Lawrence City Commissioners

City of Lawrence Kansas

Lawrence, Kansas

Dear Commissioners:

Thank you for considering my request to support and fund the arts in the upcoming budget decision.

Please invest in the position of Director of Arts and Culture for the City of Lawrence. This position is essential to the cultural capacity of Lawrence, a community that deserves participation from all sectors. Public funding ensures that citizens have equal access and is crucial in developing audiences beyond elite circles of privilege. For arts and culture to have a place at the city table means that all will benefit. Art is for everyone.

I have worked in many different arts settings, from a city arts and humanities commission to a private non-profit and for the National Endowment for the Arts. In every instance, it was public funding that set the tone for inclusion and diversity. Public support stimulates philanthropic contributions while serving all people.

I urge you to support the various arts and cultural programs and institutions, specifically the Director of Arts and Culture, the Lawrence Arts Center and the Lawrence Public Library.

Sincerely,

Saralyn Reece Hardy

August 2, 2016

Lawrence City Commission 6 E 6th Street Lawrence, Kansas 66044

Re: Petition for Funding to Keep Guns Out of Public Buildings

Dear City Commissioners:

Enclosed please find a petition signed by 687 Lawrence residents and visitors seeking to keep our public buildings in Lawrence free from guns. The signatures were gathered on July 21, 2016.

As you are aware, in 2013, the Kansas Legislature passed a law requiring local governments to allow civilians to bring concealed carry guns into public buildings unless certain security measures were put into place. The law allowed local governments four years to put those security measures into place. That exemption expires June 30, 2017.

It is our understanding that the budget as currently proposed does not include funding for security measures that would allow Lawrence to keep its current prohibitions on guns in public buildings. If Lawrence does not plan for and implement those security measures, any person—even someone with <u>zero</u> training with guns—will be able to bring a gun into our city buildings. That includes the Lawrence Public Library, where all members of our community gather to read, learn, play, work and study, and the Municipal Court, where a judge's decision might result in a previously law-abiding citizen making an irreversible mistake.

Personally, we do not want to spend any Lawrence tax dollars on the required security measures, as we would rather spend our limited resources on other ways to ensure Lawrence continues to be a great place to live and work. However, the Legislature has left us with no choice. We either plan for these security measures or allow guns into our public buildings. This Commission has stated that public safety is one of its priorities. We agree and believe that keeping guns out of public buildings will enhance the safety of both community members and public employees.

We pledge to urge members of the Kansas Legislature to extend the exemption beyond next June, but in the meantime Lawrence should plan for funding in case that does not occur.

Thank you for your consideration of this important matter.

Sincerely yours,

Gina Spade

Claudia Olea

In 2013, the Kansas Legislature passed a law requiring public building to allow people to bring guns into public buildings, unless certain security measures were put into place. The law allowed local governments four years to put those security measures into place. That exemption expires June 30, 2017. If Lawrence does not plan for and implement those security measures, any person – even someone with no training – will be able to bring a gun into our city buildings without those security measures – including the Lawrence Public Library. The best case scenario is that the Legislature will extend the exemption beyond next June, but we cannot count on that happening.

Name (printed)	Address	City/State/Zip	Signature	Date Signed
Meredath Shaheed	1109 Stonecreek Dr	46049	Mendalle	7/21/16
Emily With	1600 Kenpicky	66041	grund	7/21/16
Daniel Hernandez	1600 Kentucky	66044	m	7/21/2016
GWEN Wiens	425 Raffence	66049	Fren Wiens	1/21/16
CARNELL Huphir	508 Millstone Dr	66049	Callelle	1/01/16
Abi Fowler	504 Lonetree Dr.	66044	April	7/21/16
Ana Valeno	LUDIEZISTAI	Lelostio	Dallamo	7/21/16
Louise Removed	LZO3 GENVESSER ST	660 Hg	Louis Rull	7-21-16
Man Jo Cat	PO Box 287	66006	May Jock	7-21-16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
HELEN COX	12612 246th St	LAWRFICE, KS	Aldry Car	7.21.16
P, LARROME	RD 217WOODRVFF	Topetake Gee	Pelas Romes	2.2116
Sarah Balcoe	5000 Clinton Phuy	Campenco KS CLEUYS	FUA	7/21/16
Edná Ihrall	2641 Louisiana	ottace	Emale	7/21/16
Mayney V	1	Lamen B	Mynn	
Michele Ediger	440 RobFenceCt	Lawrence RS	Helieba	72/16
Deborah Werts	101 Fall Creek Rd L	aurence KS66049	Dehorsh Werts	7/21/16
Aloby Moung		Cowrence, KS-64044	ally your	7/21/16
lacob lewis	115 Vorkshire Drive	Lawrence KS		7/21/16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Amarda Miller	44 E 13th St.	Laurence, KS LOGOH	Olmandalymennik_	7/21/2017
Sharon WinXel		Topeka 55.	Sanowat C	2-21-2016
Kille Philips		Laurence KS	ma Re	7/21/16
DAVID HARK	1125 MARK BIME G.	CANEELEE, KG =	Tan Ann	7/21.16
Erin Padin	1910 Marvonne Rd	Laurence KS	62 l	7/21/16
Mieri Shoman	504 Florida	Lawrence Ks	Mari Shamouri	7/21/14
Shyanne Bucke	7	Lowrence, KS	Dipart (KL)	7/21/16
Evan Mangan	2411 Conistance	Bannerce, KS	Bullage	7/21/16
Julus Faust	905 loxination Aure	Lawrence KS	Chelle Dours	7/2/16
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Resecration	328 Lyon 51.	Courence 66044	Rholey)	7-22-16
Brooke Zeyer	1315 Summit 8+	Law lecour	BA Center	7-21-16
Julie Burk	817 Canterbury Ln	Lawrence Chorn	- hell Buk	7.22.16
P. (hatter)æ	5511 Wagstaff Dr	Lawrence	1 1/2 /1 /	7-22-16
T. Chatterice	5511 Magetaff Dr.	Lawrence	Iera Chattergee	7-22-16
Liga Koch	1 00	Cauvence KS 66	el9 lum	7-22-16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed	
(sai) Meier	722 N. Huntington (+ bawrence, KS1	de049 Xbil Me	ria 7/21	16
Robertu Renz	18096 21st	Lawrence 6604		2 4	'
Kyle Ell	619 Ninolay St	Mathe KS GOE	White I	7/21/16	
Spanne hocker	31125 Su2 10/6	Topela ICS	Janu Bock	2/21/16	
Hadley Galbraith	1230 SW College Are	1 T ,	Trellay Plbrish	7/21/16	
Nicole Krama	1561 Sig Winslicity	Law we blo	47 Macle K.	my 1/2	116
	ZAGO WHINGERSITY DIR.	LAWRENCE / KS/COOK	* TAKE	7/2:/16	5
KAY PARKING	18000 W68th	SHAWNET /KE66217	Kay D-	7/21/16	
	20701 Man Rd	lenex: 1KS 66220	2 1 .//.	7/21/16	

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
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Vicki Smith	4216 Wimbledon Dr	Lawrence KS66	047	7/21/16
	804 Fox Chie G	Larrene/LS	in and	7/21/12
JACK Armon	SIN W ATTH ST	LAWRENCE KS		7/21/16
RICHARD FNEER	912 7th ST.		Richard Floriger	7/21/16
Bord Lac	2600 W. 6th St. Apt.			7/21/16
Alayra Powell	I /		Meynafoull	7/21/16
Wend Bublis	261 E1757	Lawrence, KS	Wendost	7/21/16
Richard Nugsli	1500 w 8 ft Turall D-5	/	hily Toyl	7/21/16
Amy Seeds	9410 w 120th Ter	Overland Parky		7/21/14
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Frin Heineiluan	327 Northwood (n	66044	Ein Huller	7-21-14
Loslie Andres	420 W 5th Offour	(ولاه له ب	Thirdus	7-21-14
Jan Bresnahan	1910 Marvonne Rd	Le (e 0 47 (Jame Bresudo	1/21/16
Dan Thimmerch		Lawrence IS 6604,	100 L	7/21/16
Alexis Neal	141 top Hassaff 60011	Lawrence ks bloom	Alexic News	7/2/116
Gail Shaheed	1109 Stonericele Dr	66049	DarlShehel	7/2/14
Etello King	92- Alms Ct	66019	2	7/21/16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Miranda Fow lev	2232 Killarney Ct	Lawrence, KS	V. Forwar	7-21-16
Alex Oson	940 Tennessee	housence W	Alex/Ou	7-21-16
Lucas Long	501 (difornia st	Laurence KS	Tucely	7-21-16
John Meder	Ex Rolling Ct	Controlle MO		7-21-16
Edith Parcels	2717-Ponderosa Dr.	Laurence Ks	AMM	7-21-14
Sharan Hugha	22774 George Rd	Tonganoxie KS.	Shanduche	7-21-16
Lob Sailler	1328 Fis	Eudora, Ks	Debut & Sull	7/21/16
Taylor Turkalo	2600 W Leth St	Lamenceiks	Sayer	7/2/16
Michel Fenham	4313 Tealtr	lawrence VS	deliter	7/21/16
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Keep Guns Out of Lawrence's Public Buildings

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Shawna Shaft	1157 Swallege Ave .	EpekerKS Gbbay	Thaya Ruff	7-21-16
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Deena Amont	801 Missouri	Lawrence KS66044	Alona amont	9/21/16
Heide Country	160 Frentwood 1808 Brook		Holmpal	7/21/16
ł	101 Fall Creek Rd	l .	9 Delioral Wests	7/21/16
JOHN LYTTO	2000 E.26th St		Joh Mr. Lython	
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Stephanie Portu	822 N. Michigan Circle	Lawrence KS 6604	Ladone M. Toto	7/21/16
Quentin Wedge	Quentin 5 weda.	Laurence tes coo	6 Quenti I wedn	7/21/10
Bartagrasion	252 King St	Baldwin City	E CADE JULY ST	DZ 7/21/16
Gail Meier	722 W. Hundington	Lawrence, VS. 66049	Bail Mein	7/21/16
Erica Boys	449 Hutton Cuil		49, 800	7-21-16
+ Adrea Corado		Lawrencers	Mariagras	7-21-16
Jokhse	20599 Snale Fam Rd	lawereks		7-21-16
Amanda PClum	615 N. Lincoln	Olathe, KS	Smanch fflum	7-21-16
By Chel Johnson	315 E. 19th St.	Lawrena KS	Le 37	7/21/16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
MedicBooky	736 N47 St.	baus rence/KS	llelahka	7/21/16
ADRIANAMEBERT	911 MISSOURI ST	LAWRINGE ICS	Sauches	7/21/14
CHAD KENPOR	1417 R.I.	LANDENEKS	MKK	7-21/18
marky Liverent	5245 138th	Bonnes Son 15	Hanley Ruesof	7/21/1/6
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
GAYWYN Mas	ce 5503 Cape Court	St Toseph, MO6	4503 Lann SW	lone 7-21-16
KreAdlin	1105 Mocking bind		M064806/	Fy 7/31/16
Ause Esen	4	Lawrence, KS	ALE.	7(21/2016.
Deby Adrian	2027 E. 26th St	Lawrence, K	Dely Gelvin	7/21/2016
Mexid Roclof	1347 Nowtands s	-laure (S	Llen	7/2//6
ShelbyLauson	1301 W. 24th St M-27	Laurence KS	Jal-Bon	1/21/14
Vara Toney	2009 Tennessec St	Lawrence, KS	2	72111
DRAND: UZ COOME	531 Genjotone de 12	LAWLENCE, 5	4	7 12/16
Heigh Brower	524 Ploridas	Lawrence KS	HODICADAMA	7-12-16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Victoria Wheeler	14467 \$W 118th Fer	Clarke, KS 6600	2 Vitt/ Sur	7/21/1Ce
Atrooba Hashin	1501 Goerge Williams	Lawrence, KS 6604	7 allooka	7/21/16
Megan Less	718 W. 4+5 St.	1	Megan Leag	7.21.16
Cathyfellion	505 Shoal Ln.	Lawrence KS 66044 Laurence KS	Cathy Hillard	7-21/16
RebeccaStonto	3703 Hunterstill Dr		Release Roman	7-21-16
Pakricia Hooce	309 Bouldar 54.	LAurence, KS	Balm Itaza	7/21-16
Kristin Sorty	300 Johnson Le	Lawence KS	GETTE	7/21/14
Ronald Tippe	1824 Sweetwater Ct.	Lucia (O.	Bunt & Spire	7-27-16
Angelica Ferr	3823 Favor 8t 10+123	(awence KT	Angel w In	712116
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Nancy Hanson	3017 W. 7th St.	Lawrence, 45th Cy	g n. Henren	7/21/16
Addil Kytasan	1039 New York St.	Lawrence 1566044	Mus / M	7121/16
Maddyne Araman	516 5 Main Street	Writewster, KS	Madel Mr Outto	7/21/16
Cassie Vadrai	2200 4262	Lawrence, US	Colle-	7/2/16
Zac Turner	4901 Warnall Rd	kc, mo	Tax Jan	7/21/16
Lichen MoHenry	17309 37± 5+	McLouth KS 66054	Laten Many	7-21-6
TROY SOUTH	12 nos 17 3021	LAWRENCE 115 GGOYY	200	7/21/2016
This Andorson	1032 Andown St	Law routs 6600	Cal	7/21/2016
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Sennifer Make	10 2709 Meadow Place	Lawrence KS	o Allentillo	7-21-16
Matt Brandenburger	310 Riverview Rd	jawrente ks 660	9 Marker	7-11-1
Alys garrage	2611 W. 31st 87.	Inneura Is	May	7-21-16
MargaretMarco	2412 Westdale Rd	Lawrence, KS		7/21/16
Kolene Anderson	2813 Harvard Rel.	Lawrence, KS	Mentan	7/21/16
Mandie Eutster	1401 Sundown Ct.	Lawrence, ks.	MAG	7-21-16
Truly Drun	2504 Kensington Rd	Lawring, KS	Judy Days	7/21/16
Colleen Rodinarier	2200 S. 15th St.	Cervenworth, KS	all the few	7/21/14
Bella Atman	516 S. Min st.	Whitewater, KS	Bla adv	7/21/16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
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Leslie	1611 Massachusetts	Lawrence	Partie Muton	7/21/16
Den Rogers	1012 EmeryRJFS	Lawrence K\$600	Fren Rober	7/21/16
Rick Mitchell	2804 Tamakask	Leovenieks	Rumin	7/21/16
Cather Twaster	3911 W-144h	Lawrence Gorg	Com	7-21-15
Sake Dullen	2813 Crest live Dr.	Langua (door) >	The Page	7-21-16
John Wall	bandian 2006 Riojer	Laurence 6604	I Walker	7-21-16
^	er 4501 Ceda- Ridge Ct, 6604		Che Dalbork	7/21/16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Bubby Nightongal	241 Lavisiana St.	Enwruce, CS	Lt ff	T/21/16
Abigail Lueissenbach	2100 Heating rowood de F9	Launguage (K.S.	12426 PHOLDONO O.	1.0114
Karenthallos	1201 Carrell	100 (25 lolex?	Mes	721 16
9 mg/namis	12204 Conner Dr		Emory Mathes	4/21/16
Trans. 11/4/6/	1476 0 660 A	Language Relation	Mion Wen	7/21/16
Daniel Dannen	2702 University	Lanvenceks	Visind Samuely	7.21.16
Tereny molach	139 Perry st #4	lawrence 115 66044	In IN	7-21-16
1	736 615.4N7	LANCANCILLON		F.21-16
Carly Davis	2008 Cavine Dr	Larvenceldo	7 COUNTY OUR	7.21
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
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In Thorpen		Topoks/KS/GOGO	d	7-21-16
Evely Long Me.	1821 Break	Lieu.	3	7-21-16
Eric Shumoka	4705 Boltusul Ct	/ DWRENCESS 610	16/2	7/21
- Ten Handmen	5117 Cody Ch	Lewence books	Ont	7/21.
Madison Murphy	62 topshere			7/21
Jennifer RASTOK	308 MISSISSIPPI ST	Laurence, FS 66049	Cluba	7/21/16
Rebecca Moeller	904 Gardene C+	Lawrence Ko 6604	Whitena Moller	7-21-16
Lauren Diede	nich 3419 Sw Burney Rd	Lawrence Ks 6604 topeka, KS 104614	Lude	7/21/16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Idie Buste-	1930 Edgeler Rd	Lawrence Kalbora	an	07/21/16
Amy Wilson	405 N Mahadhe st	Olaste ics	Cum	7(21/16
Brady Cutter	3200W 26th 5t	Lawrence Kr 6604	7 Prade tion	7/21/16
lindin		L. K5	dub	7/21/16
Janny Sivilan	4501 wimbledon Dr.	Laurene KS	2200	7/2/116
Sifica Domingues	- Itell Mass. St.	Lawrence ZS	Notia R. Janky	7-121/16
Telly Jackson	4733 NE Meridan Rd	Topeka, KS 66617	Telligt Jakoh	7/21/16
Toplow Sinith	1627 New Hormpshirest.	Louveney KS, Ecoly	Taylor Gan DV	7/21/16
Cathy Mant	545 N. 750 Rd	Lauren EC, KS Meczy	artherine Hurt	7/21/14

