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

Department of the Treasury
Internal Poyonus Conves

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 and ending

Open to Public

<u>A</u>	For the 2018 c	alen	dar year, or	tax year	<u>beginning</u>		, and ending	1						
	Check if applicable	C Na	me of organizat	on								D Employ	er identif	ication number
X	Address change				DMINISTR	ATIVE	SUPERVISORY	PROF	<u> </u>					
\Box	Name change	_	ing business as		SPTEA							86-0		
H	•	_			if mail is not delive	red to street	address)				Room/suite	E Telepho		
닏	Initial return Final return/		37 N. 3		country, and ZIP or	foreign posts	nl anda	_				602-	-254	-8474
\sqcup	terminated	1		or province,	country, and zir or	- ·								
	Amended return	_	HOENIX me and address	of principal	officer	AZ 85	1003					G Gross re	ceipts\$	251,890
$\overline{\sqcap}$	Application pending	l									H(a) Is this a gro	up return for	subordinat	es? Yes X No
	Application pending		ASON S			00						•		Yes No
					ANOTTO 1	RD -	- OFOOC				H(b) Are all sub			
_			HOENIX				Z 85086		- 6	\ }	11 190,	attach a list	(see ms	ructions)
<u></u>	Tax-exempt status		501(c)(3)	X 501(c) (4) <	(insert no)	4947(a)(1) or	52	27	$oldsymbol{oldsymbol{eta}}$				
J	Website > 1	<u> </u>	1		E9				!		H(c) Group exe		er 🕨	
<u>K</u>	Form of organization	_	Corporation	Trust	X Association	Other	<u> </u>		Ш	L Ye	ar of formation 1	<u>976 </u>	M Sta	te of legal domicile AZ
· F	Partil Su	ımm	ary						<u> </u>					
	1 Briefly de	scrib	e the organi	zation's m	ussion or most	significan	it activities							
မွ	ORGA	NIZ	ED REP	CITY I	EMPLOYEES	}								
ă														
eru														
Governance	2 Check th	is box	c▶ 🔲 if the	e organiza	ation discontini	ued its ope	erations or disposed	of more	tha	n 25%	% of its net ass	ets		
⊕ ≪5	3 Number	of vot			overning body							з	10	00
Activities &	4 Number	of ind	ependent vo	ting mem	bers of the go	verning bo	dy (Part VI, line 1b)					4	0	
ξ				_	-	_	(Part V, line 2a)					5	0	
Ę					e if necessary)		(*					6	0	=
					om Part VIII, c		line 12					7a		0
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07h7	D Not union	uicu	odolilooo tax	<u>abic 11100</u>	ine ironi i omi	330 1, 110	RECEIV	/FD		\top	Prior Yea		†	Current Year
> 3.	8 Contribut	ions a	and grants (I	Part VIII, I	ine 1h)	l.			70		233	3,705	Ì	251,890
_ <u>~</u>	9 Program	servi	ce revenue (Part VIII.	line 2a)		NOV 20 2	010	3S-OS			0	1	0
≥8	10 Investme	nt inc	ome (Part V	'III. colum	n (A), lines 3.	4. and 760	B 100 40 2	019	IXI			0	<u> </u>	0
J'Revenue"	11 Other rev	enue	(Part VIII c	olumn (A)	line 2g) n (A), lines 3, i, lines 5, 6d, 8	c 9c 10c	and 1e)					0		0
		enue	– add lines 8	3 through	11 (must equa	I Part VIII	and	1IT	1	\vdash	233	3,705		251,890
i	13 Grants at				art IX, column			.,				0		· · · 0
Ź,	14 Renefits				rt IX, column (1-0,			⊢	24	, 300		
Z	15 Salaries						olumn (A), lines 5–1	0)				0	-	26,984
Çő.	16a Professio		-		X, column (A),		bidinii (A), iiiles 5–1	0)		⊢	·			20,504
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EX					column (D), lii	-	- \	U		- All				
_	I), lines 11a–11		·			⊢		366		208,732
	[ust equal Part		n (A), line 25)			\vdash		,666		235,716
<u> </u>		iess	expenses S	ubtract lir	ne 18 from line	12	 					3,039	 	16,174
Net Assets or	20 Total ass	ete /E	Part X line 1	6)						\vdash	Beginning of Cur	6,000	\vdash	End of Year 419,079
ASSE	20 Total liab									\vdash		.,000		197,854
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	Firm's add	iress	→ Sc	otts	lale, Az	z 852	251-6875				PI	none no	480	0-941-3421
Vlay	the IRS discus	s this	return with	he prepa	rer shown abo	ve? (see ii	nstructions)							X Yes No
	Paperwork Redu	ction	Act Notice,	see the se	parate instruct	ions.						9	<u>, </u>	Form 990 (2018)
DAA												•-	_ (apa
														• •

