Form

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

2020 Open to Public Inspection

OMB No. 1545-0047

A		ne 2020 calendar year, or tax year beginning and ending			englister a central de contral de Contral de contral de
B	Check if	applicable C Name of organization PUBLIC ADVOCATE OF THE	a meneralan ang kalanggan dan kalanggan dan kalanggan dan beranggan dan belanggan dan belanggan dan belanggan	D Employe	r Identification number
	Address	change UNITED STATES		occupants.	
П	Name ch	nance Doing business as		52-1	112449
		Number and street or P.O. box if made street address)	Room/suite	E Telephor	
\sqsubseteq	Initial retu				845-1808
	Final retu	and a state of branches, continue, and Zile of the Board code	The second secon		
\sqcap				G Gross rec	eipts 3 1,547,657
	Amende	F Name and address of principa		O Glossiec	eipiss 2/02//00/
Ш	Application	on pending EUGENE DELGAUDIO	H(a) Is this a gr	oup return for s	subordinates? Yes X No
			H(b) Are all sub		uded? Yes No
1	Tay.ava	ampt status 501(c)(3) X 501(c) (4) (insert no.) 4947/al/11 or s		allaul a list	See instructions
<u>-</u>	Website		527		
K	***************************************		H(c) Group exe		
-	art	The state of the s	L Year of formation: 1	978	M State of legal domicite: DC
	-	Summary			
	7	Briefly describe the organization's mission or most significant activities:			
e		IMPROVEMENT OF GOVERNMENTAL INSTITUTIONS AND PROC	ESSES THROUGH	PUBLIC	
E		EDUCATION			
Activities & Governance		The state of the s			
Š	2	Check this box ♦ if the organization discontinued its operations or disposed of mor	than 250/ -514		
<u>ن</u>	3	Number of voting members of the governing body (Part VI, line 1a)	e than 25% of its het ass	1 1	A
S	4	Number of independent voting members of the governing body (Part VI, line 1b)		3	4
=	5	Total number of individuals ampleured in a land decrease appear of the Total numbers of individuals ampleured in a land decrease appearance and the Total numbers of individuals ampleured in a land decrease appearance and the Total numbers of the Total numbers of individuals ampleured in a land decrease appearance and the Total numbers of the Total numbers of individuals ampleured in a land decrease and the Total numbers of th		4	3
ĊĘ.	6	Total number of individuals employed in calendar year 2020 (Part V, line 2a)		5	14
4		Total number of volunteers (estimate if necessary)		6	0
		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		. 7b	0
		Oracle Control of the	Prior Yea	-	Current Year
3		Contributions and grants (Part VIII, line 1h)	1,65	3,694	1,440,196
(e)		Program service revenue (Part VIII, line 2g)			0
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			0
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,946	107,461
Marquistan		Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,72	7,640	1,547,657
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		800	6,600
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0
ŝ	40	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	119	9,500	148,539
138	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0
Expenses	b'	Total fundraising expenses (Part IX. column (D), line 25) ♦ 158,553			
页	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1 541	5,680	1,391,194
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	- Some manufacture of the second of the seco	and the second s	the second secon
			1 1 Particular Management Control of the Control of	5,980	1,546,333
- W	19	Revenue less expenses. Subtract line 18 from line 12	The state of the s	L,660	1,324
Net Assets or Fund Balances	20 .	Total assets (Part X, line 16)	Beginning of Cur	-	End of Year
Ass	21	Total liabilities (Part X, line 26)	24	1,788	126,112
Net	22	Net assets or fund balances. Subtract line 21 from line 20		0 4,788	100 110
	art II	Signature Block	14.	1, 100	126,112
Bearing to the same	APPROXIMATION OF THE PERSON OF			profit and committee the state of the state	
tri	ue, corr	nalties of perjury, I declare that I have examined this return, including accompanying schedules ar ect, and complete. Declaration of preparer (other than officer) is based on all information of which	nd statements, and to the be	est of my kn	owledge and belief, it is
****		Pure Dolla	preparer has any knowledg		11 2 2 2 2 1
Sig	600	Signature of officer		NO	U. 3 2021
		A THE PROPERTY OF THE PROPERTY		Date	
He	re		RESIDENT		
		Type or print name and title			
Paid	rđ.	Print/Type preparer's name Preparer's name	Date	Check	X d PTIN
		Nelson L Castner	11-2-	self-em	ployed P00006674
	parer	Firm's name " NELSON L. CASTNÉR CPA	F	rm's EIN "	54-0675255
use	Only				
		Firm's address	9	none no,	703-256-3920
		RS discuss this ret			X Yes No
For	Paperw	vork Reduction Act		1	En. 990 (2020)