In 2013, the Kansas Legislature passed a law requiring public building to allow people to bring guns into public buildings, unless certain security measures were put into place. The law allowed local governments four years to put those security measures into place. That exemption expires June 30, 2017. If Lawrence does not plan for and implement those security measures, any person – even someone with no training – will be able to bring a gun into our city buildings without those security measures – including the Lawrence Public Library. The best case scenario is that the Legislature will extend the exemption beyond next June, but we cannot count on that happening.

Name (printed)	Address	City/State/Zip	Signature	Date Signed
VALERIA NEUENDORFF	1233 PENSILVANIA ST.	LAWRENCE 66044	Valere SM	7/21/16
MEUSSA FISHER ISAACI	- 722 New York	larrence 66044	Hel sa Julia	F 7/21/16
KylieHest	3/03 Farmington 2d	Hotching 60502	Kyli Hough	7/21/16
Sale Byod	451 Alkanian SI	Courence	The Carl	7/21/14
AWA DIAGNE	1021 Home cir	Lawrence KS 66047	Dane	7-12/16
NIA RUTLEDGE	614 Alabama	LAWRENCE ES 660 YL	Fr.	7/21/10
Page Smithson	13230 W. 82" St.	June x on 145 66215	1	7/21/14
Zack Russell	10525 Bond St.	Overland Park, K5, 6	6214 Zardelgull	7/21/16
Danu Bonnes	3024121 - TEN	Lawrence 66046	Man Guna	- 7/21/16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Marlayna Bank	2720 190th ave	Milford KA 51351	Marlancas	#7-2HG
Linda M. Kon	1133 Pennsulvan	a Caurous	And M. Kung	2 7-21-201
Elliot Smith	821 Indiana St	Lawrence/KS/66049	Elliol Smith	7-21-16
REZA NAJAPIZADUO	4501 Cedar Kedge et	lew Yence U-> 66:49	8-2	7-21/16
Ian pepin	1108 Stoneridge dr	Lowence to Gay	Chr frain	7-21-16
Sandra Brakunta	3 1600 Kenwood Skive	Caw. KS Lacely	E Allandaylastos	7/21/16
Charlene England	1600 Kenwood Drive	Law, KS 669	Charollera Englad	7/21/16
William STIMAS	901 church st	Kudova KS 66025	William & Zien ya	7-12/14
Iris Hyde	908 Rhode Island St	Lawrence KS 66046	with the	7/2/16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Stophen Golde	rd 624 N. 1000 Rd	Lawrence, KS	of Gill	7-21-16
Ch Ken Bana	2001 W 6m DI	Lawrence KS	Mar Bard	7/2/14
AmordsSomer	924 Colonial Dr	burene 18 daga	MAST	7/21/16
Sally Zogry	2101 Owens Ln.	Lawrence KS blots	Sulla Con	7/11/16
Courtnewlars	y 2000	(Ciston	7/21/16
Meropian Johns	on 929 Penn.	LAWrence Ko 6 (D)	y Merecise & Man	1/21/4
Elisa Berner	50DN Jesserson St	KC, MO 64119	Olefa	7/21/14
Doll Suyers	1/2 10 10	Lawren 9715	May Jugar	7/21/16
	2, 3100 Osdan (Rd 925	Lawrence KS	Belen M.	7-21/16
		66046		

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Myson Frydman	U45 MISSISSIPPIST.	Lammer KS 66099	Leyston	7/2/11/4
Karen Wolney	847 E1500 Ra	Ballin Cut, 16	66006 Karen Gala	rledy6
GEOFF DEMAN	1521 New Hampshire	Lawrence, KS	61044 APA	7/21/16
Brianne Baydon	9520 Halsay St.	LenexackS	Bull	7/21/16
ShariAnderso	1032 Anderson	lawrence \$5	4	7-21-16
Alexa Malik	3809 Park Pl	Laurence 15 Ga	49 alexa Mald	7-21-16
Lina LaMoria	1439 Coverty MAC 2	Lawrence KGOT	11/1	7-21-16
Durand Reiber			DuranKah	7-21-16
Juin Joe	607 Lake 87	Lawrenge		7-21-16
			1	

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Kelly McCon	1630 Alabama St	Lawrence/KS/6644	Lear McCay	7-21-16
	2014 Briarcliff Ln	Emporia, Ks (1080)	Derusi Dacey	7-21-16
J	1618 Inverses Dr.	Laurence KS 64W	, ,	7/21/16
TriStah. Kin	95 Arkahsas st.	Lawronce (5 agon	That	7/21/19
	2100 Massachuratis	St Lawrence KS 650	46 Chr Breinke	7/21/16
Ortando Robles	1401 E. Z4 thgg.	L and 8 core \$3 660;	16 Delly	7/21/16
TheaPerry	4516 Wimbledon Dr	Lawrence 186604	Theolog	7/21/10
Christine Pascot	97auslater St	OPKS UVAIZ	C. Pascal	7/21/14
Poul Colnon	836 Rhad Island St.	Lowere KS C6144		7/21/2016

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Bridget Carry		LAWRENCE KSions	WAS !	7/2/11/0
Michalle Minor	5000 Chinton PYWY Apt 1005	Lawrence 145 blootf	nine	7/21/16
ChesiAbacher	♣	Lawrence KS Choy	Min Flow	7/21/16
TJensen	9100 Delmar	P.V. K= 6625) TREAM	7/21/16
Kair Zepener	2411 Louisiana St	Consonce K5 Lework	DEPS-	7/21/14
Mirra Cabrer	2709 Crestline)	Lawrence KS (ol	0047 Morra Colo	7 7 21/1
Tenviser lange	4 933 Essex Ct.	Cowrence, KS Cotto	49 - 12/27	7/21/16/1
Maxwell Moore	1935 Cornby Mera	lawrence, us bles	ing the Ded	1/21//
Anna Patterson	1142 Phyde Stand St.	Lawrence, USy	MAD	7/21/16
· ·		- Joseph .		

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Rebecon Lopez	6133 Mission Rd	Fuerway K5620	2	7/21/16
Debbie Perez		Topeka.K.	D.P.	7/21/16
William Pers	2	TORIA KS	Mas	7.21.16
Dan Low	317 Boulder	Laurence, KS	Can Con	7-2-1-16
jenniser modarige	t to ilabama	lawrence KS	Plee.	7.21.16
Tigen Sievers	701 alxbany	`	\mathcal{G}	
Das Known	1030 SU Dortmorth	Topoto, K	(2) of Lineary	2/21/6
Stuart Bear	15 3116 w. 28th Circle	Lawrence, KS	Later V	7/2//6
Gerri McPhar	5 1955 E Survele 13		aci mother	7/21/1
,	- "-			

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Relicus Miran	4513 Harrard Rd.	Lawence, Lasort?	Kepen M.	7/21/16
Katiluntana	2741 NW 1912 TUV.	TOREKA/KS/lelelel	MIDIA	7/21/16
Deja Jackson	941 E 21st Terr	Consens/Kg/10000	Jan Jan	7/21/16
Posemory Murphy	Bux 764	Baldrin	Alexander	7/21/16
Jeff Moran	The state of the s	Lawroise KS 66049	Jeff OMony	7-21-16
lipa enan	9100 Delmarst.	Prairie Village	AR WAS	11
+ Jensey	9100 Delmar	P.V. KC 6620	The server	7/21/16
Paulo Eusebio	1034 Micsissippi St.	Lowrence, KS	Paulo Surbo	7/21/16
Hayley Bhatia	[Lawrence KS	1/152	7/21/14
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Mulyalison	4800 Jeffersin St.	KC, MG 64112	milkelles	4/21/16
Annelise Doly	4cen se Paulen Rd	Beryton, KS	A LA	7/2/1/1
Tann genras	11095 Palmer Ln	Olahe Kstelada	Jachno)	1/21/10
Stefan Sink	12535 Connell Or	Ore had Pack 16	JAN 2	7/21/16
Midrael Vannor	951 ArkanensSt	Lawareks		7/21/13
How ki Cheung	ase Kentruky St Apt A	Laurence ES 66044	Vale	717/16
Stephen Refaul	12108Wononga Ln	Cennood KS 66209	as fello	7/21/16
Karen D Gradin	Cele 34 Cardneton Ct	Bulce VA 22015	KD Smod	7/21/16
Skyler Rehm	2028 Massadosetts St	Carrere (S Godb	xport-	14/16

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Keep Guns Out of Lawrence's Public Buildings

In 2013, the Kansas Legislature passed a law requiring public building to allow people to bring guns into public buildings, unless certain security measures were put into place. The law allowed local governments four years to put those security measures into place. That exemption expires June 30, 2017. If Lawrence does not plan for and implement those security measures, any person – even someone with no training – will be able to bring a gun into our city buildings without those security measures – including the Lawrence Public Library. The best case scenario is that the Legislature will extend the exemption beyond next June, but we cannot count on that happening.

