

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2018

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning JUL 1, 2018 **and ending** JUN 30, 2019

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated

C Name of organization
FIRE SAFE COUNCIL OF NEVADA COUNTY

Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. BOX 1112

City or town, state or province, country, and ZIP or foreign postal code
GRASS VALLEY, CA 95945-1112

D Employer identification number
 94-3317612

E Telephone number
 (530) 272-1122

G Gross receipts \$ **665,071.**

H(a) Is this a group return for subordinates? **D Yes CX No**

H(b) Are all subordinates included? **D Yes D No**

H(c) Group exemption number if "No," attach a list. (see instructions)

I Name and address of principal officer: **DONN THANE**
 Same as C above Tax-exempt status: 501(c)(3) 501(c)() insert no. 4947(a)(1) or 527

J Website: **WWW.AREYOUFIRESAFE.COM**

K Form of organization: Corporation Trust Association Other **L** Year of formation: 1999 **M** State of legal domicile: CA

Part 11 Summary

1 Briefly describe the organization's mission or most significant activities: TO CREATE FIREWISE COMMUNITIES, PUBLIC EDUCATION & PROGRAMS TO ENHANCE EMERGENCY PREPAREDNESS FOR	
2 Check this box <input type="checkbox"/> D if the organization discontinued its operations or disposed of more than 25% of its net assets.	
3	Number of voting members of the governing body (Part VI, line 1a) 10
4	Number of independent voting members of the governing body (Part VI, line 1b) 10
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a) 13
6	Total number of volunteers (estimate if necessary) 85
7a	Total unrelated business revenue from Part VIII, column (C), line 12 0.
7b	Net unrelated business taxable income from Form 990-T, line 38 0.
8	Prior Year
	Current Year
8	Contributions and grants (Part VIII, line 1h) 344,136. 649,000.
9	Program service revenue (Part VIII, line 2g) 0. 0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 60. 10.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e) 35,582. 16,061.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 379,778. 665,071.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0.
14	Benefits paid to or for members (Part IX, column (A), line 4) 0. 0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 217,089. 266,827.
16a	Professional fundraising fees (Part IX, column (A), line 11e) 0.
16b	Total fundraising expenses (Part IX, column (D), line 25) 0.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 185,800. 372,995.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 402,889. 639,822.
19	Revenue less expenses. Subtract line 18 from line 12 -23,111. 25,249.
20	Beginning of Current Year
	End of Year
20	Total assets (Part X, line 16) 144,705. 335,740.
21	Total liabilities (Part X, line 26) 70,043. 237,850.
22	Net assets or fund balances. Subtract line 21 from line 20 74,662. 97,890.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: **DONN THANE, CHAIRMAN** Date: _____

Paid Print/Type preparer's name: **PAMELA WHITE, CPA** Preparer's signature: _____ Date: _____ Check D self-employed PTIN: **00599056**

Preparer Use Only Firm's name: **RICHARDSON & COMPANY LLP** Firm's EIN: **46-5577902**
 Firm's address: **550 HOWE AVENUE, SUITE 210 SACRAMENTO, CA 95825** Phone no. (**916**) **564-8727**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE MISSION OF FIRE SAFE COUNCIL OF NEVADA COUNTY IS TO CREATE FIREWISE COMMUNITIES, PUBLIC EDUCATION AND PROGRAMS TO ENHANCE EMERGENCY PREPAREDNESS FOR CATASTROPHIC WILDFIRE; TO NETWORK WITH OTHER FIRE SAFE COUNCILS, FIREWISE COMMUNITIES, GOVERNMENT AGENCIES AND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Dves CXJNo If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?... Dves CXJNo If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses\$ 67,497 including grants of\$) (Revenue\$) FIREWISE COUMMUNITIES/USA: IS A NATIONAL PROGRAM DEVELOPED BY THE NATIONAL FIRE PROTECTION ASSOCIATION IN PARTNERSHIP WITH FEDERAL LAND MANAGEMENT AGENCIES. UNDER THIS PROGRAM THE COUNCIL PROVIDES COMMUNITY WILDFIRE HAZARD ASSESSMENTS, TRAINING OF DEFENSIBLE SPACE ADVISORS, CHILDREN'S EDUCATION, CLEARING OF DEFENSEIBLE SPACE FOR LOW INCOME SENIORS AND THE DISABLED, SCOTCH BROOM REMOVAL AND COMMUNITY OUTREACH EDUCATION.

