(Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

OMB No. 1545-0047

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

| A F | or the | 2019 calendar year, or tax year beginning $JUL 1$, 2019 and ending | <u>J</u> UN 30, 2020 |) |
|------------------------------|---------------------------------------|---|----------------------------|--------------------------------|
| | heck if pplicable | C Name of organization | D Employer identif | ication number |
| | Addres Jchange Name | FIRE SAFE COUNCIL OF NEVADA COUNTY | | |
| <u></u> | _jchange | | 94-33176 | 512 |
| - | Initial return Final return/ | Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 1112 | 1 | er 72-1122 |
| | termin- ated | | G Gross receipts \$ | 3,379,215. |
| | Amend return | ed GRASS VALLEY, CA 95945-1112 | H(a) Is this a group | return |
| | Application | IF Name and address of principal officer: DOININ I DAINE | for subordinate | s? Yes X No |
| | pendin | SAME AS C ABOVE | H(b) Are all subordinates | included? Yes No |
| 1 7 | ax-exe | mpt status: X 501(c)(3) 501(c) () ((insert no.) 4947(a)(1) or | 527 If "No," attach | a list. (see instructions) |
| J۷ | Vebsit | e:▶ WWW.AREYOUFIRESAFE.COM | H(c) Group exempti | on number 🕨 |
| KF | | | ear of formation: 1999 | M State of legal domicile: CA |
| Pa | | Summary | | |
| е | 1 E | Briefly describe the organization's mission or most significant activities: ${	t TO 	ext{ } 	ext{ } 	ext{CREAT} 	ext{ }}$ | E FIREWISE CO | MMUNITIES, |
| anc |] | PUBLIC EDUCATION & PROGRAMS TO ENHANCE EMERG | ENCY PREPAREI | ONESS FOR |
| ž | 2 (| Check this box 🕨 📖 if the organization discontinued its operations or disposed of n | nore than 25% of its net a | issets. |
| ŏ | 3 1 | Number of voting members of the governing body (Part VI, line 1a) | 3 | |
| ص ص | 4 1 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | |
| es | 5 1 | Fotal number of individuals employed in calendar year 2019 (Part V, line 2a) | 5 | 23 |
| viti | 6 | Total number of volunteers (estimate if necessary) | 6 | |
| Activities & Governance | 7a 1 | Fotal unrelated business revenue from Part VIII, column (C), line 12 | 78 | |
| _ | 1 d | Net unrelated business taxable income from Form 990-T, line 39 | 7t | 0. |
| | | | Prior Year | Current Year |
| ō | 8 (| Contributions and grants (Part VIII, line 1h) | 649,000 | |
| eun | 9 1 | Program service revenue (Part VIII, line 2g) | 0 . | ., |
| Revenue | 10 | nvestment income (Part VIII, column (A), lines 3, 4, and 7d) | 10 | |
| ш. | 11 (| Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 16,061 | |
| | 12 | Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 665,071 | |
| | 13 (| Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 0. | · |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0 . | 1 |
| es | | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 266,827 | |
| Expenses | 16a F | Professional fundraising fees (Part IX, column (A), line 11e) | 0 . | 0. |
| ă | b i | Fotal fundraising expenses (Part IX, column (D), line 25) ► | | |
| ш | 17 (| Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 372,995 | |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 639,822 | |
| | 19 F | Revenue less expenses. Subtract line 18 from line 12 | 25,249 | |
| s or | | | Beginning of Current Year | |
| Net Assets o Fund Balance | 20 | Total assets (Part X, line 16) | 335,740 | |
| 쭚 | 21 | Total liabilities (Part X, line 26) | 237,850 | |
| | | Net assets or fund balances. Subtract line 21 from line 20 | 97,890 | 116,749. |
| | rt II | Signature Block | | |
| | | ties of perjury, I declare that I have examined this return, including accompanying schedules and sta | | ny knowledge and belief, it is |
| true, | correct | t, and complete. Declaration of preparer (other than officer) is based on all information of which prep | arer has any knowledge. | |
| | | Signature of officer | l Date | |
| Sign | - 1 | , | Date | |
| Her | e | DONN THANE, CHAIRMAN Type or print name and title | | |
| | | | Date Check | I II PTIN |
| Det- | 1 | Print/Type preparer's name Preparer's signature | if | boos oos c |
| Paid | | PAMELA WHITE, CPA | self-empl | |
| - | | Firm's name RICHARDSON & COMPANY LLP | Firm's EIN ▶ | 46-5577902 |
| use | Only | Firm's address 550 HOWE AVENUE, SUITE 210 | | 11C) EC# 0202 |
| | 1 | SACRAMENTO, CA 95825 | Phone no. (| |
| May | the IR | S discuss this return with the preparer shown above? (see instructions) | | X Yes No |