Name (printed)	Address	City/State/Zip	Signature	Date Signed
ANNERATTERSON	142 PHODE GAND	LAWRENCE KS 16604	7 Ame Datum	7/21/16
Amanda Girle	933 RNode Island	Lawrence, K5660		7/21/16
MEGANE NAJEMAN	941 Indiana	Lawrence bestowy	4 / Jun 1 / Jun	7/21/10
LUCYWILLIAMS	1117 PENNYLVAMA ST.	CANDENC, KS 6604	KreyRose	7/21
In Johney	2305 WZUTHST HIOZ	aurenalotor		7121
AlEjanda Alana	ZULI Perrer Blud. 1771107	Jenera, KS	Illella D	J 7/2(.
Sam Moore	2340 Murphy Dr.	Lawrence, KS	So More	7/21
Spodorbund	309 Cattlemon Trail	Lawrence KS:	Dande 5. level	7/21/16
Keesh in Shubb	2634 ELM	Endda KS	Subline S	7/21/16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Weady Pong	12034 S. Clinton	Ofathe 15	Windoppea	2-21-16
Tayletreiner	700 N Eagle Pass DT.	Lawrence 45 (elected	Way Chin	7/21/16
Anne Burgess	18641 Stairstop Rd	Lawrence Ks	aco Bey	7/21/16
Greg Menn	1540 Mass. st	Laware Glory		7-21-16
Jennifer Glesse	2726 Blue Sten Dr	Lowrence (2047)	Jupin Alm	7-21-16
٧٠ ٠٠٠	7/8 N. SN	lawere KS	Mark	7-21-16
Justin Mather	513 Hops Pl. Boulder (HyWV	Bookler City, NV	Anto Max	7-21-16
1	<u> </u>	lawrence US	Madely	7-21-16
Jeffrey Jospeso		Lawrence KS 66049	A	7-21-16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Michelle Ford	960 E. Cavendish Trail	O/athe, 55 6600	Michelle & for Q	7/21/16
Sabaa Anees	13106 Harres. Ct		35 Salacytus	7.21.16
ROLBLACK	1104 Connecticut	LANGENCE	Krs_	7-21-16
Ashlen Underwood	517 Bane Str. Dags	Harrisomille, MO	anly Inderwood	7/21/16
DAVID Thempson	7549 MISSOURI	Low Rence	add an	7/2/16
Susan Esau	1108 Stoneridge Dr	Lawrence Lawrence	Alberan	7/21/16
Jamilo Bette	Lawrence KS		Tout Paul	7/21/16
Morgan Cole	9324 W 5 15+ ST	merrian ks	Mel	7/21/14
	5888 Gentana Dr	Fay way, KJ 66205	MA	2/21/16

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Keep Guns Out of Lawrence's Public Buildings

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Cynthia Ann Burges	10908 Dehvan C+	KC K5 (and Or so	7-21.16
CONNEY BOOMAN	# 8502 Allman Rd	Lenexa/US/Clobze	Curry Downer	7-21-16
Dalton Allen	1724 Balkel Ave #2	Lawrence/K/blas		7-21-16
EMMA Johnson	en Robinson ct.	66049 Tanvone	encolor surser	7/21/16
Aryot Abuanga	1301 W JUNST APP K18	Lawrene 66046	At In	7/21/26
aghley Tenstro	0		Ceptery trooto	7/2/10
Nãi Vanz		Lawrence LS	Mark	7/21/16
Aby Ilardi	1311 Ranchero Dr	Law cence KS	Agentash	7/21/46
CHAD ONTANUA	2437 REOBUD LN APT G	LAWRENCE, KS		7/21/10

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Madoma Hollman	iil	66449	Madma Alla	7/21/16
Frin Liston		66047	Eun Lista	7/21/16
LESS NOSS BIN		66016	ARDE MUSEAUN	7/21/16
[Harris OFaxi		66047	Mar Of	7/21/16
RiAnne Wieder	N.	6100 HH	We auswedi	7/2/16
Ada Ramos V. Nikita Insuficion		66049	Ol.	7/11/16
Nikita Imafidon		06049	Miketer Im for	7/21/16
Theren Athur	M 1714 Mississipa. St.	66044	This	7/2/16
Emmalyn Beckin	gham	66044	CA	7/-1/10

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Sarah Vang	2310 W. 26th St.	Lawrence Ks being	Sac 5/57	7/21/16
Mother Tucker	414 E. 13+ St	Lawrence is 46444	Natt Of	7/2/1/1/4
Jan Shupert - Arc	de 2918 Stratford Ct.	Lawrence KS 6604	9 Julian	2/21/16
Hadley Schnie		Lawrence KS blooms	Hadry Schmel	7/21/16
Jane Kimb	le 707 Annua St	Comme (O 600	19 Jan Jun	7/21/10
DianemWeld	hous 3410 W15th Ta	Laurence KS 66	049 Stendy 12	leth 7/21/6
Kegan Smoth	619 E 841St APT 106	Lawrence Ideo44	Regar Smith	7/21/16
Heshalietae	T 1346 Lousiana 8+	Lawrence KS 6604;	A STATE	7-21-16
Paul Weighaux	PO Box, 147	Leonadullo ps	taul Herdhas	7-21-16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
ARON MUCI	4700 W. 27 # ST. Aprocc	LANGENCIE, 105,66047	Santhi	07/21/16
Mike Silvernan	1834 Vernont St	Law. KS 66044	me	7/21/11
Brondey Allong	1000 Staneover & Dr	Caucino 66044	BALL	7/2/16
Cothing July	1024 Prescott Dr. Lawverce	66049	algorithmile:	7/21/16
Duane Graber	11149 Cunech Rd	K.C. KS 66109	Wanish .	7-21-16
Randy Statler	112 Temblewood Dr	hawrence, 12566049	Kanly Stoth	21-14-7016
Chery Lawhorn	9802 Jupi (+	Mariden, 55665	12 Challanha	7-21-6
Jonna Douglas	11613 Oakmont	Overland Park KS	Togher	7-21-16
Martamil	nou Bregarridge	or Lawrings	15/ Max	21/2/16
	·	-	J 22 4 M	¥ *

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Name (printed)	Address	City/State/Zip	Signature	Date Signed	
Daniel Chang	2720 Pebble Lane	Laurence, KS, GOT,	Della	07-21-16	
Lisa Jamis	839 S. Creekside	Wichita KS 67230	Lea U Janin	7-21-16	
Holly Cynad	173915. Mariel	Garder, VS 1968	Aller	7-21-16	
Darlou Summer	n 5540 Caenen	Shawner Sb 62	le Daland Sum	werour 7-2	2-16
Mo	4003 S\$ 345	TOPSICA, 10	AM	7-22-16	
KathrynBallwin	1600 Kentucky St. #3	Lawrence, Ks	Athen Baldisin	7-21-16	
Tray Dunn	660 Voterray (rt.	LFK	Jacasty In	7-21-16	
Wang Hayith	1510 Crescentra	66049	1/2/	7/21/16	
Aaron Miller	JOCO Clinton pkwy apt, 1303	Lywfence, 66047	Jurus Tulles	7/21/14	

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
TERSTEWILL	7221 Jawsone	1 AND ENERGY KOLLOW	The state of the s	1/21/16
Kelly Boch	20203 W. 93 Edst.	Lenexz, KS	Hoursoch	4/2/16
Kota Esholman	1424 Bristol Terr #106	lawrence, KS	Kette Ehelman	7/21/1
Cipri Klutman	315 Providence Rd	Lawrence Ks.	april Duta	H21/16
Michelle Brady	230 Mours Hope Ct, April A1	Lawpener, BS bloody	Midell Beg	7/21/16
Jenna Ahuradian		Lawrence KS lolo 0491		7/21/16
Susan Freedman		Oveneund Park 15	/ γ	7-2-16
	1241 NEW JERSEY ST	LAWRENCE, KS	Telle W. Silmore	7/21/16
Gabrielle Holcond	920 E 14th	Lawrence, KS	as breelly bloom	7/21/16
	é		aptielly floor	1 1

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Carol Mullan	3008 W 03-4 Torree	Laurence Kis L604,	Carol Mulla	21 July 2016
Maryle Ameni	01	1 17	6047 Milaey Es	07/21/16
Beun Bunet	21608 Clr Cole Plum	Snumee 155	Beungmet	7/21/16
Appi markomb	925 SERVER Rd	El Deradu, US	Whi Hallad	7/21/14
Christne Mana!	SSYL Aminda St	Shawler ICS	JAM C	7/21/16
Sean Williams	711 Sunset Dr	Lawrence KS 66044	Stån Jelsthams	7/21/16
Liz Hazrex	1712 W. 20 54.	Lawrence Ks 66046	Li Valet	712416
chaman: Pere	4111 Harved Rd	han by, score		7/21/10
Sarg Stepp	3700 clinton Prky #1406	Lawrence KS 66045	88 pm	7/21
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
MaryFanceEl	13709 Quail Creek	Ct. Lawrence Ks 660	y Man + Sle	1 7-21-16
anniehi.	4			is somes 7/2/11
Ann Domingue	ez 1417 Pennsylvan	į.	ł	re 7/21/16
clare tontain	C14a00 Gringsull Driv	e lawrence to ch	on Colo	7/21/16
Trishmortou	it		Trish me	tax 7/2/16
Lisa Worf-We		1. Lowery Ks	Jalu	2/2/16
Trinity Dent		r. Laurence KS	CARTO	7/21/16
Linck Hoes	He Vogelson	1532 Rd Carre	ree 2 5, +	-Va 7/2/116
DAND CARTTA	2741 Tennessee St	Laurence 600	14	7/21/16

In 2013, the Kansas Legislature passed a law requiring public building to allow people to bring guns into public buildings, unless certain security measures were put into place. The law allowed local governments four years to put those security measures into place. That exemption expires June 30, 2017. If Lawrence does not plan for and implement those security measures, any person – even someone with no training – will be able to bring a gun into our city buildings without those security measures – including the Lawrence Public Library. The best case scenario is that the Legislature will extend the exemption beyond next June, but we cannot count on that happening.

Name (printed)	Address	City/State/Zip	Signature	Date Signed
$\Delta u \Delta$				a
4 bby huge	575. Elm St.	Q4man KS	Abbytuge	7/21/14
Mary Ray	16601 259th St.	win diester les	Mary LRay	7/21/2016
Claudia Olea	741 Tennossee St.	Lawrence Ki	4044 Dale	7/2016
JESSICA Mooney	1	Laurence CS	am	7/21/16
Nicole Ahn	5210 Eisenhower Pl	Lawrence KS	Micole aun	7/21/16
Ference Malostz	339 Warren Ave	Balture MO	tex MID	7/21/16
	5916 Simple Lane	Laurence 185	Gabriela Gervero	7/21/16
ARENAY	308 Eldrige LN	Laurence, LS	Ther	7/21/16
Genelle Denneny	910 W. 3rd St.	Lawrence K5	De Olemany	7/21/16
ı				1 1

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Jamie Rugn	1525 Janan Marke	Lauvence KS	Ganfergne	7/21/2016
Kathy Perkins	13332 Windst	Lawrence 15,04	111	7-21/16
Jeremy Young	642 Maine St.	Lawrence KS 66044	Varing Vlung	7-21-16
Tess Liebar	516 N 1280 Pd	Lawrence, 45 660	1 toldelin	7/21/16
Carolailmore	3424 Doval Court	Lawrence KS 66047	Carolfelune	7/21/16
Onna hausch	3900 West 13th 5+	Laurence Response	Om Pray	7/21/16
Tylee Hawell	528 Arrownead	Lawrence KS 6604	9 The panel	7/21/16
Darlene Kimon	1343 faxmuff	Lawrence 66049	Value Ti	7/21/10
Mary Strann	Sto7 Bruersock DR	Lawrerce, Leborta	Alrey &	7/21/14
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Pat Lorenz	820 April Rain Rd.	Lawrence B	tal Law	7-21-16
	LOCKTONE	Lawrencel (The	11 AUT Tell	21.87.20M
James Pool.	3504 W 74C+	Laurence, Ki	Janot Rec	7/2/2016
Drusselle Pool	3502W7th(+	Cawcene, hS	<u> </u>	7/21/2016
Sara Marin	2013 e 24th	Convenie Ks	Dara M	7/2/12014
Candace Boxne	1244 Opio St	Leurence, KS	and	7-21-14
Brenda Gladelter	73255W 330 St	TopikaKa	Sunda Glidfler	7-21-16
Gang Glader			lesse Old	25176
_ '	y 303 Lincoln St.	Lawrence KS	1,210	7/21/16
			- /)	1 1

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
ben Ruselyn	Lizy Mass Ct.	inwhence to Good	URS0	7.22.16
Endy aun	109 wellyton	Laurence us	Eur	7/21/6
Dan Proce	1771 Judiana	(arr-c, (1044	<u>C</u>	7/20/16
Noma Pin	e 1721 Indiana	Lawrence 6604	& Asimathie	
Joanny Lapley		Lawrence us 66049	Journ Lexey	7-21-16
Stephanie Slay	301 Edinbugh Rd er 2521 Allism Dr		Stephaniedour-	-7/21/16
Mona Jacons	2507 LOZY BYTOLLA	Laurencers	A	7/21/16
Erin Dubinsky	1122 Avalon Rel	Lawrence, L) 66044	on	7/21/16
MTW, Houshby	3200 W24 Terr	Course & 66 in	2 mgS	Flalic

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
PESTED WHENKS	ZEZ HARTSOUS PELMO	KAUSAS CITT, 40	from cie	7.21.14
Bailey Lierz	LAWTENCE, KS (LOCH9	Laurence KB	Bails	7-21-16
Jeannie McClure	1207 Tennessee Street Lawrence, KS LEGOLG	(00049)	Joan Millens	7-21-16
KIBK McCure	707 TENU LAWBAICE ES 66044	LAWRENCE LE GOOT/		7-21-16
MARY ANN RING	4505 Winged Foot Ct.	Lawrence KS 60049	Mayanking	7-21-16
Jeanette Deliphets	1455 Lawrence Ave 66049		(Delibres	7-21-16
Jill Anderson	108 Elander Laurence, KS		Aladema	7-21-16
Moredith Resolo	1140 E. 2100 Rd, bourse US	Endora 66025	Morolith Righ	7-21-16
Alen Word	1311 Spencer Dr	Lawrence 66044	Etha Ward	7-21-16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
(, Pessoni	1241 Delaware	LAW. KS 6004ct	Charlotter Resoni	July 21 16
Compley	1000 Brode Islands #2	7.00	Chermy	7.21.2014
Jade Slavin	1973 N SOO Rd	Baldwin City, LCS, 66116	flage Ham	7-21-2016
annreaney	964 w. 4+h 5+.	lelet 14	Chris Recurer	-7-21-16
Jane Herry	5009 WJeffines a	Lawrence 160047	June V Jeng	7-21-16
CarahPySzczyndo	Wile W. 72nd Terr	OP, XS 66204	Smallano	21 Jul 2016
LIST Glosman	825 Main St. Law KS	66044	Min Sy	7.21-16
Leigh Mitchell	2112 GoodeflCt.	66046 g	& Majilu	7-21-16
Sophia Branken	700 Illinois	66044	Eggha Brander	7-21-16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Barbara Mathe	ws 2048 N. 700 Rd	Endora Klda	5 BMathine	21 guly #
	1345 Delaware st.	Janvence \$ 66049	aua)	21 July Kg
· ·	1602 W Zloth Street	Laurence YS Ideal	Hubel Kraun	21 July 16
j '	SOF WILMA WAY	LANGUCC KS EGGG	Moral	218t Wy 6
1 9	1800 Learnard are	Laurence KS 66044		Rylly 12
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2001 W 18th St	Lawrence KS6604		21 July 16
Michele Transet	r 24220 verlock Circle	Lawrence KSld	77 Mu Sel Tronpet	2 1 July 16
	3011 Konglow Dr.	LAWMINE US 66049	Anhe hedrel	July 21, 16
Melania Piedra-Barra		Laurence, KS	Helero Relas	July 21/2016