4d Other program services (Describe in Schedule O)

(Expenses \$ 235,716 including grants of \$)

4e Total program service expenses ▶ 235,716

DAA

Form 990 (2018)

Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? 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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	. 30	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			.
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12d	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	425		x
L	Most the assessment and XII	12 <u>a</u>		

- - 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
- Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a 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
- 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
- Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV
- 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)
- Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 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 garning activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
 - b 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

Form 990 (2018)

X

X

X

X

X

X

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14a

14b

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20a

20b

i P	Checklist of Required Schedules (continued)			
	•		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	<u> </u>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a	$oxed{oxed}$	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
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			ł
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			1
	If "Yes," complete Schedule L, Part I	25b	$oxed{oxed}$	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	İ		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26	$oxed{oxed}$	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? 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 IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		1	
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	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	Ь	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_	Ь—	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	<u> </u>	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	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	35b	<u> </u>	—
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		}	
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	↓	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	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			l
Torque de la constantina	19? Note. All Form 990 filers are required to complete Schedule O	38	<u> </u>	X
	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		T	
4-	Enter the number consisted in Day 2 of France (1900 Figure 1900 Fi		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms IVI 30 included in line 4 of Forms IVI 30 included in			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the exceptation comply with body and with body and the forms with the form with the forms			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	X

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	l	1			30
	Statements, filed for the calendar year ending with or within the year covered by this return	2a				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	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 in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ity over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financia	l acco	unt)?	4a		X
b	If "Yes," enter the name of the foreign country ▶					對聽
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	nts (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
С	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 \$100,000, 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	ns 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 g	goods				
	and services provided to the payor?			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 for which it was	s		i		
	required to file Form 8282?		1	7c		
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 benefit or	ontrac	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?		· 7f		
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	tion fil	e a Form 1098-C?	7h	orgine (see	to a princip to the same
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	d by th	ne		Mà	
	sponsoring organization have excess business holdings at any time during the year?			8	es aese	Lather see
9	Sponsoring organizations maintaining donor advised funds.			isi		
а	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	I — Pipella II.	raulideid
10	Section 501(c)(7) organizations. Enter	,	I			
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	L			
11	Section 501(c)(12) organizations. Enter	ı	I			
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	ı	? I	12a	affe.elthousff.	#100th 1459
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.			5年15年	門網購	abin'i
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		Jan Uhat
L	Note. See the instructions for additional information the organization must report on Schedule O					
þ	Enter the amount of reserves the organization is required to maintain by the states in which	۱	ł			
_	the organization is licensed to issue qualified health plans	13b				
C 1/12	Enter the amount of reserves on hand.	13c	<u> </u>	TOTAL		amir V
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes" has it filed a Form 730 to report these payments? If "No." provide an evaluation in School in			14a		X
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule is the organization subject to the section 4050 toy on payment(s) of more than \$1,000,000 in reserved.			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	ration	Ot	1		•
	excess parachute payment(s) during the year? If "You " soo patriculars and file Form 4720. School Ja N.			15 134		X
16	If "Yes," see instructions and file Form 4720, Schedule N		?			
. 0	Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes," complete Form 4720, Schedule O	incom	ie /	16		X
	ii 185, complete i omi 4720, conedule O				000	

Form 990 (2018) ADMINISTRATIVE SUPERVISORY PROF 86-0365459 Page 6 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 in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1000 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 0 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 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 b Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a b Each committee with authority to act on behalf of the governing body? X a8 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a 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 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c 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 14 X 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? a The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 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 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 17 List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records > DAVID NIETO JR. 3411 E. AMELIA AVE PHOENIX