| Pa | t III Statement of Program Service Accomplishments |
|----|--|
| | Check if Schedule O contains a response or note to any line in this Part III |
| 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 |
| | EMERGECY 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 |
| - | · - · · · · · · · · · · · · · · · · · · |
| | 1 |
| _ | 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? |
| | 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 \$ 27,015. 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. |
| | EDOCALION: |
| | |
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| | |
| 4b | (Code:) (Expenses \$ 2,295,120. 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 UTILITZATION FACILITIES. |
| | |
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| | |
| 4c | (Code:) (Expenses \$ 64,174 • 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. |
| | CHEAR DEFENDIBLE DIACE AND EVACOATION ROOTED: |
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| | |
| 4d | Other program services (Describe on Schedule O.) |
| | (Expenses \$ including grants of \$) (Revenue \$) |
| 4e | Total program service expenses ▶ 2,386,309. |
| | Form 990 (2019) |

Part IV Checklist of Required Schedules

| 1 Is the corganization described in section 501(kg) or 4947(401) (other than a private foundation)? 11 Yes "complete Schedule O, Schedule O, Schedule of Contributors? 12 Is the organization engage in deceler or indices of political campaign activities, or have a section 501(ft) election in effect or indices of political campaign activities, or have a section 501(ft) election in effect of during the tax year? If "Yes," complete Schedule C, Part I I Section 501(kg) organization. Both the organization engage in lobbying activities, or have a section 501(ft) election in effect of the section of the complete Schedule C, Part I I Section 501(kg) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88-197 II "Yes," complete Schedule C, Part II or provide activities on the distribution or investment of amounts in such funds or accounts? II "Yes," complete Schedule C, Part II O Bid the organization review on dot a conservation accounter of the environment, historic land areas, or historic structures II "Yes," complete Schedule C, Part II O Bid the organization report an amount in Part X, Iline 21, for estore or custodial account labelity, serve as a custodian for amounts in Standard In Part X, or provide ceredic counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV II Old the organization report an amount in Part X, Iline 21, for estore or custodial account labelity, serve as a custodian for amounts in clasted in Part X, in provide organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part IV II | | , | | Yes | No |
|---|-----|--|----------|----------|----------------|
| 2 Is the congularation required to completes Schedule S, Schedule of Contributors 10 Did the organization angage in direct or indisect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 X 3 Section 501(kg) organization. Did the organization angage in lobbying activities, or have a section 501(kg) election in effect during the stay of If "Yes," complete Schedule C, Part II 5 Is the organization ascotion 501(kgl, 5) (fc)(kgl, 5) or 501(kgl) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procaders 9819 If "Yes," complete Schedule C, Part II 6 Did the organization maintain any othoric 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 II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 8 Ly and the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 9 Did the organization ministration of the stay of the organization amounts in part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts and interest in the stay of the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts must libed in Part X, or provide redd counseling, debt management, credit repair, or debt negotiation service? 1 If the organization report an amount for load, buildings, and equipment in Part X, line 10, that is 5% or more of its total assets report in Part X, line 10, If "Yes," complete Schedule D, Part V II 2 Did the organization report an amount for lovestments - program related in Part X, line 10, that is 5% or more of its total assets report in Part X, line 10; If "Yes," | | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes " complete Schedule A | 1 | х | |
| 3 X X Section 501(c)(3) organization regage in direct or inclined political campaign activities on behalf of or in opposition to candidates for public offices ("I "Yes, complete Schedule (P. Part II)" 1 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 18-197 If "Yes," complete Schedule (P. Part III) 2 Did the organization maintain and your advanced funds or any similar amounts as defined in Revenue Procedure 18-197 If "Yes," complete Schedule (P. Part III) 3 X Did the organization maintain and your advanced funds or any similar amounts as defined in Revenue Procedure 18-197 If "Yes," complete Schedule (P. Part III) 3 X Did the organization review or hold a conservation casement, including assements to which donors have the right to provide activities of individual and any similar and the revironment, historic land areas, or historic structures II" "Yes," complete Schedule (P. Part III) 3 X Did the organization review or hold a conservation easiment, including assements to printing assessed or the revironment, historic land areas, or historic structures II" "Yes," complete Schedule (P. Part III) 3 Did the organization maintain collections of vortex of art, historical trauseurs, or other similar assessed II" "Yes," complete Schedule (P. Part IV III) 4 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts in bidd in Part X, or provide cerell counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule P. Part IV III III III III III III III III III | | | | | |
| public office? If "Yes," complete Schedule C, Part I Section 501(R) arganizations. Did the organization engage in lobbying activities, or have a section 501(R) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(R), 501(R), 50, 501(R), 50 (R), 50 (R | | | | | |
| 4 Section 501(e)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the text year // 1" Nes. "complete Schedule C, Part // 1" Section 501(e)(4), 501(e)(5), or 501(e)(6) organization that receives membrarily dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 // "Yes," complete Schedule C, Part // 1" Section 501(e)(4), 501(e)(5), or 501(e)(6), or 501(e)(6) organization that receives membrarily dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 // "Yes," complete Schedule C, Part // 1" Did the organization receiver or hold a conservation assessment, including assements to be preview of perspective 50-197 organization receiver or hold a conservation assessment, including assembles to preview organization receiver or hold a conservation assessment, including assembles to preview organization receiver or hold a conservation assessment organization procedure 9. The secondary of the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II and the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II and the environment of a mounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V is 10 bid the organization, electry or through a related organization, hold assets in donor-restricted endowments or a quasile endowments? If "Yes," complete Schedule D, Part V is 11 the organization services? If "Yes," complete Schedule D, Part V is 11 the organization assets are any of the fellowing questions is "Yes," then complete Schedule D, Part V ii, I' If the cylindation services or any of the fellowing questions is "Yes," then complete Schedule D, Part V ii, I' If I was assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X iine 158, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," comp | • | | 3 | | X |