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Joyaz Vizada		Lawrence	Joepe //equila	2-2/-16
JaneLive	1701 Bulkne	Lawrence 66044	Caralia	7-21-16
Linde Stomme	1621 New Hampshe	Tallicha	X.	7-21-16
Laurel Ladewic	318 E Monroc	Carnett 66032	Lamy Lagenis	7/21/16
Evan Cadresix	318 E MONTE	Garrett Lold 3	2/ide felourg	1-21-16
apthatast	842NYSt	Lawtonce 660K/	Cortifue track	7-21-16
Sam Hudsman	1105 New Jersey	Lawrence Colouty	Sour Hitelan	7/21/16
BUETEARSON	SVO CARKIR CIR	LAuruce (dorg	Dianto	7/21/16
Linnea Stylianin	202 Laurence Ave	Laurence Lelecto		76-114
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
1 8512 (avr4	NON 6 5010 Rd		July berry	XVIY-71-16
Megan Jones	1012 Emery Rd D13	Lawrenee KS 60044	Meganlows	7/21/16
Mary Creeny	v 3325 Cirlistane	Law 4404	d Qe	72116
Robin Joseph	818 Louist	Laurence, 6604	Robin's Joseph	7-21-16
Arlee Cassel	1801 Louisiana St	Courace Ks plant		7/21/18
Clanna Chapman	1221 Penniske 87	LFE, £5, 66044	Claham	7/21/16
Rap Harris	1512 & 15TH St.	Lawrence, KS 6604	Kon A	7/21/14
A CURRIT TONK	706 W. 25 th St.	Lawrence, 15 66046		7/21/16
Charlottel your	a 3/6 Homestead	Louissance, 6604		7-21/16

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Elitabeth tol	14134 W. 1424 Tarkee	Dahe FS (dade)	YUMEL	7/21/14
Barbare Sneeges	2912 Westdake Rd.	Lawrence 25 660+9	Barban Suego	7/21/16
	1313 Acorn 5t.	Eudaa, K5, 66025	Or dala	7/2//16
(pssicathell	1617 Now Hampshire St	Lawrence Ksward	Challell	7/21/16
Isanchate	1311 SPWCer Dt.	1 WHY CLYCHE	Mon Mr X	1/11/16
SUSANKRAUS	260% Ordered Law	Lawrence 66049	Sugar Leans	7-21-16
TIFFAMY Rosel	1310 Acoren st Edova	48 W60-5 (7/2/18/
EmmaReaner	4500 Overland Dr. Apt 1015	Lawrence KS		7/21/16
Andy Matshir	33601 1992 54.	Leavenwith, KI	pueto	7/2/16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Kelly Caloba	1 105 Wagn Wheelkel	Lawrence, KS	Hallyh a	7/2/16
Contr Smith	7-7	LAWrenceKS	Custo Smith	7/21/16
Marione Cole	1504 Mississippi St	11	Manaria Cole	7/21/16
Marganet Arnold			May al God	7/21/16
Monica Li	945 Massachusetts 5+ #38	Laurence, KS	Me	7/21/16
Sonal Soni	612 Arrownead Dr	Lawrence KS wood		7-21-16
lauren Britain	BUZH WIDTH St	lawreng 15 ble	gal Aliga Jo	7/2//14
Shelley Hickm	on 1731 Kont Class		The House	7-31-3014
1	2232 Vermont	Lawrence VS64	14 Kelly Car	7/21/14
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Diana Restrep	141a prospect Au	Kanjan		07/21/16
Shala Stevensa	1234 Prance AVE	Couvers 66044	Alele	7-21-(6
To Schon	14 Bowdown st	Busich,	post 1	7/21/16
Kistiana Filipor	65 Johnson Rd	Falmosth IME!	Wifi and Elect	
Ela Shupert	3113 WZTR Terr	Lawrence KS	FWa Stypes	7121/16
SHERYL BEIER	1281 N. 850 Rd.	Lawrence KS.	Shey Buer	7/21/16
Brech X X	ally Box105	Perry 1366	073 FRUGIT	? Healer 7/21/4
Erica Keller	1805 Cooldon Rain Dr.	6/2014	E. P.Kili	1/21/14
Day D. 36w	1727 w. 244h #9	164046	Dono Difran	7921116

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Beth Reib	er 1235 Kentucky	Lawrence KS	Betwhen	7/21/16
Sara Kyria	10, 2439 Losu DV	Laurean KS	Gother	7/21/10
Dry Tros		Laurene KS	Druk & hell	7/21/16
MANY JONE	5 4708 Moundniths	I Awriene	Day John	7/20/16
Mckenus Orti	2 1732 N Joann	Wichita, 453	morei of	7/21/2014
	3936 Rishap 57	Lewrenge 105 E6046	and the	7/21/2017
1 A 18 - 1 1 1	to 630 Walnut	favorence (5)	Zin Meuro	7/21/16
	ez 2613 Whitmore Dr.	Rowens KS 160	of mhisona	7/21/16
1 1	- 820 April Rain Al	Langelee, KS 6604		5/21/16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
MARCIA SUMMEISTER	2009 NEW HIRMPSHILE	LAWZENCE	Maria Silli	7/21/2016
Melinda Flohr	2032 Schaeffer Way	Emporia	- Molinda Floh	7/21/2016
Amy Vande Riet	512 Ono St	Lauvence 66049	(Survained	1/2014
Gurdyn Nawellell	25 114570984SK	Odlalouses Colollel	Charlesgates	7/24/14
BRETT S ALLEN	907 N. MICHICAN ST	CALRENCE KS	2/	7-21-16
Set Shin	26 Thempion St	Brunswick MF	MA	7/2/16
Joy Bunch	777 Sunset Dr	Lawrence, KS	Joy L. Bunch	7/21/16
Bonnie Reinal	4210 Teal Drive	Lawrencelks	Banni R	7(2)116
Sara Stoneigher	1014 E 27th St	Lawrence, KS	Lux Homeagles	7/21/16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Fally Afani	SOO Wigconsin	Lowrence 25 8154		7-21-16
· · · · · · · · · · · · · · · · · · ·	240 Earhart Cir	Laurence, KS	Hauxiegen)	7-21-16
MEREOTH JACOBS		CALLERAGE XS GLOVY 9	Mulattrecos	7/21/10
Madeenzie Cremen	ł	Loweree, KS 660-19	Maeley Man	7/21/16
Joyne Bowen	137(2 22m St	Pary KS 66073	Janes Sower	7/21/14
1 11 / 11 1	1772 N300 Kd	1 ~ 11 .	1 1 1 2 3 1 1 1 1 1 1 1 1 1	7/21/14
Tia Derritt-Withers		_ 1	The Dett 100	7/21/16
HOLLAN	THE THE MANNEY			, ,
Kim Heyl	420 Alakuma	Lauxence lobe	144 Km Teek	7/21/16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Lucie Costanta	1942 Stewrtte	Lawrence/KS/Weoul	Levi corlow	7/21/2016
Julian Milalebra	1942 Stewart aux			7/21/2016
Donald's C.	I'm W 1012 HT>12	Lawreng, KS 66 8446	Doelfor Mude wood	7/21/2016
Saron	AH HILTOP D.	Lowrence, KS 66044	San Br	7/21/16
Calkensloom	4505 Tunbem/I	Laurence KS	Colleen Edoon	7/2/16
Rosteniae	13301 Birch St. Apt 714	Overland Park 60		7/21/14
FRANCES ARNOLD	633 INDIANAST.	LAWRENCE KS.	Jeane Linoid	7/21/16
Isabel Carthar	741 Tennessee St	Lawrence KS doors	Siet	7/21/16
Nicole Berkley	\$13 W. 27 X SX	LFK	Mindo Beryley	7/24/14
		,		`

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Anna Bial	1108 somerset cir	Lawrence, KS	aml Bial	G7/21/16
Claire Walther	3114 W. 19th St.	Lawrence, KS	Clain Walter	7/21/14
Marian Wellow	3014 Tomakerik	L(je	Marian Weeber	7/21/16
DOUNA ACKLEY	1604 TROULU	i (Donay Da	7/2//16
	217 N 5th Street	Lawrence, KS	Jeny Jost J	7/21/2016
	929 PEXINS+	, ,	trois omere	<i>t 1</i>
	not 1105 Oak Tree D	11		7/21/16
Noch horzo	260 Moverick In	Lawrence, hs, 6604	I nun to	7/21/16
	633 Ph. Liana St.	Landrance KS GG 044	Moria E Aull	3/21/16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Amy Van Wagener	3806 Overland Dr.	Laurence, 186009	Am Voulvage	7-21-16
7,	608 W JAS	" G6044	Undazanie-	7-21-16
Muria Wiederman	-	Lawrence, KS Waso44	Margo Badenas	7-21-16
Hank Kimbrough		Laurence, KS	Agli	7/21/16
Corrine 400er - Mulny		EUDOVA, KS 66025	with my	7/11/16
Megan Spreer	3224 Shenwood Ct.	Lawrence, KS U6049	Magospur	7/21/16
i i	843 New York St.	Laurence, KS bleoff	minaranoull	7/21/14
	23949 Chicfial	n Rd. Lawrence 66	044 a Hulsey	1/21/16
LUDREW J SHEMPH	0 1815 MAINE ST	LAWRENCE, KS C6644	an Alme	7/21/2016

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Natalie Wolfe	900 Delauare St.	Lavance KS 66044	Whilolbe	7/21/16
Georgann Efinsla		Lauren-KS 66044	Garalatiki	7/21/16
Sophie Johnson		lawrence ks 66049	Sophia Johnson	7/21/14
Downer Gillians	230 Landon (t.	Lauvence KS 4604	Para	7/21/16
1		Lawrence, KS 66049		7/21/16
lane Mari	1:0 (3)	Lewyonce KStol	CAG Jana Met	0 7/21/11
Lori Lamps	3900 CM 8741	Lawareeksbl	OFF William	7/21/16
Catheriel brewi	4309 W. 13HLC+	Lauvence, KS 661	049 Catheric Elmen	7/21/16
JASON LICHTE	2633 M/SSINI	LAWRENCE, ES GERL	and the second	7/3//6
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
CONSTANCE WITH STON		LAMANCE, KS	CONSTANC/NHSTEN	19/21/2016
John Lagesse	2911 Soutet	" "	Adjun	19-21-16
brenda Shawlu		Lawrence KS	Breide Starly	7-21-16
any Double	770N 54	1 a Jene 15	kin toble-	7-21-16
Carolyn Grant	rd 834 Hwy 40	Lauvence KS	Wardy Vrade) 7/21/16
Erika Kirkland	1908 Alabama	te tr	C Q the	7/21/16
- f (A − 1 − − 5 − − − − − − − − − − − − − − −	2145 Warnend	Laurence, KS	4660	7/2/16
Tim Laughlin	619 E 8th SIAN 25	Lawrence, VS	A	7/21/10
Amu Bartle		1	MARSON	7/2//16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
ArikaSprecker	529 Ohio St	LAW. 145 Ce Ce 044	Aur	7-21-16
WendyWilliams	204 Eisenhower Apt V3	Lawrence icstel	1049 Mundy of the	= 7.21-14
Thy Schoolfer	360) Clipton Parhway 1020	1 Laurence, US	Clly X	7.21.16
Delores Dickerson		Eudora, Ks	Delvies Dickerson	7.21-16
Dhishila Parel	5245 Ovenand Br	Laurenceics	DE	7-21-16
Sodi Talley	3015 W 914 St	LAUIDIED KS	Molley	721-2010
Jakobi Johnson	1600 Huskell#188	Lawrence, KS	Tukobi Johnson	7-21-16
JOYCE E - BUR	15 3605 PANKVIEW CT	LAWRENCE)/5.	Loyy & Bun	7-21-16
	2033 N. 1200 Pol	Eudo39, K6	Coral Saguel	7-21-16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Ann Hossler	2014 Camelback Dr	Lawrence KS 66047	Q00	21 14472016
Debbie Wulf-W	alter 1105 Sturbridge Cir	Lawrence los 660;	49 Debra Watter	7-21-16
Emily Hoy	2713 Wildhower Dr.	Laurence KS/06043	m	7/21/16
Kevin Friend	2308 Hawthorn Dr.	Lawrence, VIGGOY	Mark the	7/21/16
Mate de Boer	914 W. 28 th St	barrence (65660K	11 B	7/21/16
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Lisakullian	450 729 Prescot Ct.	Lawrece KSWO M	husakel	7-21-16
Avery Mulalle	· "	jawyence KS	Front hulalo	27/21/14
Niwle Zoocker.	1027 Mississippi St Apt 3	Lawrence, les	This	7-21-16
	1926Ternessee	Lawrence, KG	4	7.21.16
	315 Mississippist.	Laurence, KS	Sandaledhi	7/21/16
_	268 Compta; So# A300	Lawrence KS	angela March	4-21-16
Kalena Nichel	326 Cal V/12 Dx	Lawrence 15	Zali IIII	7-21-16
Megan Coody	2100 Highter Wood Dr	Lawrence les	Melly Con	7-21-16
Kaysun Here	6346 Lakeside Lane	lawrence, vs	Kasan	7/21/14

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Address	City/State/Zip	Signature	Date Signed
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
BriAnwalter		LAWIENCE	Boan Will	7-21-16
Nancy WorlLma	n	LAWRENCE, 16 66	047 Nasajlloskina	7-21-16
Janice FRIEDMA	ev .	240 Rine 66649	Janus midnen	- 7/21/1G
Thelma Simon	5	lawrence	Thelma Suno.	no 7/21/2016
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Martha Gibbs	417 Alabama	Lawrence KS 66044	marcha Gibbs	7-21-16
Ron Costand	834 Henry	Law serve Koldowy		7-21-16
Alxis hough	1716 Dalement	Lawrence 45664	Meritaly	7-21-16
Krushi pe Wedel	700 Olio St.	Lawrence CS 66044	Tankanived	7-21-16
Michael Wilse	837 & 800 RD	i i	Mer	7-21-18
Alex Dey	29853 1inword BD	lawrence, KS	Dey.	7-21-16
Mary Frank	\$10 Kentruky	Learner	THE MAN	7/-21/16
Teri Chambers	2017 Belle Crost Dr	Lawrenu Kscaoyy	Term Chamber	7-21-14
EllieMadl	2327 murphyDr#7	Caurence KS 66046	Elimod	7-21-16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Clara Colp	2340 Murphy Dr	66046	(A) (S)	7/21
Ellelipar	3215 NoHinghamCt	66049	Ellna Julia	7/21
Alex Dagget		66049	AD	7/21
David Pro	12036 S. Clinfon	1,6061	Taulking	7/21
Kussmira Knoll	· · · · · · · · · · · · · · · · · · ·	66046		7/21
Amely Muye	315 OKKFIELD ANTB	04124	Markey	7/24
John Tralins	941 Windeden Dr	6604Co		7/2
Lign Smith	1900 Kentucky St. Apt. C	66046	Laun Mar	7/2
I know live	1310 N 1294 Taray	66101	fall this	7/21
Sharon Soul	e 1700 University	Dr 66044	MUSNI	7/21

