	0
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	01,430	00,012	038	
.0	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 10,544 20,429 Cash--non-interest bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L. 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 Notes and loans receivable, net 7 8 8 inventories for sale or use 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 725,638 10a other basis. Complete Part VI of Schedule D 540,848 551,281 10b 174,357 10c b Less accumulated depreciation 11 11 investments—publicly traded securities 12 Investments-other securities. See Part IV, line 11 12 13 investments-program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 551,392 571,710 16 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors. trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 0 26 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. 551,392 571,710 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ŏ complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 571,710 551,392 33 Total net assets or fund balances 551,392 571,710 Total liabilities and net assets/fund balances

सा क्ष	13-4290926			Page I
ert	XI Reconciliation of Net Assets			
A sudma es-	Check if Schedule O contains a response or note to any fine in this Part XI			X
1 1	otal revenue (must equal Part VIII, column (A), line 12)	1	12	2,991
2 1	otal expenses (must equal Part IX, column (A), line 25)	2	(7,450
3 F	Revenue less expenses. Subtract line 2 from line 1	3	E	5,541
	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	55	1,392
	Net unrealized gains (losses) on investments	5	magai milauni da agma da abiya d	and the state of t
	Donated services and use of facilities	6		-
7	investment expenses	7	***************************************	-
8	Prior period adjustments	8		
	Other changes in net assets or fund balances (explain in Schedule O)	9	-3	5,223
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		And Control of the Control of the Control	- Company of the Company
	33, column (B))	10	57	1,710
Par	t XII Financial Statements and Reporting			· promoto
en bandiren i mon	Check if Schedule O contains a response or note to any line in this Part XII			
				Yes No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_	
	If the organization charged its method of accounting from a prior year or checked "Other," explain in			
	Schedüle O			
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 on a separate basis, consolidated basis, or both.		- day	F 100 - 100
	Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		24	x
D	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		2b	
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		part tangeton	an ecolo-ioloxi
	of the audit, 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		Paragonal P	national physics
	Schedule O			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	990 (2016

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 601(cV2) organization or a section 4967(a)(1) proportion charitable trust

2018

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

Department of the Treasury Internal Revenue Service

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

Open to Publi

Name of the organizatio	RALEIGH'S E	LACE			Employer ident	fication number 0926		
Part I Re	eason for Public Charit	y Status (All organization	ns must c	omplete th				
		se it is (For lines 1 through 12,			***************************************			
para a		sociation of churches described			vi).			
proved	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)							
Property	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,							
city, and								
		of a college or university owner	or operate	d by a gover	nmental unit described in			
. (******	170(b)(1)(A)(iv). (Complete Pa	governmental unit described in	eaction 17	0/b)(1)/A)/w)				
7 X An organ		substantial part of its support f						
- Lucal		170(b)(1)(A)(vi). (Complete Pa	et II)					
percel		scribed in section 170(b)(1)(A)		ed in conjunc	tion with a land-grant college			
Michael .	sity or a non-land-grant college	of agriculture (see instructions)						
10 An organ receipts f support fr	ization that normally receives (from activities related to its exer rom gross investment income a	1) more than 33 1/3% of its sup mpt functions—subject to certain and unrelated business taxable in 00, 1975. See section 509(a)(2	n exception ncome (les	s, and (2) no s section 511	more than 33 1/3% of its			
- Land		exclusively to test for public saf			(4)			
j-reed -		exclusively for the benefit of, to						
of one or	more publicly supported organi	zations described in section 50 hat describes the type of support	9(a)(1) or s	ection 509(a)(2). See section 509(a)(3).	.		
house		erated, supervised, or controlle	(2) (2)					
- majorie	,, ,	wer to regularly appoint or elect		•				
suppo	orting organization. You must o	omplete Part IV, Sections A	and B.					
contro	ol or management of the suppor	pervised or controlled in conne- ting organization vested in the						
c Type		supporting organization operate tructions) You must complete						
d Type	III non-functionally integrated	d. A supporting organization oper organization generally must sa	erated in co	nnection with	n its supported organization(s			
require	ement (see instructions). You r	nust complete Part IV, Section	ns A and C), and Part \	1.			
		eived a written determination front- i-functionally integrated support			pe I, Type II, Type III			
f Enter the r	number of supported organization	ons						
g Provide the	e following information about th	e supported organization(s).						
(i) Name of supported	(ii) EIN	(III) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount of		
organization		(described on lines 1-10	1	our governing	support (see	other support (see		
	1	above (see instructions))	-	iment?	instructions)	instructions)		
		 	Yes	No				
(A)								
B)								
C)			1					
(D)		-						
(E)								
E)								