| during the tax year? If "Yes," complete Schedule C, Part II s is the organization a section 5ch [c](4), 501(c)(5), or 501(c)(6), or 501(c)(6) | 4 | | | | |
| 5 is the organization a section 50 fol(4)8, 00 fol(6)6, or 501(6)6 organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19/8 if "ise," complete Schedule C, Part III 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts and provided the complete Schedule D, Part III 7 | • | | 4 | | X |
| similar amounts as defined in Revenue Procedure 98:19? If Yes,* complete Schedule C, Part III 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 II Did the organization receive or hold a conservation essement, including easements to preserve open space, the environment, historic land areas, or historic structures? If Yes,* complete Schedule D, Part III 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 conseling, debt management, credit repair, or debt negotiation services? If Yes,* complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10, Part SV, IVI, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10, Part VV Did the organization report an amount for investments - other securities in Part X, line 10, Part VV Did the organization report an amount for investments - other securities in Part X, line 10, Part VV Did the organization report an amount for other assets 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 Did the organization report an amount for other assets 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 Did the organization signalized for protein a mount 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 XII Did the organization signalized for 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 XII Did th | 5 | | | | |
| 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 I*Yes, "complete Schedule D, Part II 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 Did the organization maintain collections of works of art, historical reseaurse, or ches similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21, for escrow or custodial account flability, 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 Or in quael endowments? If "Yes," complete Schedule D, Part V II If the organization is any of the following questions is "Yes," then complete Schedule D, Part V, If It the organization is any of the following questions is "Yes," then complete Schedule D, Part V II If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II If It was a spolicable. Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V II I | | | 5 | | _X_ |
| provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization reside or not fold a consendation easement, including easement is to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 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 Did the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI II the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI II Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI II Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII II Did the organization report an amount for investments - program related in Part X, line 12, that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII II III X Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII II III X Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X II II II X Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Sch | 6 | | l | | |
| 7 Did the organization receive or hold a conservation assement, including easements to preserve open space, the environment, historic land reas, or historic structures If Vires, 'complete Schedule D, Part III | | | 6 | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or oustodial 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 V 9 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 1 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 1 11 If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V 1 11 If X | 7 | | 1 | | |
| Schedule D, Part III 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 10 Did the organization or answer to any of the following questions is "Yes," then complete Schedule D, Part V 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part S V 11 as a splicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V 11 c Did the organization report an amount for investments - program related in Part X, line 10; the "If "Yes," complete Schedule D, Part V 11 c Did the organization report an amount for their 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 V 11 c Did the organization report an amount for their 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 V 11 Did the organization is an amount for their 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 X 11 Did the organization or an amount for their assets in Part X, line 15; that is 5% or more of its total assets reported in Part X, line 15; that is 5% or more of its total assets reported 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 X 11 Did the organization or an amount for their assets in Part X, line 15; that is 5% or more of its total assets reported in Part X, line 15; that is 5% or more of its total assets reported in Part X, line | | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
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| 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 To Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization report and amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI c 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 b Did the organization report an amount for other assets 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 VII b 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 VII b Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 110 X 111 X 110 X 111 X 111 X 111 X 112 X 113 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 114 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 112 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X In A MI Is optional 12 | | | 8 | | <u>X</u> |
| If 'Yes,' complete Schedule D, Part IV 10 10 10 10 10 10 10 1 | 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | |
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| Did the organization maintain an office, employees, or agents outside of the United States? 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 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 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 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 17 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a 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 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 | 42 | | | | |
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| 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 X | 20a | | 20a | <u> </u> | X |
| 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 X | b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | <u> </u> | |
| domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 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 | <u></u> | |