orm 990 (2020) Part III S	PUBLIC	ADVO	CATE	OF THE			52-1	112449		Page 2
	heck if Sc	chedule C	contain:	rice Accor	mplishm	ents e to any lir	ne in this P	ert III		X
i bliefly desci	the the orga	inization's r	mission:							A
IMPROVED EDUCATION	ON WENT O	F. GOV	ERNMEN	VTAL IN	ISTITU	TIONS :	AND PRO	CESSES	THROUGH P	UBLIC
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2 Did the orga prior Form 9	nization und 90 or 990-F	lertake any 72	significant	program ser	vices during	g the year wh	ich were not	listed on the		
If "Yes," des			es on Sche	dule O						Yes X No
3 Did the orga services?	nization cea	se conduct	ing, or mak	e significant	changes in	how it condu	ucts, any prog	gram		Yes X No
If "Yes," des	cribe these	changes or	Schedule	Ο.						les v wo
4 Describe the expenses. So the total expenses.	ection porto	:)(3) and 50	11(c)(4) org:	anizations ai	re required !	to report the	largest progra amount of gra	am services, ants and allo	as measured by cations to others,	
4a (Code:		enses \$	1,1	65,536	including	grants of \$		6,600) (Revenue \$	market and approximate the second
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lb (Code: N/A) (Expe	enses \$			including	grants of \$		4.6 1 3) (Revenue \$,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,
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c (Code:) (Exp	enses \$	enkeri in sykratickem entermenten aanda (aus ils n.a.).	1	including	grants of \$) (Revenue \$	**************************************
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4d Other progra	am senicec	(Describe	on Schodul	۹0)			May in grant and state grant and analysis and an extension of a		Appart and resident of the feet for the flat free free and the state and the state of the free free free free free free free fr	
		(ครอบเทล เ								
(Expenses	\$	Market Market State Committee Commit	ıncı	uding grants	of S) (R	Revenue \$)

Part IV Checklist of Required Schedules

1	Is the organization described in section 501/c)/3) or 4047/c)/4) (-1)	-	Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A			
2		1		X
3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
•	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
•	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			Annual California
5	election in effect during the tax year? If "Yes," complete Schedule C, Part If	4		
J	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.			arterior and a second
	assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C. Part III	5		X
6	bid the organization maintain any donor advised funds or any similar funds or accounts for which donors	Part of the land o		Personal Property Communication of the Communicatio
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	res, complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		http://www.ministrace.com
	the environment, historic land areas, or historic structures? If "Yes." complete Schedule D. Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes."			
	complete Schedule D, Part III	8	The state of the s	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	and the same of th	***************************************	
	debt negotiation services? If "Yes," complete Schedule D, Pert IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			This work the bedges.
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	ALAKE SERVICE	-	42
	VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	Constant Constant	-	
	complete Schedule D, Part VI	44-	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	11a	^	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	110		22
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	110		41
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	-	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		42
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	116		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		42
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124	~	Californi Million an
_	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	125		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13		
b		14a		X
D	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		-	el 3r
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	45		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		X
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		44
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			America Supercon Versilo.
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		44
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		4 A
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
***********	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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Checklist of Required Schedules (continued) Part IV

