Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Open to Public

Department of the Treasury

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

		2020 oalon		01/01			2/21	20 20			
<u>A</u>	•		dar year, or tax year beginning		2020, and end	iiig 1	2/31	, 20 20			
В		applicable:	C Name of organization THE LIB	RARY PROJECT INC			D Empl	oyer identification	number		
\sqcup	Address	· ·	Doing business as			Room/suite		20-1347443			
\sqcup	Name cha	ĭ	Number and street (or P.O. box if	mail is not delivered to street ac	ldress)	E Telep	E Telephone number				
Ц	Initial retu		2509 East Ridge Creek Road				_	602-490-0688			
Ц		n/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal	code						
Ц	Amended		Phoenix, AZ, 85024				_	s receipts \$	476,686		
Ш	Application	on pending	F Name and address of principal off			1			es 🗹 No		
_			2509 East Ridge Creek Road,					ubordinates included?			
<u> </u>		npt status:	✓ 501(c)(3)) ◀ (insert no.) 4947(a)(1) or 527						
<u>J</u>	•		prary-project.org		1		exemption				
K		_	Corporation Trust Associa	ation Other ►	L Year of form	nation: 2004	M State	of legal domicile:	AZ		
P	art I	Summa									
•			cribe the organization's miss								
Š	1		nced schools and orphanages	in the developing world. A	s of December	r 31, 2020, The	Library P	roject has donat	ted		
шa			on Schedule O, Statement 2)				OFO/ -4				
Activities & Governance			box ▶ ☐ if the organization	· · · · · · · · · · · · · · · · · · ·	-		1 _	its net assets.	_		
Ğ			voting members of the gove								
Se			independent voting member			•					
ξij			per of individuals employed in	,			. 5		1 200		
Ċ			per of volunteers (estimate if	- · · · · · · · · · · · · · · · · · · ·			. 6		1,000		
⋖			ated business revenue from	. 7a		0					
	b	ivet unreiat	ed business taxable income	from Form 990-1, Part I,	line 11	Prior Y	. 7b	0 11	0		
		O = 1= 4 11 1 1 1 1 1 1 1 1		Current Ye							
ne		Contributio	540,291		476,686						
Revenue		_	ervice revenue (Part VIII, line	0	-						
æ			income (Part VIII, column (A	0		0					
			nue (Part VIII, column (A), line	0		0					
			ue—add lines 8 through 11 (r	· · · · · · · · · · · · · · · · · · ·			540,291		476,686		
			I similar amounts paid (Part I				0		0		
		-	aid to or for members (Part I)		0 194,529 176						
Expenses	15		her compensation, employee	194,529	•						
ë	16a		al fundraising fees (Part IX, c		4,224		0		0		
Ä	b		aising expenses (Part IX, col								
_	''	•	enses (Part IX, column (A), lin	412,780		287,112					
			nses. Add lines 13–17 (must				607,309		463,907		
_ (19	Revenue le	ess expenses. Subtract line 1	8 from line 12	· · · · ·	Danimin mat 0	-67,018	FI - 4 V -	12,779		
Net Assets or Fund Balances		T-4-14	o (Dort V. line 10)			Beginning of C		End of Ye			
\sse	20		s (Part X, line 16) ties (Part X, line 26)				477,158		489,937		
let/	21 22		, ,				477.150		400.027		
	art II		or fund balances. Subtract I re Block	ine 21 iroin iine 20			477,158		489,937		
				voture in aludina accompanying	ahadulaa aad at	atamanta and ta	the best of	and transitional and	haliaf it ia		
			I declare that I have examined this e. Declaration of preparer (other than					Thy knowledge and	Deller, it is		
c :											
Si	_	Signati	nature of officer Date								
Here Thomas Stader, Executive Director											
		1	r print name and title								
Pa	iid	Print/Type	preparer's name	Preparer's signature		Date	Check	_			
	eparei	·					self-em	ployed			
	se Only		ne >			Fin	m's EIN ▶				
		Firm's add				Ph	one no.				
1/10	1 +ba ID	C diaguage t	this return with the preparer	-la la O C i t	-4:			□ Voc	□ NI a		