932003 01-20-20

Form **990** (2019)

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

| | , | , | | Yes | No | | | | |
|-----|---|---|----------|----------|--|--|--|--|--|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | | | | | |
| | filed for the calendar year ending with or within the year covered by this return | 2a 23 | | | | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax return | ıs? | 2b | X | | | | | |
| | Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | | | | | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | 3a | | X | | | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 6 |) | 3b | | | | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other a | uthority over, a | | | | | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial a | ccount)? | 4a | | X | | | | |
| b | If "Yes," enter the name of the foreign country ▶ | | | | | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Act | counts (FBAR). | | | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | 5a | | X | | | | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction | tion? | 5b | | X | | | | |
| C | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | | 5c | ļ | | | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | e organization solicit | | | | | | | |
| | any contributions that were not tax deductible as charitable contributions? | | 6a | | X | | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contribution | ons or gifts | | | | | | | |
| | were not tax deductible? | | 6b | | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services. | rices provided to the payor? | 7a | | X | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | 7b | | | | | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | s required | ļ | | | | | | |
| | to file Form 8282? | | 7c | | X | | | | |
| d | | 7d | | | | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or | ontract? | 7e | <u> </u> | | | | | |
| f | f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | | | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Fo | | 7g | | | | | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization | | 7h | <u> </u> | | | | | |
| 8 | 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 | <u> </u> | | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | | | |
| а | , , , | | 9a | ļ | <u> </u> | | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | 9b | | <u> </u> | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | 1 | | | | | | | |
| 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 | 10b | | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | ı | | | | | | | |
| а | Gross income from members or shareholders | 11a | 1 | | | | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | | | | | | |
| | amounts due or received from them.) | 11b | - | | | | | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | • | 12a | 1 | - | | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | 1 | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | <u></u> | _ | | | | | |
| а | is the organization licensed to issue qualified health plans in more than one state? | | 13a | ↓ | <u> </u> | | | | |
| | Note: See the instructions for additional information the organization must report on Schedule O. | | | | | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | i | | | | | | | |
| | organization is licensed to issue qualified health plans | 13b | 4 | | | | | | |
| С | Enter the amount of reserves on hand | 13c | 14a | | X | | | | |
| 14a | | | | | | | | | |
| b | b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | | | | | | | | |
| 15 | ls the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | | | | | | |
| | excess parachute payment(s) during the year? | | | | | | | | |
| | If "Yes," see instructions and file Form 4720, Schedule N. | | | 1 | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment | t income? | 16 | - | X | | | | |
| | if "Yes," complete Form 4720, Schedule O. | | <u> </u> | 1 | 1 | | | | |