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Name (printed)	Address SELM	City/State/Zip 674/90 MY/Nev State	Signature	Date Signed
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Hice Kelsey	1545 R'hode Islandst	Lawren Ce, KS	Oliverelyey	7-21-16
Manta Wenzy	367 Word Lun Mnr	Lawrence Es.	Martha Means	
Le Doe	1231 Prive Are	٤٠ ' .	1/0	7-21-16
Melissa Morton	416 Cartheman Ct	Lawrence is	Mexenny	7/2//16
		Lowrence Ks 660	11	7-21-16
Miriah Essman	3506 Tomahack Dr.	Lawrence S660	492/MELL	7-21-16
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Deanh Ovorch	1607 Footing	Lauraet KS	A A A	2-21-16

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Lopesta Tawde	1900 Marsachusets st.	Lawrence KS GEOVE	Maries	07/21/16
	4701 Haward Bd	Laurence KS 660	Ta Bul	07/21/16
Veder lasts.		Lawrence KS Look	ì	67/21/16
A 1	309 Cattleman Fail			7-21-16
Janet Fitzbera		Lawrence KS	1/ / /! - a . /	
	1930 confriside Ln	Lawrence, 108	Myselle	7-21-16
	315 Garheld 3	kcmo 44124	An	
	4411 nimbledon de	66047	In Indiana	7-21-16
Nittle Routa	200 Branche	(ele04(0)	ATTE	7-21-16
KALLIMGURE	617 E877 #312	LAWRENCE, KS.	Kathinathine	7/21/16
12RISTINA HOL	DER 2701 WESTDALE	LAWRENCE, K	s kust-dold	7/21/16
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Name (printed)	Address NG 1033 College B247	City/State/Zip	Signature Martia Do	Date Signed
SY AKTHA DOWNI	NG 1033 College DZ47	LAWRENCER	Martia Do	- 07/2/116
1	1317 KENTUCKY #3B	LAWRENCE KS	gannenican	7-21-16
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1	3817 Tiffang Dr.	Lawrence, les	Canda Hala	
	1903 Melholland Rd.	LAWRENCE, KS	With 1	7-21-16
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
MARU BECHING HAM	(2]) perusilvania st	laurace US	pas -	7-21-16
Michael J. Dorcey	2014 Brisch & Lane	Emporia KS 66801	indial 1-Darray	7/21/16
Richafforda-	101 Timessee	Carrence ks	PH	9-21-16
Many	1401 6.240 St. C-5	Carrence, CS	MSM	7-21-16
Wando Bla	1401624 AST C-5	Carvin KS	Quido Mos	7-21-16
Liliang Bernal	4000 Bab Billings Pkwy	Lawrence	1.500	7216
Louise Smith	1343 Haskell Age	lawrena Ks	ENE HEWER	7-21-16
LisaMarie Bank	1308 Mass	Law Tence KS	Luman Bre	7-2176
		Lawrence (55 66046		7-2(-16
Amy Waldrord	1020 Moundridge Dr.	Lawrence, KS 6604	9 grustalden	7/21/16

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Name (printed)	Address 3801 W. 14th /W.	City/State/Zip LUNY LYCE, KS 1818040	Signature Blain	Date Signed
Sardy Moor	eus É usa fei	Caurence 15 6647	Smarger	7/21/16
Barbara Russell	1113 Samerset Ct.	Caurena KS 66049	Balon Ren	7/21/16
Sara Canoley	3520 W 22nd St D7	Lawrence KS 66047		7-21-16
Joanie Farke	100	Law. K. 66049	China Sta	7-21-16
Chis Ehti	1900 Wennet St.	Lawren KS 66041	de e	7/21/16
	1900 Vermont St.	Lawrence KS 66041	Sonh Elit	7/21/16
Michele Visiola Ro	1900 Vermont St. 3004 w 1947 815 Court Lawrence	ks 66047	1117 Ag 200 Roses	7/21/16
MARYHOLT	603TENN.ST	66044	mary Holt	7/21/10
Jy Zullon	358 woodland	66049	T37	7/21/14

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Name (printed)	Address ,	City/State/Zip	Signature	Date Signed,
Many Lovelena	Address 147 N L500 RJ	Lawrence KS 660	y Macy Xovely	17/21/16
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Marsance	Ht 149 N 718 Rd	, Darmela	MA MA	7 9.21.18
Allison Reed	691 NISBO RD	Lawrence KS	allison	7-21-6
Anne Gurss	342 Lincoln		Anne M Suiss	7-21-16
Etrabeh Low	330/ Mainter Drive		Chyller Wer	7-21-16
Dand Vea	503 Wilma Way		Doubles	7-21-16
!	741 New Jersey	LAWRENCE KS	John Flore	7-21-2016
	2750 Z Ave	Burlich KS C	Mills Karrelow	7-21-2016
	1100 Tennessle	Laurence KS	, , , ,	7-21-10
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Name (printed), Crystal Harris	Address	City/State/Zip Baldwin Uty KS	Signature Crystal L. Hallis	Date Signed 7/2i/16
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allison ramales	j i		1 A	7/21/16
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·	ell 1214 Enn	hawrence (C)	Link Burdhell	7/21/16
Jennifer Fosk		Lauvence, KS	2	7/21/16
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Cella Breth h	494 Broadnious Dr	Lawrence K5	Um peroch	7/21/16
Morgan Ross	1006 Tennessee Stapes	Lawrence, KS	mille	7/21/16
Elsie Mealiff	2347 Muphy Dr. April 2	Lawrence KS	Elia Mertill	7/21/16
Enily Connach	3422 WIOM PI	Lauvence KS	Em Maiff	7/2/114

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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Joshua Day's	841 Na Val	Lantproise, KS	S	7-21-18
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Name (printed)	Address	City/State/Zip	Signature	Date Signed
Brett Steinbink	904 - 01117	Cowere KS 66044	1111111	7/21/16
DEN STINGIAN	904 Every Rd. Apt. 2		WH BU	
McKenzie Dever	1124 Oak Trec Onle	Lawrena 105 66049	My Dr	7/21/16
Kay Galbraith	1230 SW College	Topeka Ksbldog	Lay Selland	7/21/16
Kira Alexander	1020 N. Znd St. Box 83	Atchison, KS. 66002		7-21-2016
CYNTHIA SIEW	1321 Hampton Ct. Apt 104	Lawrence KS 66049	Cuttille.	7/21/2016
Les Loving	3029 Carrington Ln	Lawrence KS	38	7/21/2016
Find Zen	3701 W. 76+25	<i>V</i> .	l ~	7/21/16
Corlaitingraham	3701 W. 76+2 St. 7605 Mihaux Poplyso	608	Anglo	7/2/1
_	3410 W. 10th Jen	Lawrens 60049	Mur	7/21/10

Bobbie Walthall

From: Michael Kelly <job4mike6@aol.com>
Sent: Monday, August 01, 2016 4:49 PM

To: Mike Amyx; Leslie Soden; Stuart Boley; Matthew Herbert; Lisa Larsen; Tom Markus;

Bobbie Walthall; Casey Toomay; Bryan Kidney; Melinda

Cc: Chad Lawhorn; nwentling@ljworld.com; Jenn Hethcoat

Subject: Fwd: 2017 City Budget: A Portion of DCCCA Inc. Funding Allocation Should Be

Reduced

City Leaders-

I have been informed by Bobbie Walthall the original subject e-mail I sent did not transmit correctly. I have removed the IRS Form 990 attachment which is fully posted on the city web site. My argumentation for the reduction in funding to DCCCA, Inc. is shown below. I apologize for any confusion. Special thanks go to Ms. Walthall and Melinda Henderson for helping me to get this posted correctly.

Thank you,

Mike Kelly

Begin forwarded message:

From: Michael Kelly <job4mike6@aol.com>

Subject: 2017 City Budget: A Portion of DCCCA Inc. Funding Allocation Should Be Reduced

Date: July 31, 2016 at 1:11:03 PM CDT

To: mamyx@lawrenceks.org, lsoden@lawrenceks.org, sboley@lawrenceks.org, matthewjherbert@gmail.com, llarsen@lawrenceks.org, <a href="mailto:tmailto:

Cc: Chad Lawhorn <<u>clawhorn@ljworld.com</u>>, <u>nwentling@ljworld.com</u>, Jenn Hethcoat

<h.jenn2@gmail.com>

City Leaders-

While reviewing the subject budget document I noticed the requests for DCCCA Inc. substance abuse treatment services. I did some personal research and found their IRS Form 990 Tax Return (attached) for the 2014 fiscal year which ended June 30, 2015.

Several items on the return, in my opinion, were quite lavish for a community non-profit entity. DCCCA's CEO compensation (split between the current CEO and former CEO) totaled \$591,218. For comparison, by law, the President of the United States has a \$400,000 salary and total compensation of \$569,000 per year. DCCCA's reported total assets (Form 990 Line 20) are \$48.5 million. Their investment management fees (Part IX, line 11f) reported to the IRS were \$138,630. Their publicly traded securities (Part X line 11) were reported to the IRS in the amount of \$34,800,130.

Between two projects, DCCCA Inc. asked the Special Alcohol Fund to support 2.50 FTE substance abuse counselors, peer support workers and 30% for their fringe benefits. DCCCA also requested 0.13 FTE of supervisory wages and 30% for fringe benefits. These requests summed to \$130,714.

I suggest that a non-profit organization with such a monumentally positive balance sheet can fund its own supervision costs and fringe benefit costs without city special alcohol fund support.

I suggest the City Commission reallocate all of the requested funds for DCCCA fringe benefits and the 0.13 FTE supervisor (some \$37,114 by my calculations.) These funds can be used to reduce the increased mill levy proposal, reduce utility fees, or fill other social service agency fund requests that were unfulfilled in the city manager's budget request.

Lavish overspending on executive compensation is an affront to the non-profit, tax-exempt status and community service orientation of any local social service agency. Taxpayer dollars should not support such excesses. I urge you to reconsider the DCCCA Inc. requests for funds and fund only those direct support labor hours in their applications.

Further, I recommend the city leaders direct the Social Service Funding Advisory Board to conduct additional due diligence for 2018 and beyond, including detailed IRS Form 990 review, to preclude such improprieties in the future.

Thank you for listening and for all of your hard work on the budget.

Respectfully submitted,

Mike Kelly 1123 Brynwood Court Lawrence KS

Bobbie Walthall

To: Michael Kelly

Subject: RE: 2017 City Budget: A Portion of DCCCA Inc. Funding Allocation Should Be Reduced

From: Michael Kelly [mailto:job4mike6@aol.com]

Sent: Sunday, July 31, 2016 1:11 PM

To: Mike Amyx; Leslie Soden; Stuart Boley; Matthew Herbert; Lisa Larsen; Tom Markus; Bobbie Walthall; Casey Toomay;

Bryan Kidney

Cc: Chad Lawhorn; nwentling@ljworld.com; Jenn Hethcoat

Subject: 2017 City Budget: A Portion of DCCCA Inc. Funding Allocation Should Be Reduced

City Leaders-

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Return of Organization Exempt From Income Tax

