

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

BusinessName InCareOfNm

EIN

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

IdDisregardedEntitiesGrp

Table with 6 columns: (a) Name, address, and EIN of disregarded entity; (b) Primary activity; (c) Legal domicile; (d) Total income; (e) End-of-year assets; (f) Direct controlling entity. Rows 1-6.

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

IdRelatedTaxExemptOrgGrp

Table with 7 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile; (d) Exempt Code section; (e) Public charity status; (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity? Rows 1-7.

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

| | (a) Name, address, and EIN of related organization <u>RelatedOrganizationName</u> <u>USAddress</u> <u>ForeignAddress</u> EIN | (b) Primary activity <u>PrimaryActivitiesTxt</u> | (c) Legal domicile (state or foreign country) <u>LegalDomicileStateCd</u> <u>LegalDomicileForeignCountryCd</u> | (d) Direct controlling entity <u>DirectControllingEntityName</u> <u>DirectControllingNACd</u> | (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>PredominantIncomeTypeTxt</u> | (f) Share of total income <u>ShareOfTotalIncomeAmt</u> | (g) Share of end-of-year assets <u>ShareOfEOYAssetsAmt</u> | (h) Disproportionate allocations? | | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) <u>UBICodeVAmt</u> | (j) General or managing partner? | | (k) Percentage ownership <u>OwnershipPc</u> |
|-----|--|--|---|--|---|--|--|--------------------------------------|----|--|-------------------------------------|----|---|
| | | | | | | | | Yes | No | | Yes | No | |
| (1) | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | | | |
| (6) | | | | | | | | | | | | | |
| (7) | | | | | | | | | | | | | |

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

| | (a) Name, address, and EIN of related organization <u>RelatedOrganizationName</u> <u>USAddress</u> <u>ForeignAddress</u> EIN | (b) Primary activity <u>PrimaryActivitiesTxt</u> | (c) Legal domicile (state or foreign country) <u>LegalDomicileStateCd</u> <u>LegalDomicileForeignCountryCd</u> | (d) Direct controlling entity <u>DirectControllingEntityName</u> <u>DirectControllingNACd</u> | (e) Type of entity (C corp, S corp, or trust) <u>EntityTypeTxt</u> | (f) Share of total income <u>ShareOfTotalIncomeAmt</u> | (g) Share of end-of-year assets <u>ShareOfEOYAssetsAmt</u> | (h) Percentage ownership <u>OwnershipPct</u> | (i) Section 512(b)(13) controlled entity? | |
|-----|--|--|---|--|--|--|--|--|--|----------------------------------|
| | | | | | | | | | Yes | No |
| (1) | | | | | | | | | | <u>ControlledOrganizationInd</u> |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| (5) | | | | | | | | | | |
| (6) | | | | | | | | | | |
| (7) | | | | | | | | | | |

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

| | Yes | No |
|---|-----|----|
| 1a ReceiptOfIntAnntsRntsRytlInd | | |
| 1b GiftGrntOrCapContriToOthOrgInd | | |
| 1c GiftGrntCapContriFromOthOrgInd | | |
| 1d LoansOrGuaranteesToOtherOrgInd | | |
| 1e LoansOrGuaranteesFromOthOrgInd | | |
| 1f DivRelatedOrganizationInd | | |
| 1g AssetSaleToOtherOrgInd | | |
| 1h AssetPurchaseFromOtherOrgInd | | |
| 1i AssetExchangeInd | | |
| 1j RentalOfFacilitiesToOthOrgInd | | |
| 1k RentalOfFacilitiesFromOthOrgInd | | |
| 1l PerformOfServicesForOthOrgInd | | |
| 1m PerformOfServicesByOtherOrgInd | | |
| 1n SharingOfFacilitiesInd | | |
| 1o PaidEmployeesSharingInd | | |
| 1p ReimbursementPaidToOtherOrgInd | | |
| 1q ReimbursementPaidByOtherOrgInd | | |
| 1r TransferToOtherOrgInd | | |
| 1s TransferFromOtherOrgInd | | |

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

UnrelatedOrgTxblPartnershipGrp

| | (a) Name of related organization OtherOrganizationName | (b) Transaction type (a–s) TransactionTypeTxt | (c) Amount involved InvolvedAmt | (d) Method of determining amount involved MethodOfAmountDeterminationTxt |
|-----|--|---|---------------------------------------|--|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| TransactionsRelatedOrgGrp | (a) Name, address, and EIN of entity | | | (b) Primary activity | (c) Legal domicile (state or foreign country) | | (d) Predominant income (related, unrelated, excluded from tax under sections 512–514) | (e) Are all partners section 501(c)(3) organizations? | | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|---------------------------|---|-----------|----------------|-------------------------|--|----------------------|--|--|-----|------------------------------|------------------------------------|--------------------------------------|-----------------------|--|-------------------------------------|-----|-----------------------------|
| | BusinessName | USAddress | ForeignAddress | | EIN | LegalDomicileStateCd | | LegalDomicileForeignCountryCd | Yes | | | No | ShareOfTotalIncomeAmt | | ShareOfEOYAssetsAmt | Yes | |
| (1) | | | | PrimaryActivitiesTxt | | | PredominateIncomeDesc | AllPartnersC3Ind | | | | DisproportionateAllocationsInd | | | GeneralOrManagingPartnerInd | | |
| (2) | | | | | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | | | | | | | |
| (6) | | | | | | | | | | | | | | | | | |
| (7) | | | | | | | | | | | | | | | | | |
| (8) | | | | | | | | | | | | | | | | | |
| (9) | | | | | | | | | | | | | | | | | |
| (10) | | | | | | | | | | | | | | | | | |
| (11) | | | | | | | | | | | | | | | | | |
| (12) | | | | | | | | | | | | | | | | | |
| (13) | | | | | | | | | | | | | | | | | |
| (14) | | | | | | | | | | | | | | | | | |
| (15) | | | | | | | | | | | | | | | | | |
| (16) | | | | | | | | | | | | | | | | | |

Part VII**Supplemental Information**
Provide additional information for responses to questions on Schedule R. See instructions.

SupplementalInformationDetail

FormAndLineReferenceDesc

ExplanationTxt

Informational Copy
Do Not File