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line	in this Part III
1		
	The Library Project donates local language libraries, conducts teacher to	raining and children's literacy programs in Asia.
2	2 Did the organization undertake any significant program services duri prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	
3		iges in how it conducts, any program
Ū	services?	
	If "Yes," describe these changes on Schedule O.	
4		ach of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required	
	the total expenses, and revenue, if any, for each program service rep	orted.
4a		(Revenue \$ 476,686)
	Accommodation 3,078; Books 130,612; Furniture 64,889; Logistics 4,440	
	Partner Organization 5,935; Special Projects 1,878; Teacher Training 2,6 \$240,212. Operating Expenses (for details see Part IX, Column B) \$205,9	
	\$240,212. Operating Expenses (for details see Part IX, Column B) \$205,9	58. Total Program Expenses \$446,170.
4b	4b (Code:) (Expenses \$including grants of \$	6) (Revenue \$)
4-	As (Code \ \(\(\Gamma\)	\ (Davanus (f)
4c	4c (Code:) (Expenses \$including grants of \$	S) (Revenue \$)
4 :	Ad Other and the Company of the Comp	
4d	7	Povenue ¢
46		Revenue \$ 0)
4e	4e Total program service expenses ► 446,170	

Part IV **Checklist of Required Schedules** Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 2 1 2 Is the organization required to complete Schedule B, Schedule of Contributors See instructions? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 1 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 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 6 ~ 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 ~ 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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 9 V 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 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," 11a ~ Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. 14b ~ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 • Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Part	Checklist of Required Schedules (continued)			
	Dill		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		V
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		~
26	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? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee 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		_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		~
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		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	'	
Part				_
	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 0		162	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		~

Part	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	1			
b	If at least one is reported on line 2a, did the organization file all required federal employment	ax ret	urns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year			За		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on S			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
-14	a financial account in a foreign country (such as a bank account, securities account, or other finan			4a		~
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	Accou	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax			5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	-		5b		~
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,0					
Ju	organization solicit any contributions that were not tax deductible as charitable contributions'			6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such		butions 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			
		-		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property f	or wh	ich it was			
	required to file Form 8282?			7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal k	enefit	contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization fi			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund m	aintair	ned by the			
	-p			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 personal design and the sponsoring organization make a distribution to a donor, donor advisor, or related personal design and the sponsoring organization make a distribution to a donor, donor advisor, or related personal design and the sponsoring organization make a distribution to a donor, donor advisor, or related personal design and the sponsoring organization make a distribution to a donor, donor advisor, or related personal design and the sponsoring organization make a distribution to a donor, donor advisor, or related personal design and the sponsoring organization make a distribution to a donor, donor advisor, or related personal design and the sponsoring design and	son?		9b		
10	Section 501(c)(7) organizations. Enter:	1 1				
a	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:	ایما				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
40-	against amounts due or received from them.)	11b	10110	40-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		m 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.			120		
а	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedul			13a		
		5 O. 				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
С	the organization is licensed to issue qualified health plans	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	$\overline{}$		14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on			14b		_
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in			170		
10	excess parachute payment(s) during the year?			15		/
	If "Yes," see instructions and file Form 4720, Schedule N.			10		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investigation.	stmer	nt income?	16		~
	If "Yes," complete Form 4720, Schedule O.					