OMB No 1545-0047

DLN: 93493035013476

Form **990**

Department of the Treasury

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

Internal R	Revenue Servic	e Filliotiliation about	Form 990 and its instructions is at b	<u>vww.1k3.gov</u>	<u>/10/11/990</u>	Inspection
A For	the 2014	calendar year, or tax year beginning	g 07-01-2014 , and ending 06-30-20	15		
Addr	ck if applica ress change	DCCCA INC			D Employer 23-7368	identification number
	ne change	Doing business as				
•	al return ı	Number and street (or P O box if m	nail is not delivered to street address) Room/	suite	E Telephone	number
Final return/terminated		2242 CLINITON DADICINAV			(785)84	1-4138
	ended return lication pend	LAWRENCE, KS 660473624	ntry, and ZIP or foreign postal code		G Gross rece	ipts \$ 31,889,993
		F Name and address of prir	ncipal officer		this a group re	
		LORI ALVARADO 3312 CLINTON PARKWAY		SI	ubordinates?	Γ Yes Γ No
		LAWRENCE, KS 66047362	4		re all subordinat	tes
 I Tax-	-exempt sta		Insert no) 4947(a)(1) or 527		cluded? [:] "No," attach a l	ist (see instructions)
		DCCCA ORG			Froup exemption	
		ation Corporation Trust Associatio	C Osh or b	1, ',		1
Par		ummary	n Other 📭	L Year	of formation 1974	M State of legal domicile KS
Governance	HOM DCC	IES, SERVICES PLACING CHILDRI	VENTION AND TREATMENT SERVI EN INTO FOSTER HOMES, AND TR TH LOCAL, STATE, AND NATIONAL CES WHEN NEEDED	AFFIC SAFE	TY EDUCATIO	N AND RESOURCES
త త	2 Chec	k this box দ if the organization di	scontinued its operations or dispose	d of more tha	an 25% of its ne	t assets
Activities &			ing body (Part VI, line 1a)			3 14
<u> </u>		· -	of the governing body (Part VI, line 1	•		4 14
"			calendar year 2014 (Part V, line 2a) ecessary)		-	5 329 6 1!
			art VIII, column (C), line 12		`	7a (
	b Net ւ	unrelated business taxable income f	rom Form 990-T, line 34			7b (
					Prior Year	Current Year
<u>.</u>			ne 1h)		15,259,404	<u> </u>
Rayenue			ne 2g)		1,879,412	
윤		her revenue (Part VIII, column (A),			86,05	
			(must equal Part VIII, column (A), I	ine	18,733,263	21,679,855
)	IX, column (A), lines 1–3)			0 0
			X, column (A), line 4)		(0
		laries, other compensation, employed 10)	ee benefits (Part IX, column (A), lines	5	9,581,60	9,062,811
Expenses		ofessional fundraising fees (Part IX, column (A), line 11e)			(
<u>₹</u>	b Tot	al fundraising expenses (Part IX, column (D), line 25) ▶ 0			
_	17 Ot	her expenses (Part IX, column (A),	er expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			10,059,132
	18 To	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)			18,645,53	
	19 Re	venue less expenses Subtract line	18 from line 12		87,728	2,557,912
විස් විරි <u>ලි</u>				Бедіп	ning of Current Year	End of Year
Net Assets or Fund Balances					47,306,84	<u> </u>
end Page	Total liabilities (Part X, line 26)			1,953,028		
Pari		it assets or fund balances Subtract	iiiie Z1 from line ZU		45,353,81!	5 46,662,457
Under my kno	penalties owledge a er has an	s of perjury, I declare that I have example of the structure of the struct	amined this return, including accomp nplete Declaration of preparer (other) is based on all	
Sign	186.	****** Signature of officer			2016-01-28 Date	
Here		KERYE J JACKSON CHIEF FINANCIAL OFFICI Type or print name and title	ER			
		Print/Type preparer's name CHERYL G HAYWARD	Preparer's signature CHERYL G HAYWARD	Date	Check If PT PO	TIN 00016097
Paid		Firm's name FBERBERICH TRAHAN 8	. CO PA		Firm's EIN F 48-10	
•	oarer Only	Firm's address ► 3630 SW BURLINGAME	ROAD		Phone no (785) 23	34-3427

TOPEKA, KS 666112050

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

art IV	Checklist of	Required	Schedules

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
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		No
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	Yes	
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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 debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
L1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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	Yes	
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		No
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		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
l4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	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	14b		No
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L6	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	16		No
L7	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		No
L8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
L9	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20h		

Par	t IV Checklist of Required Schedules (continued)			
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		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		No
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		No
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		No
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 of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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			1
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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		No
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		No
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		No
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	Yes	

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			
4-	Estantla number resorted in Day 2 of Farm 1000 Finter 0 of materializable 1.4-1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 69 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
·	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1	,,	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
	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		No
ь	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)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
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).		1	
	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		No
	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?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
g	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		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	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 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans	-		
	Enter the amount of reserves on hand	 		NI .
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No
D	THE SEAS OF THE CALEDON AND TO THE PORT THESE DAYMENTS (IT "NO " DEOVICE AN EXPLANATION IN SCHEOUIE ()	. 14n		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection 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			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	H	165	
	more members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Yes	
	ın Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		No
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		
Se	organization's exempt status with respect to such arrangements?	16b		
Se 17		16b		
	organization's exempt status with respect to such arrangements?	16b		
17 18	organization's exempt status with respect to such arrangements?	16b		

3312 CLINTON PARKWAY LAWRENCE, KS 660473624 (785)841-4138

20

►KERYE JACKSON

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

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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, or 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(4)	(0)						(5)	(F)	(5)	
(A) Name and Title	(B) Average				not	chec		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list	more than one box, unless person is both an officer						compensation from the	compensation from related organizations	amount of other
	any hours		and a director/trustee)					organızatıon		compensation
	for related organizations	오늘	(5 - 1		줎	马盖	규	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization
	below	뚩충	stiti	Office	9	툸	Former	MISC)	11130)	and related
	dotted line)	중호	IΦI		Key employee	80	¥			organizations
		₹) let		ψ	3				
		Individual trustee or director	Institutional Truste		"	Highest compensat employee				
		_	99)			ř ř ř				
(1) HOWARD EBMEIER PHD	0 30									
BOARD MEMBER		X						0	0	0
(2) CHRIS CALDWELL	0 40							_	_	
SECRETARY		X		X				0	0	0
(3) HENRY BUCK MD	0 40							0	0	0
BOARD MEMBER		Х						U	0	0
(4) MORRIS D FAIMAN PHD	0 20	×						0	0	0
BOARD MEMBER					_			Ŭ.		
(5) DOROTHY DEVLIN LMSW	0 40	l x						0	0	0
BOARD MEMBER										
(6) DEAN BEVAN PHD	0 40	x						0	0	0
BOARD MEMBER (7) CHUCK HEATH	0 50									
		x						0	0	0
BOARD MEMBER (8) RODNEY BISHOP MD	0 30									
BOARD MEMBER		×						0	0	0
(9) KRYSTAL BUTELL	1 00									
BOARD MEMBER		X						0	0	0
(10) MICHEL BONHAM	0 20	х						0	0	0
BOARD MEMBER								0	0	
(11) SHEILA VANDERTUIG	0 10	×						0	0	0
BOARD MEMBER									_	
(12) PAT SLABAUGH	0 40	×		х				0	0	0
PRESIDENT (13) NIKKI WHITE	0.30				_					
(13) NIKKI WHITE	0 30	×		х				0	0	0
VICE PRESIDENT (14) JEFF DAVIS	0 50									
		х		х				0	0	0
TREASURER	l					l				Form 990 (2014)
										1 0/111 990 (2014)

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				k, unle n office	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) KERYE JACKSON CHIEF FINANCIAL OFFICER	47 20			х				121,689	0	6,47
(16) LORI ALVARADO CHIEF EXECUTIVE OFFICER	42 10			х				149,153	0	9,43
(17) COLLEEN PEDERSON DIR STRATEGIC INITIATIVES	41 80					х		116,627	0	15,699
(18) BRUCE BEALE CHIEF EXECUTIVE OFFICER, RETIRED	38 90						х	383,333	0	49,29
(19) GEORGE HECKMAN CHIEF OPERATIONS OFFICER, FORMER	22 60						х	163,033	0	57:

1b	Sub-Total	-			
c	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	•	933,835	0	81,477

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►5

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	
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 individual	1	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for	4	res	
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

_			
Section	R	Independent Contract	Ors

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

(A) Name and business address	(B) 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

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f
Program Service Revenue	2aa b c d e f
venue	9 3 4 5 6a b c d 7a b
Other Re	b c 9a b c 10a
	11a b c d

Form 99								Page 9
Part V	4++4	Statement of Check if Schedu	f Revenue ule O contains a respon	se or note to any lin	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
হ হ	1a	Federated camp	paigns 1a	7,833				
rani	Ь	Membership du	es 1b					
الَّا قَ	c	Fundraising eve	ents 1c					
iffs ar.	d	Related organiz	ations 1d					
s, G mil	e	Government grants	s (contributions) 1e	16,990,781				
utions er Si	f	All other contribution	ons, gifts, grants, and 1f ot included above	141,451				
Contributions, Gifts, Grants and Other Similar Amounts	g	1a-1f \$	ons included in lines	19,251		j		j
	h	Total. Add lines	s 1 a - 1 f	▶	17,140,065			
ā				Business Code				
Ti ey	2a	MEDICAID		624100	1,749,594	1,749,594		
Program Serwce Revenue	b	CLIENT CO-PAY AN	ID 3RD PARTY PAYME	621400	186,098	186,098		
	C							
Ser	d							
E	e							
į,	f	All other progra	ım service revenue					
	g	Total. Add lines			1,935,692			
	3		ome (including dividend ar amounts)		845,350			845,350
	4		tment of tax-exempt bond p					
	5	Royalties		🕨 [
			(ı) Real	(11) Personal				
	6a	Gross rents	44,850					
	Ь	Less rental expenses	107,678					
	c	Rental income or (loss)	-62,828					
	d	Net rental incor	me or (loss)		-62,828			-62,828
	_	Gross amount	(ı) Securities	(II) Other				
	7a	from sales of assets other than inventory	11,647,427	201,231				
	ь	Less cost or other basis and	9,923,838	178,622				
		sales expenses	· ·	22,609				
	c d	Gain or (loss)	1,723,589 s)		1,746,198			1,746,198
	8a	Gross income fr	rom fundraising	· · · · · •	=,,===			2,113,223
Other Revenue		sof contributions See Part IV, lin	reported on line 1c)					
눑			a					
Ě	Ь		penses b					
0	C 03		loss) from fundraising e	vents P				
	9a	See Part IV, lin	rom gaming activities e 19 a					
	ь	Less direct exp	penses b					
	С		loss) from gaming activ	ities				
	10a	Gross sales of						
		returns and allo	a					
	ь	Less cost of go	ļ-					
	c		ـــ loss) from sales of ınve	ntory 🛌				
		Miscellaneous	s Revenue	Business Code				
	11a	TRAINING		900099	52,166	52,166		
	ь	MISCELLANEO	ous	900099	23,212	23,212		
	С							
	d	All other revenu	L					
	е	Total. Add lines	s 11a-11d	▶ [75,378			
	12	Total revenue.	See Instructions		21,679,855	2,011,070	(2,528,720

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must comp

section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations mu	st complete column (A)
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	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this				
Do no	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic 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, trustees, and key employees	294,160		294,160	
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	7,158,104	6,365,933	792,171	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	72,989	53,111	19,878	
9	Other employee benefits	875,337	847,940	27,397	
10	Payroll taxes	662,221	580,191	82,030	
11	Fees for services (non-employees)	·	·	,	
а	Management				
b	Legal	9,769	8,054	1,715	
c	Accounting	32,280	20,400	11,880	
d	Lobbying	9,000	20,100	9,000	
e	Professional fundraising services See Part IV, line 17	3,000		3,000	
f	Investment management fees	138,630		138,630	
g g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	275,481	232,763	,	
12	Advertising and promotion	46,817	40,740	 	
13	Office expenses	448,731	402,990	 	
14	Information technology	241,799	203,686	38,113	
		241,799	203,080	30,113	
15 16	Royalties	647.340	540.407	67.042	
16 17	Occupancy	617,249	549,407	67,842	
17 18	Payments of travel or entertainment expenses for any federal,	335,363	316,723	18,640	
19	state, or local public officials	114.007	106 919	7 190	
20	Interest	114,007	106,818	7,189	
	Payments to affiliates				
21	,	451 720	226 222	115 415	
22	Depreciation, depletion, and amortization	451,738	336,323	115,415	
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 35. Solumn (A) amount list line 34e expenses on Schodule O.)	105,448	89,927	15,521	
а	of line 25, column (A) amount, list line 24e expenses on Schedule O) CHILD PLACING- FAMILY A	6,040,624	6,040,624		
a b	DIRECT IMPACT AND PROG	738,062	705,362	32,700	
C	FOOD	467,007	467,007	32,700	
d	MISCELLANEOUS	23,127	23,281	-154	
u e	All other expenses	-36,000	-36,000	-134	
	Total functional expenses. Add lines 1 through 24e	,	· · · · · ·	1 766 663	
25	<u> </u>	19,121,943	17,355,280	1,766,663	0
26	Joint costs. Complete this line only if the 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)				

Form 990 (2014)

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X		_	
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	-6,983	1	-11,484
	2	Savings and temporary cash investments	2,268,167	2	2,402,655
	3	Pledges and grants receivable, net	1,475,019	3	1,821,800
	4	Accounts receivable, net	129,133	4	123,993
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	,	_	
22	6	Loans and other receivables from other disqualified persons (as defined under sectio $4958(f)(1)$), 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		5	
ē.				6	
Assets	7	Notes and loans receivable, net	101,521	7	49,122
-	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	156,744	9	181,935
	10a	Part VI of Schedule D Land, buildings, and equipment cost or other basis Complete 10a 15,288,78	96		
	b	Less accumulated depreciation	9,296,665	10 c	8,932,231
	11	Investments—publicly traded securities	33,622,759	11	34,800,130
	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	263,818	15	214,548
	16	Total assets. Add lines 1 through 15 (must equal line 34)	47,306,843	16	48,514,930
	17	Accounts payable and accrued expenses	1,917,467	17	1,795,144
	18	Grants payable		18	
	19	Deferred revenue	35,561	19	57,329
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	
=	23	Secured mortgages and notes payable to unrelated third parties		23	
	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 of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,953,028	26	1,852,473
<u>ه</u>	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete	1,555,525		1,002,110
ĕ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	45,287,003	27	46,591,595
<u>ಣ</u>			66,812	28	70,862
Fund Balance	28	Temporarily restricted net assets	00,012	29	70,002
	29	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and		29	
9	30	complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	45,353,815	33	46,662,457
Net	34	Total liabilities and net assets/fund balances	47,306,843		48,514,930
	J-4	rotal habilities and het assets/juliu balances	47,300,843	34	40,514,930

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				.
1	Total revenue (must equal Part VIII, column (A), line 12)	1		21,6	579,855
2	Total expenses (must equal Part IX, column (A), line 25)	2		191	121,943
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		2,5	557,912
4	Net assets of fulld balances at beginning of year (must equal Part X, fille 33, column (A))	4		45,3	353,815
5	Net unrealized gains (losses) on investments	5		-1.2	246,197
6	Donated services and use of facilities				,
7	Thursday and account account and account accou	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	9			-3,073
10	column (B))	10		46,6	562,457
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 23-7368880 **Name:** DCCCA INC

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 176,238 including grants of \$) (Revenue \$ 4,392)

DCCCA, INC 'S REMAINING PROGRAMS SERVE OUR MISSION TO IMPROVE OUR CLIENTS' QUALITY OF LIFE AND ENSURE THE SAFETY AND WELL-BEING OF KANSAS CHILDREN THROUGH YOUTH RESIDENTIAL SERVICES, JUVENILE JUSTICE FOSTER CARE AND COMMUNITY AND FAMILY SERVICES EACH AND EVERY ONE OF DCCCA'S PROGRAMS HAS A COMMITMENT TO THEIR CLIENTS TO PROVIDE THE BEST SERVICE POSSIBLE IN FY15 THIS WAS EFFECTIVELY PROVEN WHEN DCCCA RECEIVED ACCREDITATION FROM THE COUNCIL ON ACCREDITATION WITH ZERO FINDINGS FOR EVERY PROGRAM WITHIN THE ORGANIZATION