Schedule A (Form 990 or 990-EZ) 2018

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support			arterior montante de la composition de			
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	121,770	128,947	119,367	167,994	122,990	661,068
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	121,770	128,947	119,367	167,994	122,990	661,068
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			MCARTH GALLERY			661,068
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	121,770	128,947	119,367	167,994	122,990	661,068
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						661,068
12	Gross receipts from related activities, etc. (s	ee instructions)				12	43
13	First five years. If the Form 990 is for the o	rganization's first, se	econd, third, fourth,	or fifth tax year as	a section 501(c)(3)	
	organization, check this box and stop here						>
Sec	ction C. Computation of Public Suj	pport Percenta	ge				
14	Public support percentage for 2018 (line 6, c	column (f) divided by	line 11, column (f))		14	100.00%
15	Public support percentage from 2017 Sched	ule A, Part II, line 14				15	100.00%
16a b	33 1/3% support test—2018. If the organiz box and stop here. The organization qualifie 33 1/3% support test—2017. If the organiz.	es as a publicly supp	orted organization				▶ 🗓
	this box and stop here. The organization qu	alifies as a publicly s	supported organiza	tion			
17a	10%-facts-and-circumstances test-2018	. If the organization	did not check a bo	x on line 13, 16a, o	or 16b, and line 14	is	
	10% or more, and if the organization meets the "facts organization".						▶ □
b	10%-facts-and-circumstances test—2017	. If the organization	did not check a bo	x on line 13, 16a, 1	6b, or 17a, and lin	e	
	15 is 10% or more, and if the organization me	200					
	Explain in Part VI how the organization meets					y	
	supported organization						▶ □
8	Private foundation. If the organization did no	ot check a box on lit	ne 13, 16a, 16b, 17	a, or 17b, check th	nis box and see		
	instructions						▶ [
		***		Contract of the second		Schedule A (Form 9	Long Control

Schedule A (Form 990 or 990-EZ) 2018

Part III Support Sched

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.)

Section of the same	on A. Public Support		-		A STATE OF THE PARTY OF THE PAR	T	
	r year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	itis, grants, coninbutions, and membership						
1	ies received. (Do not include any "unusual grants.")						************
	Gross receipts from admissions, merchandise lold or services performed, or facilities urnished in any activity that is related to the eigenization's tax-exempt purpose	Nijerok danga ngilik distrikan ngapatan karan		and the second s			agains and the disputation of
•	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			Control of the Contro			
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	ndi Kaliyasta w ^a rrasta wanaya a garri wakii dhaw					
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						
- patricular	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6					ļ.,	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					, "	
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			0.0			
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the o	rganization's first.	second, third, fourth	, or fifth tax year a	is a section 501(c)	3)	
	organization, check this box and stop here			,			▶ [
Sec	tion C. Computation of Public Suj	port Percent	age				
15	Public support percentage for 2018 (line 8, c	olumn (f), divided	by line 13, column (()		15	%
16	Public support percentage from 2017 Sched					16	%
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 2018 (line			olumn (f))		17	%
18	Investment income percentage from 2017 S				45 00 4/00*	18	%
19a	33 1/3% support tests—2018. If the organi						
	17 is not more than 33 1/3%, check this box		•		-		- 1
h	33 1/3% support tests 2017 If the grassi	ration did not chec					
b	33 1/3% support tests—2017. If the organia line 18 is not more than 33 1/3%, check this						1

Schedule A (Form 990 or 990-EZ) 2018

rt IV Supporting Organizations

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

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If
 "Yes." and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes." provide detail in **Part VI**.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a	age agent code	forest Ave. Al
4b		12,600
4c		
apet il		en skriv
5a	allo mercur	
5b 5c		
-0-0		
6	gerthetic ge	
,		
7		2 - 0 000
8		
9a		
9b		
9c		
		1912
10a		
10b		-EZ) 2011