22	District the second sec		Yes	Ma
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1	res	No
23	The state of the s	22		x
20	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 componented			an out of the same
24a	employees? If Yes, complete Schedule J	23		X
a Tu	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
b	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
C	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	245		
·	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
d	to defease any tax-exempt bonds?	24c		MACROSHIP CONTRACTOR C
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		of the state of th
200	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	And in the second		
b	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
-	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	Service Services	dipoppagain	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	- Income	Section 201	
26		25b		X
	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			**
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	26		X
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee	and the second		
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these		-	
	persons? If "Yes," complete Schedule L. Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part	61		42
	IV instructions, for applicable filing thresholds, conditions, and exceptions):	phenylipments		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	entractive control	and the same of th	
	"Yes," complete Schedule L, Part IV	28a	all and a second	X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			(Marris III and Marris Sharper
	"Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33	-*## <u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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)? If "Yes," complete Schedule R, Part V, line 2	254		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b	(Mary Market Printerlands)	
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		Subjective (LEGISTRA)	
Venezione	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance	and the same of th	**************************************	
Torintecophrosp	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			- Andrews
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	- Andrews		-
DA4	reportable gaming (gambling) winnings to prize winners?	1c	X	
DAA		For	m 99((2020)

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

2=	Enter the number of ampleuses reported as 5	P-manuscript	Yes	No
es CI	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 14		Williamproduces	
IJ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
b	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
4a	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
74	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
h	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country •	and the state of t		
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
C	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
wa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X	
~	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	The state of the s		
7	Organizations that may receive deductible contributions under section 170(c).	6b	X	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	-		
	and services provided to the payor?	-		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		and the second second
	required to file Form 8282?	-	-	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7 _G		-
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	75		NAME OF TAXABLE PARTY.
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		************
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Million Manager Street Street Street
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	-	A LONGO CONTRA	
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		hy principalities	
11	Section 501(c)(12) organizations. Enter		A. January State Control of the Cont	
а	Gross income from members or shareholders		on the second se	
b	Gross income from other sources (Do not net amounts due or paid to other sources		Control of the Contro	Barrell State Challen
40	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is 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?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	if "Yes " complete Form 4720, Schedule O.			
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Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 Section A. Governing Body and Management Yes 1a Enter the number of voting members of the governing body at the end of the tax year No 4 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. Enter the number of voting members included on line 1a, above, who are independent 3 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? 2 X Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? X 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 5 6 Did the organization have members or stockholders? X 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a The governing body? X 88 Each committee with authority to act on behalf of the governing body? X 8b 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 on 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 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 Did the organization have a written document retention and destruction policy? 14 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? X The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization X 15b 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? X 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, CT, FL, IL, KS, KY, MD, MS, NC, NJ, NY 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. 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, 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 • EUGENE DELGAUDIO

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.

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

		y related organization compensated any current officer, director, or trustee.									
(A) Name and title	(B) Average hours per week (fist any hours for	offi	k, unle icer ar	Pos check ess pe nd a d	rson liracto	than o	án (e)	(D) Reportable compensation from the crganization (W-2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	related organizations below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(AAS) (OSO-MISC)	(W-2/1099-MISC)	organization and related organizations	
(1) EUGENE DELGAUDIO							Service Consumer State of Stat				
PRESIDENT	0.00	X	The state of the s	X		A domination of the second		0	0	0	
(2) PAUL SERRANO	Committee of the Commit	-			-			<u> </u>		<u> </u>	
	1.00				-						
SECRETARY/DIRECTOR	0.00	X		X	-	The second secon		0	0	0	
(3) STEPHEN MIROY	1.00										
TREASURER/DIRECTOR	0.00	X		X	- Constitution of the cons	****		0	0	0	
(4) MARK CLAYTON		28		25 65				<u></u>		_	
VICE PRES/DIRECTOR	1.00	х		x				0	0	0	
(5)		1	-	1	1					Anna and Anna Anna and a trace of the first	
• • • • • • • • • • • • • • • • • • • •				(Collingary Collins)	and the same of th						
(6)			The same of the sa	- Company of the Comp							
			And the second second second	The second secon							
(7)	many property				and the same of						
		year of the second second	A Charles of the Control of the Cont	and in the second		descript extended	Account and a series of the se			ninchini representati	
(8)				The same of the sa							
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(9)		1	1	-	-	1					
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(10)				1		The second secon					
	-	-	No. of Concession, Name of Street, or other Persons, Name of Street, Name of S	Secretarion of the second	Personal Property of the Person of the Perso	All productions and the second	MINISTER AND			Section 1	
(11)			-	72	-						
		Section of the section of	Militaritescherist	Control of the Contro	THE PROPERTY OF THE PROPERTY O		The state of the s			BELLEVICE GLADOWS	