602-254-8474

AZ 85018

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	018) ADMINISTRATIVE			6-0365459	Pag	e :
Part VII	Compensation of Officers	, Directors, Trustee	s, Key Employee	es, Highest Compens	ated Employees, and	
	Independent Contractors			-	_	
	Check if Schedule O contai	ns a response or note	e to any line in thi	s Part V <u>II</u>	_	
Section A	Officers Directors Trustees K	ev Employees and High	est Compensated Er	mnlovees		

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) (C) Average Position hours per (do not check more than one box, unless person is both an officer and a director/trustee) hours for		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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	(W-2/1099-MISC)	(VV-2/1099-WIISC)	organization and related organizations
(1) JASON STOKES										
	40.00									
PRESIDENT	0.00	<u> </u>	_	X				5,888	. 0	
(2) COLLEEN OSTRANDE										
	40.00								_	
VICE PRESIDENT	0.00		_	X		$\vdash \vdash$		4,605	0	(
(3) DAVID NIETO JR.	00.00									
	20.00							2 (42	ا	,
TREASURER OCDIMALE	0.00	-	<u> </u>	X	<u> </u>	\vdash		3,643	0	
(4) PETE OSPITALE	40.00									
CHIEF REPRESENTATIVE	0.00			x				3,643	o	(
(5) ELIZABETH BENNIN		+	┝	Λ		\vdash		3,043		
(5) ELIZABETH BERRIT	20.00		ĺ							
SECRETARY	0.00			x				2,270	o	(
(6) LISA HUGGINS-HUE		+	\vdash			-		2,210		
(0,	20.00									
DIRECTOR	0.00			X				1,847	o	(
(7) RON RAMIREZ		 	\Box	-						
` ,	20.00									
DIRECTOR	0.00			X				1,847	o	(
(8) DONNA MAY									***	
	20.00]				
DIRECTOR	0.00			X				1,847	0	(
(9) COURT HOOD										
	20.00									
DIRECTOR	0.00	<u> </u>		X				1,394	0	(
(10)										
(11)										
DAA										Form 990 (20

	Section A. Officers								and Highest Compensated		Page (
<u>refer</u>	(A) Name and title	(B) Average hours per week (list any	(d	o not x, unl	Pos check ess pe	C) sition more erson	than o	ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
		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)	(W-2/1099-MISC)	from the organization and related organizations
	· · · · · · · · · · · · · · · · · · ·			!							
						_					
								-			
-											· · · · · · · · · · · · · · · · · · ·
1b	Sub-total Total from continuation she	ets to Part VII. S	Secti	on 4	\	<u> </u>	<u> </u>	>	26,984		
d 2	Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from	icluding but not li	mite	d to		e lis	ted a	bov	26,984 e) who received more than	\$100,000 of	
3	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organ	ormer officer, dire "complete Schede e 1a, is the sum	ector	r, or <i>J for</i> porta	suci able	<i>h inc</i> com	<i>lividu</i> pens	<i>al</i> atio	on and other compensation	from the	Yes No
5	individual Did any person listed on line 1 for services rendered to the or									individual	5 X
Sect 1	Complete this table for your five	ve highest comp	ensa	ted i	nder	end	ent c	ontr	ractors that received more	than \$100,000 of	
	compensation from the organi Name and	(A) business address	лпре		LIOII	101 (1	ie ca			(B) lon of services	(C) Compensation
					_						
2	Total number of independent of received more than \$100,000								se listed above) who	0	

Form 990 (2018) ADMINISTRATIVE SUPERVISORY PROF 86-0365459 Page 9 Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) (D) Revenue Total revenue Unrelated business excluded from tax function under sections 512-514 1a Federated campaigns 1a 244,370 b Membership dues 1b c Fundraising events 1c 3,411 d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 4,109 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 251,890 Program Service Revenue Busn Code 2a b 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 (ı) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) d Net rental income or (loss) (i) Securities (II) Other sales of assets other than inventor b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue 3,411 (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a h All other revenue Total. Add lines 11a-11d