Schedu	ile A (Form. 990 or 990-EZ) 2018 RALEIGH'S PLACE	13-4290926	-	Page 5
Par	t IV Supporting Organizations (continued)		+	·
	[[일일] [[일일] [[일일] [[일일] [[일일] [[일] [[일]	· ·	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		- A-10	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		100000000000000000000000000000000000000	
	below, the governing body of a supported organization?	11a		
b		11b	-	-
C	the same of the sa	t VI. 11c	1	
Sect	ion B. Type I Supporting Organizations			T
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	Extra		
	controlled the organization's activities. If the organization had more than one supported organization.			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	ad .		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	1000	L-199 G
2	Did the organization operate for the benefit of any supported organization other than the supported		100	
•	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Par			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated.			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations		L	L
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	5		LANGERONA
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		id and	0.00
	or management of the supporting organization was vested in the same persons that controlled or managed			Es Gallacon
	the supported organization(s)			
Sec	tion D. All Type III Supporting Organizations		1 1/	T
1	Did the executation provide to each of its supported executations, but he lost day of the fifth month of the		Yes	No
,	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	riar tay		
	organization's tax year (i) a written notice describing the type and amount of support provided during the pi year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of	F125.77		
	organization's governing documents in effect on the date of notification, to the extent not previously provide			The second second
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supporte			7 3
•	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI	Bridge Age and the	Sirker and the	
	the organization maintained a close and continuous working relationship with the supported organization(s)			
3	By reason of the relationship described in (2), did the organization's supported organizations have a	Market et al.		
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sect	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	r (see instructions).		
а				
b				
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	nt entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а		of	unio - parisco	nur un angle y
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		31.5	
	those supported organizations and explain how these activities directly furthered their exempt purpose	S		1
	how the organization was responsive to those supported organizations, and how the organization determin			1/2
	that these activities constituted substantially all of its activities.	2a		
b		The state of the s	100 MAY 1	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI th			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	20		1 628
a				
a		3a		1000
ь	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .			
Þ				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regar	u. 130		

5

6

7

8

2

3

Distributable Amount, Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integrated Ty- instructions).	pe III si	upporting organiz	ation (see
	-		

5 Net value of non-exempt-use assets (subtract line 4 from line 3)

1 Adjusted net income for prior year (from Section A, line 8, Column A)

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

Multiply line 5 by .035.

Section C - Distributable Amount

Enter greater of line 2 or line 3income tax imposed in prior year

2 Enter 85% of line 1.

Recoveries of prior-year distributions

8 Minimum Asset Amount (add line 7 to line 6)

Schedule A (Form 990 or 990-EZ) 2018

Current Year

Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pur	poses		
2	Amounts paid to perform activity that directly furthers exempt purpos			
_	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organ	ization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6	in Gill forming in the reason in the control of the		***************************************
10	Line 8 amount divided by line 9 amount			
-10	Eme o amount divided by line a amount	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required-explain in Part VI). See instructions.			e de la composition de la comp
3	Excess distributions carryover, if any, to 2018		ending white piles from the time of the second	the side of the second that is the party
а	From 2013			
t	From 2014	100000000000000000000000000000000000000	enter an apparent of a state of	
C	From 2015			
C	From 2016			
•	From 2017		professional de la pagin desse de desse de desse	energia en matroqui i actualar don a co
t	Total of lines 3a through e			
	Applied to underdistributions of prior years			
***************************************	Applied to 2018 distributable amount	6888	4,000	
-	Carryover from 2013 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f		Margania Arijapa a sa isa 18 mma tana matana m	to the world of the control of the c
4	Distributions for 2018 from			
	Section D, fine 7:			
а	Applied to underdistributions of prior years			
t	Applied to 2018 distributable amount			
C	Remainder Subtract lines 4a and 4b from 4		Consideration of the second of	
5	Remaining underdistributions for years prior to 2018, if		,	
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in	a plantina de la company de	erent on the top was broadled	
	Part VI See instructions			
7	Excess distributions carryover to 2019. Add lines 3j			P. C.
	and 4c		and the comment of th	en e
8	Breakdown of line 7			
а	Excess from 2014	the gas a substitute and all the control of the con	Andrew Committee of the	
-	Excess from 2015			
	Excess from 2016			
-	Excess from 2017			
THE REAL PROPERTY.	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

RALEIGH'S PLACE

13-4290926

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