Part VII Section A. Officers	, Directors, Tru	ıste	es, K	(ey E	mp	oyee	es, a	and Highest Compensated	Employees (continued)	The second secon	Page (
(A) Name and title	(B) Average hours per week (list any	(c)	io not ox, uni	(C) sition more erson	than (one ne r	(D) Reportable compensation from the organization	(E) Reportable compensation from related crganizations	(F Estimated of ot comper from	i amount her isation
	hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	related orga	ion and
			Management and management of the state of th		Market Control of the Control of the Personal of the Control of th	entage production for great management a science great and consequences.					tarian da anti-anti-anti-anti-anti-anti-anti-anti-
					in degrade Company (see 1970), and a company of the						in the entire the second secon
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		The state of the s									***************************************
		The control of the co									
			A CONTRACTOR OF THE CONTRACTOR				SALET TO POST AGE			mentamente en mentemente en mentemente de la place de la completa de la completa de la completa de la completa	rheiser-A dele airmeil (des urrestation com protocoloxica) achievate
		to the day was referenced by the property of the control of the co							,		Ahmininian muuralim Lähminen ahminen lääjään saasinnoidest.
	1		Section of the Control of the Contro		The same of the sa	The second secon	chemical land				
c Total from continuation she	ets to Part VII, S	Sect	ion /	Α,		Lamen	\$				
d Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov	e) who received more than	\$100,000 of		Yes No
3 Did the organization list any for	ormer officer, dir	ecto	ır, tru	istee	, key	em)	ploy	ee, or highest compensated	d	1	
employee on line 1a? If "Yes, 4 For any individual listed on lin organization and related organ individual	e 1a, is the sum	of re	eport	able	com	pens	satio			3	X
5 Did any person listed on line for services rendered to the or									individual	5	x
Section B. Independent Contractor Complete this table for your fi	ve highest comp	ensa	ated	inde	penc	ient (conti	ractors that received more	than \$100,000 of		
compensation from the organ	(A)	omp	ensa	ation	for t	he ca	alend		in the organization's tax you (B) tion of services		(C) ompensation
EUGENE DELGAUDIO & A	l pusiness address ASSOCIATES	I	NC					The state of the state of the state of	tion of services	c	ompensation
SABER COMMUNICATIONS FALMOUTH		2	24				SF	MANAGEMENT HINGTON ST COORDINATION			181,101
INNOVAIRRE					117		SLF	TON FARM ROAD			1//,110
FOREST CORPORATE COMMUNICA:	TIONS GROU	P			800) C	CONTRACTOR DE	PRINTING & MA] ÆRCE DRIVE		innered and (1996). When the empire form generalized according to the contract of the contract	134,141
UPPER MARLBORO	MI) 2	207	74	Organistic Burkey Street, and Street,		I	PRINTING & MAI	[L		127,100
Total number of independent received more than \$100 000	contractors (incli	uding	g but	t not	limit	ed to	tho	se listed above) who	4		
DAA	The winds	. 110	415	J 1/1	2543112		. *		4	Fo	m 990 (2020