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493035013476

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2011

Open to Public Inspection

Name of the organization Employer identification number DCCCA INC 23-7368880 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 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 state 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i)Name of supported (ii) EIN (iv) Is the organization (v) A mount of (vi) A mount of (iii) Type of organization organization listed in your governing monetary support other support (see (described on lines document? (see instructions) instructions) 1-9 above or IRC section (see instructions)) Yes No

instructions

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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 12,923,439 11,103,624 11,107,110 15,259,404 17,140,065 67,533,642 not include any "unusual grants ") 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 12,923,439 11,103,624 11,107,110 15,259,404 17,140,065 67,533,642 Total. Add lines 1 through 3 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) Public support. Subtract line 5 67,533,642 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2011 (c) 2012 (e) 2014 (f) Total (a) 2010 (d) 2013 beginning in) 🟲 12,923,439 11,103,624 11,107,110 15,259,404 Amounts from line 4 17,140,065 67,533,642 Gross income from interest, dividends, payments received on 877,950 securities loans, rents, royalties 1,048,270 1,661,938 1,532,960 2,528,720 7,649,838 and income from similar sources 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 82,700 150,064 58,778 61,487 75,378 428,407 capital assets (Explain in Part VI) 11 Total support Add lines 7 75,611,887 through 10 12 Gross receipts from related activities, etc (see instructions) 33,527,371 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) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 89 320 % Public support percentage for 2013 Schedule A, Part II, line 14 15 90 280 % 16a 33 1/3% support test-2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test -2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 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 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) 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 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, 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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	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.	1		
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) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
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.	3b		
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.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ 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.	4c		
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).	5a		
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?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) 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 .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
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).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to 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 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 organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a 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		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization evergice a substantial degree of direction over the policies, programs and activities of each			l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the orga	nızatıon satısfıed t	he Integral P	art Test as a	qualifying trus	st on Nov	20,1970	See instructions. Al	l other
Гур	e I	II non-functionally inte	egrated supporting	organizations	s must comple	ete Sections A	through	E		

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
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 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		

	Section 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)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
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		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

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).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493035013476

23-7368880

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

DCCCA INC

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number**

2	Provide a description of the or Political expenditures	ganızatıon's dırect and ındırect pol	litical campaign ac	tivities in Part IV	L	.		
	Volunteer hours					\$ <u></u>		
ī	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).				
	Enter the amount of any excis	e tax incurred by the organization	under section 495	5	Þ	\$ <u></u>		
	Enter the amount of any excis	e tax incurred by organization man	agers under sectio	n 4955	•	\$		
	If the organization incurred a s	section 4955 tax, did it file Form 4	720 for this year?				☐ Yes	┌ No
a	Was a correction made?						┌ Yes	┌ No
b	If "Yes," describe in Part IV							
T	t I-C Complete if the or	ganization is exempt unde	er section 501(c), except section	on 50)1(c)(3).	
	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activities	►	\$		
	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organization	s for section 527	F	\$_		
	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b	•	¢		
	Did the filing organization file I	Form 1120-POL for this year?				–	┌ Yes	Г
	·	ns received that were promptly and	a ancoci, uciivelet	i to a ocparate poiltie	- · · · · · · · · · · · · · · · · · · ·		, Jucii	u
		political action committee (PAC)	·	1				of politic
	separate segregated fund or a	(b) Address	(c) EIN	(d) A mount paid filing organization	from on's	(e)	n Part IV A mount of the control of	s receive otly and vered to political of If none
			·	(d) A mount paid filing organization	from on's	(e)	Amount on the stributions and promprectly deligons separate programmers and the separate programmers.	s receive otly and vered to political of If none
			·	(d) A mount paid filing organization	from on's	(e)	Amount on the stributions and promprectly deligons separate programmers and the separate programmers.	s receivently and vered to oolitical
			·	(d) A mount paid filing organization	from on's	(e)	Amount on the stributions and promprectly deligons separate programmers and the separate programmers.	s receivently and vered to oolitical
			·	(d) A mount paid filing organization	from on's	(e)	Amount on the stributions and promprectly deligons separate programmers and the separate programmers.	s receivently and vered to oolitical
			·	(d) A mount paid filing organization	from on's	(e)	Amount on the stributions and promprectly deligons separate programmers and the separate programmers.	s receive otly and vered to political of If none

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2014					Page 2	
P	cart II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and fi	led Form 5768		
	Check ► If the filing organization belongs to a		list in Part IV ea	ich affiliated gr	oup member's nam	e, address, EIN,	
В	expenses, and share of excess lobbed Check F if the filing organization checked bo		ol" provisions apr	olv			
	Limits on Lobbying E (The term "expenditures" means an	Expenditures		,	(a) Filing organization's totals	(b) Affiliated group totals	
1a	Total lobbying expenditures to influence public o						
b	Total lobbying expenditures to influence a legisl	atıve body (dırect lobb	yıng)				
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures (add lines 1	c and 1d)					
f	Lobbying nontaxable amount Enter the amount to	ın both					
	If the amount on line 1e, column (a) or (b) is:						
	Not over \$500,000						
	Over \$500,000 but not over \$1,000,000	0,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of th	0,000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000			
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)					
h	Subtract line 1g from line 1a If zero or less, ent	er-0-					
i	Subtract line 1f from line 1c If zero or less, ente	er -0-					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 rep	oorting	┌ Yes ┌ No	
	(Some organizations that made a columns below. See t		ection do not uctions for li	have to co nes 2a thro	ugh 2f.)	he five	
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total	
	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
c	Total lobbying expenditures						
d	Grassroots nontaxable amount						

filed Form 5768 (election under section 501(h)).						(b)
	For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.				А	mount
1	legislation, including any attempt to it through the use of	ition attempt to influence foreign, national, state or local nfluence public opinion on a legislative matter or referendum,				
а	Volunteers?			Νo]	
Ь	Paid staff or management (include co	mpensation in expenses reported on lines 1c through 1i)?		No	1	
C	Media advertisements?			No		
d	Mailings to members, legislators, or t	· ·		Νo		
е	Publications, or published or broadcas	.		Νo		
f	Grants to other organizations for lobb	ying purposes?		Νo		
g	Direct contact with legislators, their s	staffs, government officials, or a legislative body?	Yes			9,000
h	Rallies, demonstrations, seminars, co	nventions, speeches, lectures, or any similar means?		Νo		
i	O ther activities?			Νo		
j	Total Add lines 1c through 1i					9,000
2a		organization to be not described in section 501(c)(3)?		Νo]	
b	If "Yes," enter the amount of any tax					
C		incurred by organization managers under section 4912				
d	If the filing organization incurred a se	ction 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organ 501(c)(6).	nization is exempt under section 501(c)(4), section	501(C)(5), (Yes No
1	Were substantially all (90% or more)	dues received nondeductible by members?		Г	1	Tes No
2	, , ,	ise lobbying expenditures of \$2,000 or less?		H	2	
3	-	er lobbying and political expenditures from the prior year?		H	3	
		nization is exempt under section 501(c)(4), section	501/6	\ <u></u>		ction
14:1		er (a) BOTH Part III-A, lines 1 and 2, are answered "				
1	Dues, assessments and similar amou		1			
2	Section 162(e) nondeductible lobbyin expenses for which the section 527(f	g and political expenditures (do not include amounts of political) tax was paid).				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					
4		n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and	4			
5	Taxable amount of lobbying and politi	cal expenditures (see instructions)	5			
	art IV Supplemental Inform					
Pro	ovide the descriptions required for Part	I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in the first spart for any additional information	up list),	Part II	:-A, lır	nes 1 and
	Return Reference	Explanation				
PAR	T II-B, LINE 1 DCC	CCA, INC HAS CONTRACTED WITH ONE SHARED LOBBYIST TO	ADVO	CATE	ONB	EHALF OI
		AGENCY. TO FACILITATE AND MANAGE CONTACT AND VISI				

AGENCY OFFICIALS, TO DEVELOP POTENTIAL FUNDING STRATEGIES, TO DRAFT AND COORDINATE LEGISLATIVE TESTIMONY BY DCCCA
Schedule C (Form 990 or 990F7) 2014

	,	· -	90 -
Part IV S	Supplemental Info	ormation (continued)	
Retur	n Reference	Explanation	

Schedule C (Form 990 or 990EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493035013476

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

about Schedule D (Farm 200)

Open to Public

al Revenue Service Information about Schedule D (Fo	orm 990) and its instructions is at <u>www.</u>	.irs.gov/fo	<u>rm 990</u> .	Inspect	tion	
me of the organization CCA INC		Emplo	yer ident if ic	ation number	er	
CON INC		23-73	368880			
organizations Maintaining Donor A organization answered "Yes" to Form 9		Funds o	r Account	s. Comple	te ıf	the
	(a) Donor advised funds	(l) Funds and	l other accou	ınts	
Total number at end of year						
Aggregate value of contributions to (during year)						
Aggregate value of grants from (during year)						
Aggregate value at end of year						
Did the organization inform all donors and donor adv funds are the organization's property, subject to the	-		ed	☐ Yes	Г	No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit?			purpose	┌ Yes	Г	No
rt II Conservation Easements. Complete	e if the organization answered "Yes	" to Form	990, Part I	V, line 7.		
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization he	ion or education) Preservation of Preservation of	a certified	historic stru	cture		
easement on the last day of the tax year						
			Held at the	e End of the	Yea	r
Total number of conservation easements		2a				
Total acreage restricted by conservation easement		2b				
Number of conservation easements on a certified hi	. ,	2c				
Number of conservation easements included in (c) a historic structure listed in the National Register		2d				
Number of conservation easements modified, transf	rerrea, released, extinguished, or termin	ated by the	organization	i during		
Number of states where property subject to conserv	vation easement is located ►					
Does the organization have a written policy regarding enforcement of the conservation easements it holds		andling of v	ıolatıons, an	rd ┌ Yes	Г	No
Staff and volunteer hours devoted to monitoring, ins	specting, and enforcing conservation eas	sements du	rıng the year	r		
A mount of expenses incurred in monitoring, inspect ► \$	ting, and enforcing conservation easeme	ents during t	the year			
Does each conservation easement reported on line and section $170(h)(4)(B)(II)^{2}$	2(d) above satisfy the requirements of s	section 170	(h)(4)(B)(ı)	☐ Yes	Г	No
In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	f the footnote to the organization's financ					
rt III Organizations Maintaining Collection Complete if the organization answered			er Similar	Assets.		
If the organization elected, as permitted under SFA works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footnot	ssets held for public exhibition, educatio	n, or resea	rch ın further			
If the organization elected, as permitted under SFA works of art, historical treasures, or other similar as	S 116 (ASC 958), to report in its revent	ue statemei	nt and baland		lıc	
service, provide the following amounts relating to th	nese items					
			► \$			_
service, provide the following amounts relating to the			►\$ ►\$			_
service, provide the following amounts relating to th	torical treasures, or other similar assets		► \$			_
service, provide the following amounts relating to the (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, his	torical treasures, or other similar assets		► \$ al gain, prov			

Part	Organizations Maintaining Colle	ections of Art,	Histo	rical	Treasu	res, or Oth	<u>ier Similar A</u>	ssets	(continued)
3	Using the organization's acquisition, accession collection items (check all that apply)	, and other record	s, chec	k any	of the foll	owing that are	e a significant us	e of its	
а	Public exhibition		d 「	Lo	an or exc	hange prograr	ns		
b	Scholarly research		е Г	- 01	ther				
c	Preservation for future generations								
4	Provide a description of the organization's colle Part XIII	ections and explain	n how th	ney fu	rther the o	organızatıon's	exempt purpose	ın	
5	During the year, did the organization solicit or rassets to be sold to raise funds rather than to be						ımılar	┌ Yes	s □ No
Par	t IV Escrow and Custodial Arrangen Part IV, line 9, or reported an amount	nents. Complet	te if th	e org	anızatıoı		"Yes" to Form	990,	,
1a	Is the organization an agent, trustee, custodiar included on Form 990, Part X?					or other asset	s not	┌ Yes	 ;
b	If "Yes," explain the arrangement in Part XIII a	and complete the f	ollowing	g table	e				
							A	mount	
С	Beginning balance					10			
d	Additions during the year					10	1		
е	Distributions during the year					10	e		
f	Ending balance					11	F		
2a	Did the organization include an amount on Form	n 990, Part X, line	21, for	escr	w or cust	odial account	liability?	☐ Yes	s
b	If "Yes," explain the arrangement in Part XIII	Check here if the	explana	tion h	nas been p	rovided in Pa	rt XIII		Γ
Pa	rt V Endowment Funds. Complete if t								
	Danis and sandalana	(a)Current year	(b) Prid	or year	b (c) ⊤	wo years back (d) Three years back	(e) Fοι	ır years back
1a	Beginning of year balance							-	
b C	Net investment earnings, gains, and losses								
·	_								
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curren	t year end balance	e (line 1	g, co	lumn (a))	held as			
а	Board designated or quasi-endowment 🕨								
b	Permanent endowment ►								
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should	equal 100%							
3a	Are there endowment funds not in the possessi organization by	on of the organizat	tion tha	t are	held and a	dmınıstered f	or the	Y	es No
	(i) unrelated organizations							ı(i)	
_	(ii) related organizations			• .			· · · · · -	(ii)	
_	If "Yes" to 3a(II), are the related organizations Describe in Part XIII the intended uses of the o						· · · · <u>L</u>	3b	
4 Par	t VI Land, Buildings, and Equipment					varad 'Vac'	o Form 990 D	art IV	line
FGI	11a. See Form 990, Part X, line 10.		ie orga	111124	tion ansv	vereu res	.0 101111 990, F	aitiv	, iiiie
	Description of property				st or other nvestment)	(b) Cost or other)) Book value
1a	Land				235,683	4,111,6	34		4,347,317
b	Buildings		.		534,317	9,176,7		989	4,167,127
С	Leasehold improvements					68,1	10 65,	354	2,786
d	Equipment					1,162,2	23 747,	222	415,001
e	Other								
Tota	I. Add lines 1a through 1e (Column (d) must equa	al Form 990, Part X,	. columr	(B), I	$line \overline{10(c)}$.				8,932,231
							Schedule	D (Forr	n 990) 2014