4b (Code:) (Expenses\$ 295,070 including grants of\$) (Revenue\$) FUEL BREAK AND BIOMASS PROJECTS: THE COUNCIL MANAGES STRATEGIC COMMUNITY FUEL BREAKS CREATED PURSUANT TO ITS COMMUNITY WILDIRE PROECTION PLAN. BEGINNING THIS YEAR, THE COUNCIL ALSO SERVES AS THE FISCAL SPONSOR FOR THE NEVADA COUNTY BIOMASS TASK FORCE AND CAMPTONVILLE COMMUNITY PARTNERSHIP FOR A WOOD INNOVATIONS GRANT TO CONDUCT PERMITTING AND THE SYSTEM IMPACT STUDIES FOR TWO COMMUNITY SCALE BIOMASS UTILITIZATION FACILITIES.

4c (Code:) (Expenses\$ 184,575 including grants of\$) (Revenue\$) COMMUNITY CHIPPING: THE COUNCIL PROVIDES CHIPPING SERVICES TO NEVADA COUNTY LAND OWNERS WHO HAVE ACCUMULATED BRUSH PILES WHILE WORKING TO CLEAR DEFENSIBLE SPACE AND EVACUATION ROUTES.

4d Other program services (Describe in Schedule O.) (Expenses\$ including grants of\$) (Revenue\$

4e Total program service expenses 547,142.

Part 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)? <i>If "Yes," complete Schedule A _</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II _</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III _</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule O, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule O, Part II _</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule O, Part III _</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule O, Part IV</i>		X
10 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 O, Part V</i>		X
11 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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule O, Part VI</i>	X	
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? <i>If "Yes," complete Schedule O, Part VII</i>		X
c 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? <i>If "Yes," complete Schedule O, Part VIII _</i>		X
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? <i>If "Yes," complete Schedule O, Part IX _</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule O, Part X _</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule O, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule O, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule O, Parts XI and XII is optional _</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV _</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV _</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I _</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and Sa? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III _</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II ,,,,</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a ..</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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? .		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
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>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV .</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M .</i>		X
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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
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>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 .</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <i>Note. All Form 990 filers are required to complete Schedule O.</i>	X	

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 D

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part VII Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 16 regarding employee reporting, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI

Section 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.		
1b	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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
a	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?		X
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.		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
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?		X
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?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **CA**
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
JAMIE JONES - (530) 272-1122
P.O. BOX 1112, GRASS VALLEY, CA 95945-1112

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

Check if Schedule O contains a response or note to any line in this Part VII

D

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Officer	Director	Trustee	Key Employee	Highest Compensated Employee	Former			
(1) DONN THANE CHAIRMAN	4.00	X	X				0.	0.	0.	
(2) RICHARD NOLLE VICE CHAIRMAN	4.00	X	X				0.	0.	0.	
(3) HELENE HALL SECRETARY	4.00	X	X				0.	0.	0.	
(4) DAVID WALKER TREASURER	4.00	X	X				0.	0.	0.	
(5) ALAN DOERR DIRECTOR	2.00	X					0.	0.	0.	
(6) BILL DROWN DIRECTOR	2.00	X					0.	0.	0.	
(7) ERIC TRYGG DIRECTOR	2.00	X					0.	0.	0.	
(8) DON WAGNER DIRECTOR	2.00	X					0.	0.	0.	
(9) PETE WILLIAMS DIRECTOR	2.00	X					0.	0.	0.	
(10) STEVE EUBANKS DIRECTOR	2.00	X					0.	0.	0.	
(11) SUE HOEK DIRECTOR	2.00	X					0.	0.	0.	
(12) WANDA MERTENS DIRECTOR	2.00	X					0.	0.	0.	
(13) HANK WESTON DIRECTOR	2.00	X					0.	0.	0.	
(14) JOANNE DRUMMOND EXECUTIVE DIRECTOR	40.00		X				47,192.	0.	110.	
(15) JAMIE JONES PURKEY EXECUTIVE DIRECTOR	40.00		X				44,538.	0.	5,250.	