Part VIII Statement of Revenue Check if Schedule O conta

Phonococc	THE RESIDENCE OF THE PERSON NAMED IN	Oncor	" 00	riedule O cor	itains a	a respoi	nse or not	e to any line in thi	s Part VIII		
	ongo manda manananananananananananananananananana							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from lax under sections 512-514
nts	1a	Federated cam	paign	IS	1a	The state of the s	COST, Try Manuscon Cost (Annual Cost Cost Cost Cost Cost Cost Cost Cost		The country is the standing country to consider the construction of the standing of the country		
Sra	b	Membership du			1b	- Control Cont					
S, C	С	Fundraising eve			St. Standing control that cough	CARAGES CARACTER STORES		nia d			
Sift	d	Related organiz			1c	- Anna Carlo	The state of the s				
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (c			1d	Commence of the Commence of th				Control of the Contro	
E C	4				1e					Copyrigina	
her	and the same of th	All other contributions and similar amounts ri	, gifts, g	yrants.	The second secon			dimension and the state of the		il interpretation in the control of	
E E					1f	1,	440,196	5		quanti	
Po	9	Noncash contributions	includ	ed in lines 1a-1f	1 g	S		The state of the s	and the state of t		
O m	h	Total. Add lines	1a-1	1 f			•	1,440,196	The state of the s		
							Business Code	-			
ce	2a									THE RESIDENCE OF THE PROPERTY	
Program Service	b	. ,					And a second of the Anti-				
n S	C										
Rey	d					*	Processor de Challemannes and a second			****	
Pro	е					*	MANAGER AND PROPERTY OF STREET, STREET				
****	f	All other program	n ser	vice revenue			The state of the s	The state of the s			
Announce	9						•				
	3	Investment inco	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	Property States in the Contract of the Contrac	ds inter	hne tea					
		other similar am	ounts	3)	-0, 11101	CSL, GIIG		The second secon			
	4	Income from inv			t hand .						A TOTAL CONTRACTOR OF THE PROPERTY OF THE PROP
	5	Royalties	Courn	citt of tax-exemp	r pona i	proceeds	. •				
	·	rioyanics	-	11.0-1		1 4 7 7 4	*	107,461			107,461
	6a	Gross rents		(i) Real	-	(ii) P	ersonal				
-			6a				sales (Medystale) (Stephen and Andrews Andrews (Andrews Andrews (Andrews (A				
	b	Less: rental expenses	-		-		The Control of the Co				
	c	Rental inc. or (loss)	6c		1						
and the same of th	7a	Net rental incom Gross amount from	e or	(loss)			. •				and the control of the control of the second
-	74	sales of assets		(i) Securities		(ii)	Other				AN CARTESTIC STATE OF THE CONTRACT CONTRACT OF THE PROPERTY CONTRACT CONTRA
		other than inventory	7a					d coldinates			
ree	b	Less: cost or other			200		An Die Control of Cont	The state of the s		Parameter and the second secon	
Other Revenue		basis and sales exps.	7b		To the second se				transition new	and the second s	
Re	c	Gain or (loss)	7c			COMPANIES COMPANIES COMPA	adantini dala affirmation neglam (in magini musicus morpholis)			- Control of the Cont	
9	d	Net gain or (loss	5)		-	A CONTRACTOR OF THE PARTY OF TH	•				
O.	8a	Gross income from	fundr	aising events							
		(not including \$									
		of contributions rep	orted	on line 1c).							
		See Part IV, line 18			8a						
	b	Less: direct expe			8b	Company and Color Section 1997	Committee of the State of the S				
		Net income or (I			An amount of the same of the same of	THE OWNER OF THE PERSONS	•	The second secon			
-		Gross income from			Venis	A CONTRACTOR CONTRACTO					
-		See Part IV, line 19		ng accornes.	0-					***	
	h	Less: direct expe	4 1 2		9a	The state of the s		The state of the s	ng pangangan pangan pan		
		Net income or (le			9b	Profit of the state of the stat	**************************************				
		Gross sales of in			vities	Company of the Compan	•				TO THE PROPERTY WHEN A STATE OF THE PROPERTY O
and the same of th	iva	returns and allow			en reminer de				1		
	6				10a	North Commence of the Commence		transport			
ALE STATE OF THE PERSON NAMED IN		Less: cost of god			10b	and the second s					
_	-	Net income or (le	08S) T	rom sales of inve	entory.		. •				
sno	440					1	Business Code				
ne	11a	3 ×	A A			· ·					
ella	b					· · ·					
Miscellaneous Revenue	Ċ	A !!				a research					
S		All other revenue					Street of the traphic local material control and a line				
		Total. Add lines									
***************************************	12	Total revenue.	See in	nstructions	-		*	1,547,657	0	0	107,461