251,890

0

Total revenue. See instructions

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

	Charlest School Contract of School Contract Contract of School Contract Contract of School Contract of Schoo			inplete coluinii (A)	
	Check if Schedule O contains a resp	 	· · · · · · · · · · · · · · · · · · ·	(0)	
	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			E-e	1 STEP HILLS BY / Madelant 11 " Sand Specie 2 Cl. 11 3 30
-	trustees, and key employees	26,984	26,984		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes			-	
11	Fees for services (non-employees)				
a	Management				
b	Legal	71,547	71,547	 	
c	Accounting	300	300		
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	,			
f	Investment management fees	-	Control of the Contro	Attended to the Principal Control of Control of the	
g					
Ū	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	3,544	3,544		
13	Office expenses		,		
14	Information technology	2,250	2,250		
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	11,304	11,304		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,317			
23	Insurance	4,202	4,202	SCHEETPLANE - Har electric standard In The Scheeter	bernanisk – Com Pall Monte of Santa and a
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
a	BUILDING EXPENSE	39,176	39,176		
b	OTHER EXPENSES	30,981	30,981		
C	MEMBERSHIP MANAGEMENT INTERNET	28,500			
d		4,979 1,632			
	All other expenses	235,716		0	
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	233,110	235,116	0	0
40	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98.2 (ASC 958.720)				·

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 99,275 Cash—non-interest bearing 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 325,000 other basis Complete Part VI of Schedule D 10a 325,000 10,317 314,683 10b b Less accumulated depreciation 10c 11 Investments—publicly traded securities 11 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 419,079 325,000 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 271,000 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 197,854 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 271,000 197,854 26 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 54,000 221,225 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 54,000 221,225 33 Total liabilities and net assets/fund balances 325,000 419,079

Form **990** (2018)

orn	990 (2018) ADMINISTRATIVE SUPERVISORY PROF 86-0365459		Page 12
Pa	Reconciliation of Net Assets		
	Check If Schedule O contains a response or note to any line in this Part XI		П_
1	Total revenue (must equal Part VIII, column (A), line 12)	1	251,890
2	Total expenses (must equal Part IX, column (A), line 25)	2	235,716
3	Revenue less expenses Subtract line 2 from line 1	3	16,174
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	54,000
5	Net unrealized gains (losses) on investments	5	<u> </u>
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line		<u></u>
	33, column (B))	10	70,174
Pa	rt XII Financial Statements and Reporting		
_	Check if Schedule O contains a response or note to any line in this Part XII		
			Yes No
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 O		
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		
b	Were the organization's financial statements audited by an independent accountant?		2b X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		TEL DE DA
	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 oversight		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c
	If the organization changed either its oversight process or selection process during the tax year, explain in		
	Schedule O		
За	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?		3a
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		
	required qualities and the explain value of Cabadula O and describe any store tolers to underso such and to		امدا

Form **990** (2018)

65459

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047 Open to Public

Schedule D (Form 990) 2018

Name of the organization

Employer identification number

	MINISTRATIVE SUPERVISORY PROF		86-0365459
Pa	Organizations Maintaining Donor Advise		or Accounts.
	Complete if the organization answered "Yes	s" on Form 990, Part IV, line 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year .		
5	Did the organization inform all donors and donor advisors in writ	ting that the assets held in donor advised	<u></u>
	funds are the organization's property, subject to the organization	n's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advi	sors in writing that grant funds can be used	d
	only for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	_` _
	conferring impermissible private benefit?		Yes No
Pa	Conservation Easements.		
	Complete if the organization answered "Yes	s" on Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization	(check all that apply)	
	Preservation of land for public use (e.g., recreation or educa	ation) Preservation of a historicall	y important land area
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a	conservation
	easement on the last day of the tax year		Held at the End of the Tax Ye
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structi	ure included in (a)	2c
	Number of conservation easements included in (c) acquired after	` '	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	sed, extinguished, or terminated by the org	
	tax year ▶	or termination by the eng	anization daming the
4	Number of states where property subject to conservation easem	nent is located >	
	Does the organization have a written policy regarding the period		
•	violations, and enforcement of the conservation easements it ho	_ · · · · · · · · · · · · · · · · · · ·	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, han		
•		dung of violations, and emoreing conserva	tion casements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, and enforcing conservation	essements during the year
•	\$	g or violations, and emorcing conservation (easements during the year
R	Does each conservation easement reported on line 2(d) above s	satisfy the requirements of section 170/b)//	IVPV
Ü	and section 170(h)(4)(B)(ii)?	satisfy the requirements of section 170(f)(4	Yes No
9	In Part XIII, describe how the organization reports conservation		
3	balance sheet, and include, if applicable, the text of the footnote		
	organization's accounting for conservation easements	to the organization's infancial statements	that describes the
₽Pa	Organizations Maintaining Collections o	f Art Historical Treasures or Ot	har Similar Assats
	Complete if the organization answered "Yes	s" on Form 990 Part IV line 8	Her Sillilar Assets.
12			
	If the organization elected, as permitted under SFAS 116 (ASC		
	works of art, historical treasures, or other similar assets held for public service, provide, in Part XIII, the text of the footnote to its		
h			
	If the organization elected, as permitted under SFAS 116 (ASC		
	works of art, historical treasures, or other similar assets held for		TURNETANCE OF
	public service, provide the following amounts relating to these ite	ems	
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		▶ \$
	If the organization received or held works of art, historical treasu		in, provide the
	following amounts required to be reported under SFAS 116 (ASC	C 958) relating to these items	
	Revenue included on Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X	m 990.	> \$