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

| | Check if Schedule O contains a response or note to any line in this Part VI | ******** | | X | | | | |
|-----|--|----------|---|--|--|--|--|--|
| Sec | tion 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 1a 1a | | | | | | | |
| | 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 on Schedule O. | | | | | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent 1b 13 | | | | | | | |
| 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 | | X | | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | | | | | |
| | of officers, directors, trustees, or key employees to a management company or other person? | 3 | | X | | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X | | | | |
| 6 | Did the organization have members or stockholders? | 6 | | 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? | 7a | | X | | | | |
| h | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | *************************************** | | | | | |
| - | persons other than the governing body? | 7b | | Х | | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | | | | |
| - | The governing body? | 8a | Х | | | | | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | | X | | | | |
| | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | | | | | |
| 9 | | 9 | | х | | | | |
| 500 | organization's mailing address? If "Yes," provide the names and addresses on Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | 13 | | <u></u> | | | | |
| 360 | tion B. Policies (This Section B requests information about policies not required by the internal nevertice Code.) | | Yes | No | | | | |
| 40- | Did the assessmention have lead about on bromates, or offlicted | 10a | 163 | X | | | | |
| | Did the organization have local chapters, branches, or affiliates? | IVa | | | | | | |
| b | 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? | | | | | | | |
| _ | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | | | | | | | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | 12a | Х | | | | | |
| 12a | , , , | | | | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Х | ├ | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | - | | | | | |
| | in Schedule O how this was done | 12c | X | | | | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | | | | | |
| 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 | Λ | | | | | |
| b | Other officers or key employees of the organization | 15b | | X | | | | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | | | | | |
| | taxable entity during the year? | 16a | <u> </u> | <u>X</u> | | | | |
| 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 | <u> </u> | <u></u> | | | | |
| Sec | tion 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 | y) ava | ilable | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | | | | | |
| | Own website X Another's website X Upon request Other (explain on Schedule O) | | | | | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a | nd fina | ncial | | | | | |
| | 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 | | | | | | | |
| | | Eorn | . 000 | (2019) | | | | |

Part VII 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

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.

See instructions for the order in which to list the persons above.

| (A) Name and title | (B) Average hours per week | box | , unle: | ss pe | itior more rson | than is bot or/trus | h an | (D) Reportable compensation from | (E) Reportable compensation from related | (F) Estimated amount of other |
|----------------------------------|--|--------------------------------|--|----------|-----------------------|---------------------------------|----------|---|---|--|
| | (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (1) DONN THANE | 4.00 | | | | | | | | | 0 |
| CHAIRMAN | | X | ļ | X | <u> </u> | ├ | ┡ | 0. | 0. | 0. |
| (2) RICHARD NOLLE | 4.00 | Į., | | х | | | | 0. | 0. | 0. |
| VICE CHAIRMAN | 4.00 | X | | _ | - | ├- | - | 1 0. | U • | <u> </u> |
| (3) WARREN KNOX SECRETARY | 4.00 | x | | X | | | | 0. | 0. | 0. |
| (4) DAVID WALKER | 4.00 | A | | <u> </u> | - | \vdash | - | U • | 0. | · · |
| TREASURER | 7.00 | X | | х | | | | 0. | 0. | 0. |
| (5) ALAN DOERR | 2.00 | 1 | ╁ | - | ╫ | ╁ | | <u> </u> | | |
| DIRECTOR | | x | | | | | | 0. | 0. | 0. |
| (6) JANETH MARROLETT | 2.00 | | \vdash | \vdash | \vdash | t^- | ┢ | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (7) ERIC TRYGG | 2.00 | T | | | T | 1 | T | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (8) DON WAGNER | 2.00 | | Π | | П | Π | Π | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (9) PETE WILLIAMS | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (10) STEVE EUBANKS | 2.00 | | | | | l | | _ | | |
| DIRECTOR | | X | | <u> </u> | | <u> </u> | <u> </u> | 0. | 0. | 0. |
| (11) SUE HOEK | 2.00 | | | | ĺ | | | | | |
| DIRECTOR | | X | <u> </u> | <u> </u> | <u> </u> | <u> </u> | ┞ | 0. | 0. | 0. |
| (12) WANDA MERTENS | 2.00 | ١., | | | | | | 0. | ٥. | _ |
| DIRECTOR | 2.00 | X | ₩ | | - | | - | <u> </u> | 0. | 0. |
| (13) HANK WESTON | 2.00 | x | l | | | | | 0. | 0. | 0. |
| DIRECTOR (14) JAMIE JONES PURKEY | 45.00 | <u> </u> | - | \vdash | ├- | ╀ | ╀ | V • | V • | ļ |
| EXECUTIVE DIRECTOR | 43.00 | 1 | | x | | | | 102,513. | 0. | 9,000 |
| EABCUTIVE DIRECTOR | | ╁ | ┼ | <u> </u> | ╁ | ╁ | ╁ | 102,313. | | 3,000. |
| | | 1 | | | | | | | | |
| | | +- | T | t | ╁╴ | + | t | <u> </u> | | |
| | | 1 | | | | | | | | |
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| | | 1 | | | | 1 | | | | |