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. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 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 . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 ~ Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 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 Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b R Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b 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 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters. affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a ~ 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 13 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 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 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► AZ 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website ✓ Another's website ✓ Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 ▶ Thomas Stader, (602)490-0688

Part VI

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 heither the organization no	r any relate	a org	anız	atio	n c	ompe	ensa	ited any current (officer, director,	or trustee.
				(0	C)					
(A)	(B)	Position (do not check more than one						(D)	(E)	(F)
Name and title	Average hours per week (list any hours for	box,	unles er an	ss pe	rson	is both or/trus	n an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and
	related organizations below dotted line)	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	*			related organizations
Thomas Stader	40.00									
Chairman	40.00	~				~		30,000	0	0
Donn Garton	1.00									
Director	1.00	~						0	0	0
Philip McCrea	1.00									
Director	1.00	~						0	0	0
Neal Beatty	1.00									
Director	1.00	~						0	0	0
Kent Kedl	1.00									
Director	1.00	~						0	0	0
Amanda Yiu	1.00									
Director	1.00	~						0	0	0
Jeri Lim	1.00									
Director	1.00	~						0	0	0

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	±m∣	plo	yee	s, an	d F	lighest Compe	nsated Emp	oyees (continued)
	(A) Name and title	(B) Average hours per week	officer and a director/trus					an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	from the
1b	Subtotal			٠.	٠.				30,000		0 0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	•						>	30,000		0 0
2	Total number of individuals (including but	not limited						e) w			-
	reportable compensation from the organi	zation >							0		Yes No
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete s</i>							mpl	loyee, or highes	st compensate	
4	For any individual listed on line 1a, is the organization and related organizations individual										
5	Did any person listed on line 1a receive of for services rendered to the organization						,		•		
Secti	on B. Independent Contractors	: 11 163, 0	отпрі	CIC	301	ieut	ile o i	OI 3	such person .		3 7
1	Complete this table for your five high compensation from the organization. Repo					•					
	(A) Name and business add	ress							(B) Description of serv	vices	(C) Compensation
None											
2	Total number of independent contractor							th	nose listed abov	e) who	

Part VIII	Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to ar	ıy line in this Pa	ırt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts ts	1a	Federated campaig	ns .		1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues			1b	0				
ري ق	С	Fundraising events			1c	0				
fts,	d	Related organization	ns .		1d	0				
ia Gi	е	Government grants			1e	0				
ns,	f	All other contribution	ns, git	fts, grants,						
er S		and similar amounts no			1f	476,686				
호된	q	Noncash contribution	ons in	cluded in						
Contra	Ū	lines 1a-1f			1g	\$ 0				
g g	h	Total. Add lines 1a-	-1f .				476,686			
						Business Code				
Ce	2a									
e Z	b									
gram Ser Revenue	С									
am eve	d									
g &	е									
Program Service Revenue	f	All other program se								
_	g	Total. Add lines 2a-	-2f .			•	0			
	3	Investment income								
		other similar amoun								
	4	Income from investr	nent o	of tax-exem	npt bo	nd proceeds ►				
	5	Royalties				🕨				
				(i) Rea		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6с		0	0				
	d	Net rental income o	r (los	s)		🕨				
	7a	Gross amount from		(i) Securit	ies	(ii) Other				
		sales of assets								
		other than inventory	7a							
ē	b	Less: cost or other basis								
Revenue		and sales expenses .	7b							
Şe.	С	Gain or (loss)	7c		0	0				
	d	Net gain or (loss)				<u> </u>				
Other	8a	Gross income from		ndraising						
0		events (not including		0						
		of contributions rep								
		1c). See Part IV, line			8a					
	b	Less: direct expens			8b					
	С	Net income or (loss)			g eve	nts ▶				
	9a	Gross income f			_					
	_	activities. See Part I			9a					
		Less: direct expens			9b					
		Net income or (loss)			ctivitie	es >				
	10a	Gross sales of in		•	4.					
		returns and allowan			10a					
		Less: cost of goods			10b	\				
	С	Net income or (loss)) iron	sales of in	ivento	1				
Miscellaneous Revenue	44.					Business Code				
on!	11a									
scellaneo Revenue	b									
Sce	Q C	All other revenue								
Ξ̈́	d e	Total. Add lines 11a					0			
	12	Total revenue. See			•	· · · · ·	476,686	0	0	0
		. Juli i everiue. Oee	111311	40110113 .			4/0,000	ı	U	. 0