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) propriettings must seem letter

********	on 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a response	se or note to any line in this	s Part IX	terent en	A second
Do n 7b, 8	ot include amounts reported on lines 6b, b, 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				the commence of the commence o
_	and domestic governments. See Part IV, line 21	6,600	6,600		
2	Grants and other assistance to domestic		Sabhippe		
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	FORCE SALES			
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	The state of the s			
5	Compensation of current officers, directors,	na en			
6	trustees, and key employees	THE COLUMN TO SERVICE OF THE COLUMN TWO COLUMNS AND ADDRESS OF THE COLUMN THE			
o	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	120 000	05 200	00 550	
8	for the state of t	138,998	85,308	29,518	24,172
v	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	pi i i i i i i i i i i i i i i i i i i			
9	Other employee benefits				
10	Payroll taxes	9,541	5,839	2 040	4 CEA
	Fees for services (nonemployees):	3,347	3,039	2,048	1,654
	Management	181,101	60,367	60,367	60,367
	Legal	47,553	12,500	25,000	10,053
	Accounting	67,500	ALL DOG 1 TO CO.	67,500	20,000
d	Lobbying	The second secon	THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	Control of the Contro			art de ce en come con come un appropriate de la conferencia del la
g	Other. (If line 11g amount exceeds 10% of line 25, column	The second secon	A MANAGEMENT OF METERS OF WETCH A SHOW MANAGERY TO A SHOW A STANDARD OF THE ST	The second court is the force of policy or the control of the cont	in commence and an experience of the second angle of the first of the design of the second and t
	(A) amount, list line 11g expenses on Schedule (C.)	28,550	25,759	2,711	80
12	Advertising and promotion				
13	Office expenses	16,993	8,497	8,496	
14	Information technology	NAMES OF THE OWNER, AND THE PARTY OF THE OWNER, AND			
15	Royalties				
16	Occupancy	15,628		15,628	
17	Travel	4,946	4,451	495	
18	Payments of travel or entertainment expenses				
2.2	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	330	330		du la conferir de constitue en la situativa influenca a discreta constituir en conveniente en conveniente en c
20	Interest				
21	Payments to affiliates	91		91	
22 23	Depreciation, depletion, and amortization	2,689	1,345	1,344	
24	Insurance Other expenses, Itemize expenses not covered	2,009	1,343	1/394	
	above (List miscellaneous expenses on line 24e. If	and the second			
	line 24e amount exceeds 10% of line 25, column	dissandifference			
	(A) amount, list line 24e expenses on Schedule O)	style system		and a second	
а	PRINTING AND MAILING	316,486	298,931		17,555
b	POSTAGE	304,999	284,545	3,744	16,710
c	INTERNET EXPENSE	170,181	160,741		9,440
d	CREATIVE AND COORDINATING	125,292	118,342		6,950
е	All other expenses	108,855	91,981	5,302	11,572
25	Total functional expenses. Add lines 1 through 24e	1,546,333	1,165,536	222,244	158,553
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				
	following SOP 98-2 (ASC 958-720)	1,009,484	953,489		55,995
DAA	The second secon	The second secon	namen and the second	erententerententententententententententententente	Form 990 (2020)