932007 01-20-20 Form **990** (2019)

94-3317612

| Par | t VII Section A. Officers, Directors, Trus | tees, Key Em | ploy | ees | , and | d Hi | ighe | st C | Compensated Employe | es (continued) | | | | |
|---|--|--|-----------------|-----------------------|----------------------|-----------------------------|---------------------------|--------------|--|--|-------|-----------------------------------|---|------------------|
| | (A) (B) Name and title Average hours per | | | not c , unle | Pos heck ss pe | C) ition more rson | 1 than is bot | one h an | (D) Reportable compensation | (E) Reportable compensation | | (F) Estimat amount | | |
| | | week (list any hours for related organizations below line) | tee or director | institutional trustee | Officer | Γ | Highest compensated 14/20 | Ė | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MIS | s | com fr org an | other pensa om th anizat d relat anizati | e tion ted |
| | | | | | | | | | | | | | | |
| - | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | |
| *************************************** | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | Subtotal Total from continuation sheets to Part V | Il Section A | | | | | | > | 102,513. | | 00. | | 9,0 | 00. |
| | Total (add lines 1b and 1c) | | | | | | | | 102,513. | | 0. | | 9,0 | |
| 2 | Total number of individuals (including but r compensation from the organization | ot limited to th | nose | liste | ed a | bov | e) w | ho r | received more than \$100 | 0,000 of reportab | le | | r | 1 |
| 3 | Did the organization list any former officer | | | key (| emp | loye | e, o | r hiç | ghest compensated em | oloyee on | | | Yes | No |
| 4 | line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si | | | | | | | | ther compensation from | | | 3 | | X |
| 5 | and related organizations greater than \$15 Did any person listed on line 1a receive or | | | | | | | | | | | 4 | | X |
| Sec | rendered to the organization? If "Yes," contion B. Independent Contractors | | | | | | | | *************************************** | | | 5 | | X |
| 1 | Complete this table for your five highest co | | - | | | | | | | | npens | ation | from | |
| | the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) Name and business address NONE Description of services | | | | | | | | () | C) ensatio | | | | |
| | Name and business | address | 1/1/ | ON | <u> </u> | | | | Description of | sei vices | | Jonipe | | 711 |
| | | | | | | | | | | | | · | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | ····· | | | | | | |
| *********** | | | | | | | | | | A | | | | |
| 2 | Total number of independent contractors (| • | not I | imite | ed to | | ose I | iste | l d above) who received i | nore than | | | | |

Part VIII

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Revenue excluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 1 a Federated campaigns 15,748. **b** Membership dues c Fundraising events 1c d Related organizations 3,198,733. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 161,732. similar amounts not included above ... g Noncash contributions included in lines 1a-1f 1g \$ 73,376,213. h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses ... c Rental income or (loss) 6c d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities 3,000. assets other than inventory b Less: cost or other basis Other Revenue and sales expenses c Gain or (loss) 3,000. 3,000. 3,000. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities ▶ 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous d All other revenue e Total. Add lines 11a-11d 3,000 379,215 0. Total revenue. See instructions