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

D

Table with columns (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512-514. Rows include 1a-f (Federated campaigns, Membership dues, Fundraising events, etc.), 2a-g (Business Code), 3-5 (Investment income, Royalties), 6a-d (Gross rents), 7a-d (Gross amount from sales of assets), 8a-c (Gross income from fundraising events), 9a-c (Gross income from gaming activities), 10a-c (Gross sales of inventory), 11a-e (Miscellaneous Revenue), and 12 Total revenue.


Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

D

Do not include amounts reported on lines 6b, 1b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations 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	91,730.	80,970.	10,760.	
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 .	132,799.	98,372.	34,427.	
a Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,933.	2,589.	344.	
9 Other employee benefits	20,792.	18,574.	2,218.	
10 Payroll taxes	18,573.	15,134.	3,439.	
11 Fees for services (non-employees):				
a Management .				
b Legal				
c Accounting .	4,978.		4,978.	
d Lobbying .				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)				
12 Advertising and promotion	372.		372.	
13 Office expenses	37,387.	5,366.	32,021.	
14 Information technology				
15 Royalties .				
16 Occupancy .	9,595.		9,595.	
17 Travel	17,489.	9,579.	7,910.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ..				
19 Conferences, conventions, and meetings	3,323.	1,870.	1,453.	
20 Interest				
21 Payments to affiliates .				
22 Depreciation, depletion, and amortization	7,307.		7,307.	
23 Insurance	3,179.		3,179.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
a FUEL REDUCTION CONTRACT	267,972.	233,433.	34,539.	
b PROGRAM EXPENSES	19,073.	16,155.	2,918.	
c MISCELLANEOUS	2,150.		2,150.	
d LICENSE AND PERMITS	170.	75.	95.	
e All other expenses		65,025.	-65,025.	
25 Total functional expenses. Add lines 1 through 24e	639,822.	547,142.	92,680.	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)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

D

		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		1	
2	Savings and temporary cash investments .	94,585.	2	62,255.
3	Pledges and grants receivable, net	42,399.	3	235,453.
4	Accounts receivable, net	2,565.	4	0.
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .		6	
7	Notes and loans receivable, net .		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	3,700.	9	5,474.
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 160,351.		
b	Less: accumulated depreciation	10b 128,664.	10c	31,687.
11	Investments - publicly traded securities		11	
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	871.	15	871.
16	Total assets. Add lines 1 through 15 (must equal line 34)	144,705.	16	335,740.
17	Accounts payable and accrued expenses .	27,130.	17	159,232.
18	Grants payable .		18	
19	Deferred revenue	40,585.	19	46,963.
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
23	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	2,328.	25	31,655.
26	Total liabilities. Add lines 17 through 25	70,043.	26	237,850.
Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> [X] and				
complete lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets	74,662.	27	97,890.
28	Temporarily restricted net assets		28	
29	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> [] Permanently restricted net assets		29	
and complete lines 30 through 34.				
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	74,662.	33	97,890.
34	Total liabilities and net assets/fund balances	144,705.	34	335,740.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

D

1	Total revenue (must equal Part VIII, column (A), line 12)	1	665,071.
2	Total expenses (must equal Part IX, column (A), line 25)	2	639,822.
3	Revenue less expenses. Subtract line 2 from line 1	3	25,249.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	4	74,662.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-2,021.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (8))	10	97,890.

Part XIII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

D

		Yes	No
1	Accounting method used to prepare the Form 990: D Cash [X] Accrual D Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: D Separate basis D Consolidated basis D Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? 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: D Separate basis D Consolidated basis D Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .		X
3b	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		

Form 990 (2018)