314,683

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

	Form 990) 2018 ADMINISTRATIVE SUPERV	ISORY PROF	86-0365459	Page
Part VII	Investments—Other Securities.	5 000 B 1 1 1 1 1	441 0 5 000 5 434	
	Complete if the organization answered "Yes" on		""	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio Cost or end-of-year market	
(1) Financial of	 		Cost of the drycal market	· value
	eld equity interests			
(3) Other	sid equity interests			
(A).			 	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
•	n (b) must equal Form 990, Part X, col. (B) line 12)▶			
Part VIII	Investments—Program Related.	<u> </u>	Canal Am an ender an analysis of the common common and and the	ment controlled and the statement of the
distanting ind ambitions	Complete if the organization answered "Yes" on	Form 990, Part IV, II	ne 11c See Form 990, Part X	, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				-
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on	<u>Form 990, Part IV, Ii</u>	<u>ne 11d See Form 990, Part X</u>	, line 15
	(a) Description			(b) Book value
(1)				
(2)				
(3)		· · · · · · · · · · · · · · · · · · ·		
(4)	<u> </u>	 -		
(5)				
(6)				
(7)				
(8)				
(9) Tatal (0-4)	- (1)			
	n (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.			-
Part X		Form 000 Dort IV I	no 110 or 116 Con Form 000	Dad V
	Complete if the organization answered "Yes" on line 25	romi 990, Partiv, ii	ne Tie or Tit See Form 990,	Part X,
1.	(a) Description of liability	(b) Pools value		
	Income taxes	(b) Book value		
	income taxes			
(2)				
(3)		 		
(5)		-		
(6) (7)				
		-		
(8)				
(9)	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶			
	uncertain tax positions. In Part XIII, provide the text of the foot	note to the organization?	THE PROPERTY CONTROL OF THE PROPERTY OF THE PR	种种的人类的性性的 指示字形式和
	liability for uncertain tax positions under FIN 48 (ASC 740) Ch			
organization S	madelity for undertain tax positions under File 40 (ASC 740). Ch	ieck liele ii tile text of the	nounce has been provided in Part X	.111

Sche	edule D (Form 990) 2018 ADMINISTRATIVE SUPERVISO	RY PROF 86-	0365459	Page 6
	Reconciliation of Revenue per Audited Financial S			rage
Hill office	Complete if the organization answered "Yes" on Form		p	
1	Total revenue, gains, and other support per audited financial statements	1		
2	2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	e Add lines 2a through 2d			
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	c Add lines 4a and 4b			
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	5		
Pa	Reconciliation of Expenses per Audited Financial	Statements With Exper	nses per Return.	
	Complete if the organization answered "Yes" on Form	990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	e Add lines 2a through 2d			
3	3 Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		

Part XIII Supplemental Information.

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

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

Schedule D (Form 990) 2018 ADMINISTRATIVE SUPERVISORY PROF

86-0365459

Page 5

Part XIII Supplemental Information (continued)

65459

SCHEDULE 0 (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

2018

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ADMINISTRATIVE SUPERVISORY PROF

86-0365459

Employer identification number

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public