Part IX Statement of Functional Expenses

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

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

	Check if Schedule O contains a response				·
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	174,812	174,812	0	0
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	1,983	1,983	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (nonemployees):				
а	Management	0	0	0	0
b	Legal	0	0	0	0
С	Accounting	5,535	831	4,704	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0	0	0	0
12	Advertising and promotion	1,237	0	0	1,237
13	Office expenses	2,560	2,240	320	0
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	15,179	14,266	913	0
17	Travel	3,551	564	0	2,987
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	0	0	0	0
20	Interest	0	0	0	0
21 22	Payments to affiliates	0	0	0	0
23	Insurance	18,838	11,262	7,576	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If	10,030	11,202	7,576	0
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а					
b					
c					
d	All albay avanaga				
е 25	All other expenses	240,212	240,212	12.512	0
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	463,907	446,170	13,513	4,224
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this	Part X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	. 449,292	1	489,937
	2	Savings and temporary cash investments	. 0	2	0
	3	Pledges and grants receivable, net		3	0
	4	Accounts receivable, net	. 27,866	4	0
	5	Loans and other receivables from any current or former officer, director	or,		
		trustee, key employee, creator or founder, substantial contributor, or 350 controlled entity or family member of any of these persons	%	5	0
	6	Loans and other receivables from other disqualified persons (as define			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	. 0		0
ets	7	Notes and loans receivable, net		_	0
Assets	8	Inventories for sale or use		_	0
⋖	9	Prepaid expenses and deferred charges	. 0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b	0	10c	
	11	Investments—publicly traded securities	. 0	11	0
	12	Investments—other securities. See Part IV, line 11	. 0	12	0
	13	Investments—program-related. See Part IV, line 11	. 0	13	0
	14	Intangible assets			0
	15	Other assets. See Part IV, line 11		15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	489,937
	17	Accounts payable and accrued expenses			0
	18	Grants payable			0
	19	Deferred revenue	. 0		0
	20	Tax-exempt bond liabilities		_	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	. 0	21	0
Liabilities	22	Loans and other payables to any current or former officer, director			
ij		trustee, key employee, creator or founder, substantial contributor, or 35° controlled entity or family member of any of these persons		22	
Lial	23	Secured mortgages and notes payable to unrelated third parties		_	0
_	23 24	Unsecured notes and loans payable to unrelated third parties			0
	25	Other liabilities (including federal income tax, payables to related thin		24	0
	25	parties, and other liabilities not included on lines 17–24). Complete Part			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		_	0
ģ		Organizations that follow FASB ASC 958, check here ▶ □			
Ce		and complete lines 27, 28, 32, and 33.			
alar	27	Net assets without donor restrictions		27	
B	28	Net assets with donor restrictions		28	
u		Organizations that do not follow FASB ASC 958, check here ▶ ✓			
Net Assets or Fund Balances		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds	. 477,158	29	489,937
ets	30	Paid-in or capital surplus, or land, building, or equipment fund			0
Ass	31	Retained earnings, endowment, accumulated income, or other funds .		31	0
et/	32	Total net assets or fund balances		32	489,937
Ž	33	Total liabilities and net assets/fund balances	. 477,158	33	489,937

Part	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		47	6,686		
2	Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		47	77,158		
5	Net unrealized gains (losses) on investments	5			0		
6		6			0		
7	Investment expenses	7			0		
8	Prior period adjustments	_			0		
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						
	- / (//	0		48	39,937		
Part	XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				\Box		
				Yes	No		
1	Accounting method used to prepare the Form 990: 🗹 Cash 🗌 Accrual 🔲 Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		. 2a		~		
	If "Yes," check a box below to indicate whether the financial statements for the year were compi	iled	or				
	reviewed on a separate basis, consolidated basis, or both:						
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		. 2b		~		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	d or	n a				
	separate basis, consolidated basis, or both:						
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversity						
	the audit, review, or compilation of its financial statements and selection of an independent accountant	?	. 2c		$oxed{oxed}$		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	in t	the				
Ja	Single Audit Act and OMB Circular A-133?		. За		~		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo						
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such aud	its .	. 3b	000	<u> </u>		

Form **990** (2020)