Part X Balance Sheet

T .			and control of the co	(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	and the second s		122,414	1	123,829
2	Savings and temporary cash investments			And the second section of the section of	2	do to y 4 to s
3	Pledges and grants receivable, net		,		3	
4	Accounts receivable, net	*	,	netraniem contraten en actual annotation de la complete de la complete de la contrate de la contrate de la complete del la complete de la complete del la complete de la complete del la complete de la complete de la complete del la complete della complete della complete della complete de	4	d militaria in displanta magane i sitta tita tita tita tipa propositi di sperio di militaria mendigui della mendi sitti i senti
5	Loans and other receivables from any current or former	officer, director,				
	trustee, key employee, creator or founder, substantial contributor, or 35%				Sporter Section 1	
	controlled entity or family member of any of these person	ns	i de la companio della companio dell	The state of the s	5	
6	Loans and other receivables from other disqualified pers-	ons (as defined				
3	under section 4958(f)(1)), and persons described in secti	ion 4958(c)(3)(B)	District of the second	## PER	6	
7	Notes and loans receivable, net		**		7	
8	Inventories for sale or use	**			8	American popularita de la fortilitación e especiar son topo de timo e con contrator de sede configuración de se escala de
9	Prepaid expenses and deferred charges	* * * * * * * * * * * * * * * * * * * *	-		9	erate fragministe francoisce somme un vegen en un state in media des grands de grands de la companya de la comp
10a	Land, buildings, and equipment: cost or other			The Association of the Control of th	-	
	basis. Complete Part VI of Schedule D	10a	12,003		eg jandere en	
b	Less: accumulated depreciation	10b	11,975	119	10c	28
11	Investments—publicly traded securities	The of the second contract of the second cont			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			2,255	15	2,255
16	Total assets. Add lines 1 through 15 (must equal line 33)		124,788	16	126,112
17	Accounts payable and accrued expenses				17	The second secon
18	Grants payable				18	
19	Deferred revenue				19	e (Connection foot Description) is the market to produce the Connection (Connection Connection Connection Conne
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete Part IV of	Schedule D		and the second contract of the second contrac	21	
22	Loans and other payables to any current or former office	r, director,				
sed 	trustee, key employee, creator or founder, substantial co	ntributor, or 35%				
ZZ ZZ	controlled entity or family member of any of these persor	ns			22	
23	Secured mortgages and notes payable to unrelated third	parties			23	
24	Unsecured notes and loans payable to unrelated third pa				24	
25	Other liabilities (including federal income tax, payables to	related third			appropriate and the second	
	parties, and other liabilities not included on lines 17-24).	Complete Part X			eijaja nobi vaja	
	of Schedule D				25	
26	Total liabilities. Add lines 17 through 25			0	26	0
	Organizations that follow FASB ASC 958, check here	* X	and the same of th			
8	and complete lines 27, 28, 32, and 33.					
27	Net assets without donor restrictions			124,788	27	126,112
28	Net assets with donor restrictions				28	
	Organizations that do not follow FASB ASC 958, che	ck here 🌢	atation-proper			
-	and complete lines 29 through 33.		ak-injuntereigen			
29	Capital stock or trust principal, or current funds				29	
9 30	Paid-in or capital surplus, or land, building, or equipment		. , , ,		30	
Net Assets or Fund balances 22 23 32 32 32 32 32 32 32 32 32 32 32	Retained earnings, endowment, accumulated income, or	r other funds			31	عقد الدائي الأحال الإن
® 32	Total net assets or fund balances			124,788	32	126,112
33	Total liabilities and net assets/fund balances			124,788	33	126,112

3b

Form 990 (2020)