Form 990 (2019)
Part X | Balance Sheet

| - di | T X | | L. A | Italia da Alta Paris V | | | |
|-----------------------------|---|---|----------|---|-------------------|-------|-------------|
| | *************************************** | Check if Schedule O contains a response or no | te to ar | ny line in this Part X | (A) | ····· | (B) |
| | | | | | Beginning of year | | End of year |
| | 1 | Cash - non-interest-bearing | | | | 1 | |
| | 2 | Savings and temporary cash investments | | | 62,255. | 2 | 381,627 |
| | 3 | Pledges and grants receivable, net | | | 235,453. | 3 | 332,266 |
| | 4 | Accounts receivable, net | | | | 4 | |
| | 5 | Loans and other receivables from any current of | | | | | |
| | | trustee, key employee, creator or founder, subs | | | | | |
| | | controlled entity or family member of any of the | | · · | | 5 | |
| | 6 | Loans and other receivables from other disqual | | | | | |
| | | under section 4958(f)(1)), and persons describe | - | · · · · · · · · · · · · · · · · · · · | | 6 | , |
| ည | 7 | Notes and loans receivable, net | | Name of the state | | 7 | |
| Assets | 8 | Inventories for sale or use | | | | 8 | |
| AS | 9 | Prepaid expenses and deferred charges | | | 5,474. | 9 | 23,862 |
| | 10a | Land, buildings, and equipment: cost or other | 1 | | | | |
| | | basis. Complete Part VI of Schedule D | 10a | 610,388. | | | |
| | b | Less: accumulated depreciation | | | 31,687. | 10c | 413,554 |
| | 11 | Investments - publicly traded securities | | ************************************** | | 11 | |
| | 12 | Investments - other securities. See Part IV, line | | | | 12 | |
| | 13 | Investments - program-related. See Part IV, line | | | | 13 | |
| | 14 | Intangible assets | | 14 | | | |
| | 15 | Other assets. See Part IV, line 11 | 871. | 15 | 0 | | |
| | 16 | Total assets. Add lines 1 through 15 (must equ | | | 335,740. | 16 | 1,151,309 |
| | 17 | Accounts payable and accrued expenses | 159,232. | 17 | 218,345 | | |
| | 18 | Grants payable | | 18 | | | |
| | 19 | Deferred revenue | 46,963. | 19 | 675,968 | | |
| | 20 | Tax-exempt bond liabilities | | 20 | | | |
| | 21 | Escrow or custodial account liability. Complete | | | | 21 | |
| S. | 22 | Loans and other payables to any current or for | | | | | |
| Liabilities | | trustee, key employee, creator or founder, subs | | | | | |
| api | | controlled entity or family member of any of the | se per | sons | | 22 | |
| _ | 23 | Secured mortgages and notes payable to unrel | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelate | d third | parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | | | | | |
| | | parties, and other liabilities not included on line | s 17-24 | l). Complete Part X | | | |
| | | of Schedule D | | ******* | 31,655. | | 140,247 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 237,850. | 26 | 1,034,560 |
| <i>'</i> ^ | | Organizations that follow FASB ASC 958, ch | eck he | re 🕨 🗓 | | | |
| ĕ | | and complete lines 27, 28, 32, and 33. | | | | | |
| ᇤ | 27 | Net assets without donor restrictions | 97,890. | 27 | 116,749 | | |
| 8 | 28 | Net assets with donor restrictions | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | 28 | |
| ב | | Organizations that do not follow FASB ASC | 958, ch | eck here | | | |
| Ē | | and complete lines 29 through 33. | | | | | |
| ဂ ဂ | 29 | Capital stock or trust principal, or current funds | s | | | 29 | |
| se. | 30 | Paid-in or capital surplus, or land, building, or e | | | | 30 | |
| A | 31 | Retained earnings, endowment, accumulated in | ncome, | or other funds | | 31 | |
| Net Assets or Fund Balances | 32 | Total net assets or fund balances | | *************************************** | 97,890. | 32 | 116,749 |
| | 33 | Total liabilities and net assets/fund balances | | | 335,740. | 33 | 1,151,309 |

Form **990** (2019)

| Pa | rt XI Reconciliation 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 | 3,37 | 9,2 | 15. | | | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 3,35 | 3,3: 3,9 | 14. | | | | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | Net unrealized gains (losses) on investments | | | | | | | | |
| 6 | Donated services and use of facilities | 6 | | | | | | | |
| 7 | Investment expenses | 7 | | | | | | | |
| 8 | Prior period adjustments | 8 | - : | 2,0 | 42. | | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | | | 0. | | | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | | | | | |
| | column (B)) | 10 | 11 | 5,7 | 49. | | | | |
| Pa | rt XII Financial Statements and Reporting | | | | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | | | | | |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | 0. | | Yes | No | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X | | | | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? | | | | | | | | |
| С | 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: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, | | | | | | | | |
| За | 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 on Schedule O. 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? | | | | | | | | |
| b | 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 on Schedule O and describe any steps taken to undergo such audits | | | | | | | | |

932012 01-20-20