Part VII Investments—Other Securities. Co	mplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	complete if the organizati	on answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. Complete if the organization	on answered 'Yes' to Form 9	90, Part IV, line 11d See Form 990, Part X, line 15
	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the org Form 990, Part X, line 25.	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		-
rederal income taxes		-
		†
		-
		-
Total (Column (h) must equal Form 000, Part V cal (P) line 35.)	_	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	do the toyt of the fortunation	About a second of the second o

the organization answered 'Yes' to Form 990, Part IV, line 12a.		rn Complete ıf
Total revenue, gains, and other support per audited financial statements	1	20,734,269
Amounts included on line 1 but not on Form 990, Part VIII, line 12		
Net unrealized gains (losses) on investments 2a -1,246,197		
Donated services and use of facilities		
Recoveries of prior year grants		
Other (Describe in Part XIII)		
Add lines 2a through 2d	2e	-806,956
Subtract line 2e from line 1	3	21,541,225
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 138,630		
Other (Describe in Part XIII)		
Add lines 4a and 4b	4c	138,630
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	21,679,855
Reconciliation of Expenses per Audited Financial Statements With Expenses of the organization answered 'Yes' to Form 990, Part IV, line 12a.	per Ret	t urn. Complete
Total expenses and losses per audited financial statements	1	19,425,627
Amounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities		
Prior year adjustments		
Other losses		
Other (Describe in Part XIII)		
Add lines 2a through 2d	2e	442,314
Subtract line 2e from line 1	3	18,983,313
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 138,630		
Other (Describe in Part XIII)		
Add lines 4a and 4b	4c	138,630
	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments Donated services and use of facilities Other (Describe in Part XIII) Add lines 2a through 2d Subtract line 2e from line 1 Investment expenses not included on Form 990, Part VIII, line 7b Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IV, line 12a. Total expenses and use of facilities Other (Describe in Part XIII) Add lines 2a through 2d Subtract line 2e from line 1 Add lines 2a through 2d Subtract line 2e from line 1 Investment expenses not included on Form 990, Part IV, line 25 Donated services and use of facilities 2a 59,644 Prior year adjustments 2b Other (Describe in Part XIII) Add lines 2a through 2d Subtract line 2e from line 1 Investment expenses not included on Form 990, Part IV, line 25 Donated services and use of facilities 2a 59,644 Prior year adjustments 2b Other (Describe in Part XIII) Add lines 2a through 2d Subtract line 2e from line 1 Investment expenses not included on Form 990, Part IV, line 7b Amounts included on Form 990, Part IV, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Ada lines 2e from line 1 Amounts included on Form 990, Part IV, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Ada lines 2e from line 1 Amounts included on Form 990, Part IV, line 25

Part XIII 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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Return Reference	Explanation
PART X, LINE 2	AS OF JUNE 30, 2015 THERE WERE NO UNCERTAIN TAX BENEFITS IDENTIFIED AND RECORDED AS A LIABILITY
PART XI, LINE 2D - OTHER ADJUSTMENTS	OAK CENTER CONDOMINIUM ASSOCIATION RENTAL INCOME 271,919 EL DORADO RENTAL INCOME 107,678
PART XII, LINE 2D - OTHER ADJUSTMENTS	OAK CENTER CONDOMINIUM ASSOCIATION RENTAL EXPENSE 274,992 EL DORADO RENTAL EXPENSES 107,678

19,121,943

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2014

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization DCCCA INC

Employer identification number

23-7368880

Pa	Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	,			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods			
	used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	 ✓ Independent compensation consultant ✓ Compensation survey or study ✓ Approval by the board or compensation committee 			
	Porm 990 of other organizations Porm 990 of other organizations Porm 990 of other organizations			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization			
•	or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Yes	
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
-	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	<u> </u>		
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	_		.
_		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		
	36666133 1330 0(c).			

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	incentive i reportable		other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 LORI ALVARADO, CHIEF EXECUTIVE OFFICER	(i) (ii)	149,153 0	0	0	3,075 0	6,363 0	158,591 0	0
	(i) (ii)	145,353 0	0	237,980	45,975 0	3,319 0	432,627 0	0
	(i) (ii)	16,950 0	0	146,083 0	571 0	0 0	163,604 0	0

Schedule J (Form 990) 2014

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

	Return Reference	Explanation
PART II		GEORGE HECKMAN RECEIVED \$146,083 IN SALARY FOR ACCUMULATED ACCRUED PAID TIME OFF AND SEPARATION PAY WHEN THE
		POSITION OF CHIEF OPERATIONS OFFICER AND ASSISTANT EXECUTIVE DIRECTOR WAS ELIMINATED BRUCE BEALE RECEIVED \$173,147
		IN SALARY FOR ACCUMULATED ACCRUED PAID TIME OFF AND AN AGENCY PURCHASED A VEHICLE VALUED AT \$58,593 AT RETIREMENT

Schedule J (Form 990) 2014

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DLN: 93493035013476

OMB No 1545-0047

Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

 $\label{lem:complete} \textbf{Complete to provide information for responses to specific questions on } \\$ Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** DCCCA INC 23-7368880

90 Schedule O, Supplemer	ntal Information
Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	
FORM 990, PART VI, SECTION A, LINE 6	DCCCA CURRENTLY HAS 15 ORGANIZATIONAL MEMBERSHIPS ALL BOARD OF DIRECTORS ARE MEMBERS AND THERE ARE NO MEMBERS OTHER THAN THOSE INDIVIDUALS SERVING ON THE GOVERNING BOARD
FORM 990, PART VI, SECTION A, LINE 7A	ONLY INDIVIDUALS SERVING ON DCCCA'S GOVERNING BODY (BOARD OF DIRECTORS) HAVE MEMBERSHIPS THE GOVERNING BODY HOLDS ANNUAL ELECTIONS TO ELECT UP TO FIVE DIRECTORS EACH YEAR BOARD M EMBERS ARE ELECTED FOR A THREE YEAR TERM
FORM 990, PART VI, SECTION A, LINE 7B	ONLY INDIVIDUALS SERVING ON DCCCA'S GOVERNING BODY (BOARD OF DIRECTORS) HAVE MEMBERSHIPS A ND AS SUCH THE DECISIONS OF THE BOARD OF DIRECTORS (THE GOVERNING BODY) ARE RATIFIED BY TH E MEMBERS
FORM 990, PART VI, SECTION B, LINE 11	A DRAFT OF THE RETURN IS REVIEWED BY THE CEO AND CFO IT IS THEN PROVIDED TO THE BOARD FOR REVIEW PRIOR TO FILING ANY QUESTIONS ARE ADDRESSED AND CHANGES ARE MADE IF NECESSARY WH EN THE RETURN HAS BEEN APPROVED, THE RETURN IS FILED ELECTRONICALLY BY THE PAID PREPARER
FORM 990, PART VI, SECTION B, LINE 12C	DCCCA HAS A REQUIRED WRITTEN ANNUAL DISCLOSURE FORM COMPLETED BY EACH MEMBER OF THE GOVERN ING BODY AND SENIOR MANAGEMENT MEMBER THE ANSWERS FROM THOSE FORMS ARE REVIEWED FOR ANY P OTENTIAL CONFLICTS BY DCCCA'S CORPORATE COMPLIANCE OFFICER ADDITIONALLY, DCCCA'S CORPORAT E COMPLIANCE OFFICER REVIEWS CORPORATE COMPLIANCE, INCLUDING CONFLICT OF INTERESTS, WITH T HE GOVERNING BOARD, AND SENIOR MANAGEMENT EMPLOYEES ANNUALLY
FORM 990, PART VI, SECTION B, LINE 15	DURING FISCAL YEAR 2015 DCCCA'S EXECUTIVE COMMITTEE PROPOSED, AND THE FULL BOARD OF DIRECT ORS APPROVED, THE COMPENSATION TO BE PAID BY DCCCA TO ITS CEO DCCCA AUTHORIZES COMPENSATI ON FOR THE SENIOR MANAGEMENT MEMBERS COMPENSATION SURVEYS, INCLUDING BUT NOT LIMITED TO T HE ABBOTT/LANGER NONPROFIT NATIONAL SURVEY AND THE GUIDESTAR NONPROFIT SALARY SURVEY ARE U SED FOR COMPARISON PURPOSES ADDITIONALLY, INTERNAL INFORMATION INCLUDING HISTORIC SALARY LEVELS, AVERAGE INCREASES, LENGTH OF TIME IN POSITION, MANAGEMENT RESPONSIBILITIES, THE OR GANIZATION'S CURRENT FINANCIAL POSITION, AND THE OVERALL INDUSTRY ECONOMIC CONDITIONS AND PROJECTIONS ARE CONSIDERED
FORM 990, PART VI, SECTION C, LINE 19	ANY PUBLIC INFORMATION IS MADE AVAILABLE UPON REQUEST TO A SENIOR MANAGEMENT MEMBER OFFIC ER OR MEMBER OF THE GOVERNING BODY ONCE THE REQUEST IS RECEIVED THE INFORMATION IS EITHER MAILED, FAXED, OR EMAILED TO THE REQUESTOR, DEPENDING UPON THEIR PREFERENCE
FORM 990, PART XI, LINE 9	OAK CENTER CONDOMINIUM ASSOCIATION NET RENTAL -3,073
PART XII, LINE 2C	NO CHANGE FROM PRIOR YEAR
PART XI, LINE 9	OAKS CONDO ASSOCIATION REVENUE \$271,919, EXPENSES \$274,992, NET (\$3,073) EXCLUDED AND REPORTED ON FORM 1120

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DLN: 93493035013476

2014

OMB No 1545-0047

Open to Public Inspection

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

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.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

DCCCA INC 23-7368880 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	512(b) ntrolled
						Yes	No
	FUNDRAISING FOR SE KS PROGRAM ENHANCEMENTS	KS	501(C)(3)	509(A)(3)TYPE I	N/A		No

art 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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j))	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocat	ions?	amount in box	mana	ging	ownership
		(state or	entity	unrelated,		assets			20 of	partn	er?	
		foreign		excluded from					Schedule K-1	1		
		country)		tax under					(Form 1065)	İ		
				sections 512-						İ		
				514)						<u> </u>		
				,			Yes	No		Yes	No	
							•					

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	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(1 contro entit	1 512 13) olled
								Yes	No
· ·	LENEXA OFFICE SPACE CONDO OWNERSHIP	KS		С	-8,431		100 000 %		No

s Other transfer of cash or property from related organization(s)

No

hedule R (Form 990) 2014		Pa	ge 3
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b	o, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
During the tax year, did the orgranization 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	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
• Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	<u>1q</u>	Yes	
r Other transfer of cash or property to related organization(s)	1r		No

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

	<u> </u>	· ·	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ELM ACRES FOUNDATION INC	N	15,000	
(2) ELM ACRES FOUNDATION INC	Q	16,100	

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

4 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	50 orga	(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	end-of-year	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
				\Box					\Box				

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

City Commissioners-

I wrote to you immediately after Tom Markus' initial budget was submitted to you. I encouraged you then to avoid laying off City employees, especially the Director of Arts and Culture. As the community conversation has developed since then I have had time to consider more deeply the planning and budgeting challenges you have before you. With that in mind, I respectfully want to add several more thoughts. I expect that you have heard from others much of what I have to say, but that many of us are thinking these things is significant in and of itself. I am simply joining my fellow citizens in encouraging you to consider deeply the very identity of the community you serve.

I am a sixty-six year old artist, born in Lawrence in 1949, and a continuous resident except for twenty years spent in New Jersey and Pennsylvania between 1972 and 1992. I have been an artist my entire life and have worked at jobs in the arts since I was in my early twenties. I have made a life in the arts. including being a professor of art (Rutgers University, Kansas University, Baker University) and a gallery director (Lawrence Arts Center.) I do not regard the arts as "extra" or merely "nice to have if we can afford it." Rather, art, for me and a sizable number of Lawrence citizens, is a way of life, a livelihood, both a business and a pathway to the development of our higher selves. Literature, music, theatre/film and visual arts, like the sciences, all concern themselves with the large questions of humanity and existence. Let's keep this in mind when we set cultural and even budget priorities. Life without the arts would be insensate and lack emotional and intellectual adventure.

Lawrence itself is a special community. Not necessarily better than other communities, but special in its own way because it has a highly educated population that has assembled itself around a well developed cultural infrastructure. People come to Lawrence because it is a place that values free-thinking and creative works of every kind. Not every town in Kansas offers the cultural fertility that Lawrence has. It is a rare place, not only in Kansas, but in the country.

Many people have devoted their energies to making the city the regional center of arts that it has become. We are on the verge of a kind of maturity that could make Lawrence more nationally prominent. We have developed the institutions that can support and encourage this kind of seasoned confidence, but maintaining our momentum depends on the continued support of the community and the willingness—indeed, the enthusiastic encouragement, of the City government.

Therefore, I encourage you to think carefully about what makes Lawrence unique and not just support the things that make it like other places. I fear that supporting generally the often monotonous suburbanization of Lawrence, and not attending to the imaginative renewal of its aging neighborhoods (the areas most favored by artists) would force many creative people to reconsider their decisions to be here and seek more congenial, and more interesting, communities. What a lost opportunity that would be. The current Kansas government has famously alienated the arts community. Lawrence has much to gain by maintaining its support for it.

Please retain the Director of Arts and Culture, continue supporting the Lawrence Arts Center and follow through on the infrastructure improvements that will support the continued development of the East Lawrence Arts District. These investments will pay off in many ways.

Sincerely,

Rick Mitchell 2804 Tomahawk Dr. Lawrence, KS 66049 785-841-9105