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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, Department of the Treasury Open to Public Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection For the 2018 calendar year, or tax year beginning October 1, 2018 and ending entember 30,2019 Check if C Name of organization D'Employer identification number elandare Address change 211-4402220 Name change Doing business as Initial Ireturn Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 410-742-9500 termin-ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended A18 03 H(a) is this a group return Applica-F Name and address of principal officer. for subordinates? Yes 🔀 No pending H(b) Are all subordinates included? I Tax-exempt status 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or L If "No," attach a list (see instructions) J Website: ▶ H(c) Group exemption number K Form of organization: Corporation Trust Association M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities. Activities & Governance It the organization discontinued its operations or disposed of more than 25% of its net assets of Soulou exports, Place of Dogless uses & Dialu Number of voting members of the governing body (Part VI, line 1a) RECEIVED Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2018 (Part Wine 2a) Š 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 1 7a b Net unrelated business taxable income from Form 990-T, line 38 **し**にファン Prior Year Current Year Contributions and grants (Part VIII, line 1h) \$6,969 Revenue #355,512 Program service revenue (Part VIII, line 2g) 4199.610 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) £1324 61,23(11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) **4364,683** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) €221,991 Grants and similar amounts paid (Part IX, column (A), lines 1-3) <u> 8270 .30</u>0 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 4_108 ,697 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) £330,688 £ 435,196 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 6120.045 Revenue less expenses. Subtract line 18 from line 12 £33,945 End of Year **Beginning of Current Year**

Part II | Signature Block

Net assets or fund balances. Subtract line 21 from line 20

20 Total assets (Part X, line 16)

Total liabilities (Part X, line 26)

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

Sign Here	Signature of officer Fred Left II Type or print name and title	Treasurer		Date 2/11/2			
Paid	Print/Type preparer's name	Preparer's signature	Date	Check if sett-employed	PTIN		
Preparer	Firm's name			Firm's EIN			
Use Only	Firm's address			Phone no.			
May the II	RS discuss this return with the preparer shown ab	ove? (see instructions)			Yes	لما	No

LHA For Paperwork Reduction Act Notice, see the separate instructions. 832001 12-31-18

Form 990 (2018)

\$ 215, D44

\$ 99

\$279.201

44. a93

\$ 34,909

	10 (2018) Delaware Joulean Bd 25-4402020 / Page 2
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Friefly describe the organization's mission. To collected to have promoted to describe to a property related to describe a describe to describe a describe
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 149,805 including grants of \$) (Revenue \$)
	Required by Maderal law to Jornard 12 of casesaments collected to the United Confrom Ad
	collected to the United Dayleron Ad
4b	(Code) (Expenses \$ 119,635 including grants of \$) (Revenue \$)
	To Jund in state Research
4c	(Code) (Expenses \$ \$ /13,367 including grants of \$) (Revenue \$)
	Promotion of soyle and to usual pours - meetings, adecational
	programa en soulvant their many uses + communication
	if saylean tod activities + programs trough nous releases.
	annual Report, Newslatters, Jacobok, att
4d	Other program services (Describe in Schedule O)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 343,797
~€	Total program service expenses 5704 111

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Part IV

			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	V	-
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	ث	
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		メ
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		×
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.		H	
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		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? 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		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>×</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		$\overset{\times}{-}$
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X	
b	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		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		*
ь	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? 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 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 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? If "Yes," complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		メ
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21 	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
		Form	₁ 990	(2018)

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Part	IV Checklist of Required Schedules (continued)	<u></u>		· age ¬
			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		Х
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		X
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		
ь	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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		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
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		K
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		χ
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	_	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>X</u>
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	35b	_	
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	<i>ـــ</i>	
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? 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 19? Note . All Form 990 filers are required to complete Schedule O.	38		X
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		·	
		استنت	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3			

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Form 990 (2018) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 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 in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 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 contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 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? 7a b if "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 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 Section 501(c)(7) organizations. Enter: 10<u>a</u> a 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 10b Section 501(c)(12) organizations. Enter. Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against 11b 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the 13b organization is licensed to issue qualified health plans c Enter the amount of reserves on hand ... 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b 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 If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," complete Form 4720, Schedule O

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Part	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. S.	See instructions
	Check if Schedule O contains a response or note to any line in this Part VI	[]
Secti	on A. Governing Body and Management	
		Yes No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9	
	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 1b	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2 X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3 X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5 4
6	Did the organization have members or stockholders?	6 7
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a 🗶
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	
а	The governing body?	8a X
b	Each committee with authority to act on behalf of the governing body?	8b X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 ×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	
40-	Did the aggregation have local shorters, hereadon, as offiliated?	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
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a X
b 42-	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a X 12b X
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	
42	describe in Schedule O how this was done	12c X
13 14	Did the organization have a written whistleblower policy?	14 ×
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	
а	The organization's CEO, Executive Director, or top management official	15a X
b	Other officers or key employees of the organization	15b X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b
	on C. Disclosure	
17	List the states with which a copy of this Form 990 is required to be filed ▶	- 10
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-7 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	(Section 501(c)
	Own website Another's website Upon request Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int 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 re-	
20	ndra Davis, 27137 Scotland Pky, Jolishury, Md 28803 411	
	r ii yi	Form 990 (2018)

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Form 990 (2018)

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

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

Check this box if neither the organization no		d orga	anız	atıo	n c	ompe	nsa	ited any curren	t officer, director	r. or trustee
(A) Name and Title	(B) Average hours per week flist any					e than o is both or/trus	one n an lee)	from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Cory Atkins Chairman										
Vice Chairman										
(3) Fred West	L									
Treasurer (4) Robbie Emerson									tion	N
(5) Mike Clay		'				,		1 pull	wation	
(6) Frank Hrupsa					N	Ø		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
17) Rick Dickerson										
(B) Tim Rogers										
(9) Brett Coverdale				_						
(10)										
(11)										
(12)				-						
(13)										
(14)										

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, a	nd l	lighe	st C	ompensated E	mployees	(continu	ed)		
					(C)				1				
	(A) (B) Position (do not check more than of						one	(D)	(E)			(F)		
	Name and title	Average hours per					is both or/trus		Reportable compensation	Reporta compensation			imated	
		week (list any hours for	/			т —			from the	related organizat	d	c	ther	
		related	direc	i i	Officer	yen	ghes	Former	organization	(W-2/1099-		fro	ensation the	
		organizations below dotted	or tal	ona		employee	8 6		(W-2/1099-MISC)			•	nizatio related	
		line)	Individual trustee or director	Institutional trustee		ê	npen				-		nization	
			ı "	tee			Highest compensated employee							
(15)														
(16)											-+			
				_		<u> </u>							···	
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(18)		ļ												
(19)														
(20)				H	_								···	
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(22)														
(23)														
(24)														
(25)	······································			\dashv	_									—
1b	Sub-total	<u> </u>												
c	Total from continuation sheets to Part	VII, Sectio						•						_
d	Total (add lines 1b and 1c)							▶	٥	D		8		
2	Total number of individuals (including but reportable compensation from the organi		to th	ose	lıst	ed a	above	e) wl	no received mo	ore than \$1	100,000	of		
	reportable compensation from the organi	2811011											Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete s	ficer direct	tor, o	r tru	uste	ee, l	key e	mpl	loyee, or high	est compe	ensated	3		
4	For any individual listed on line 1a, is the							 n ar	nd other comp	 ensation f	· · · rom the			
•	organization and related organizations													
5	Individual	r accrue co	 mper	nsati	Ion	 fror	n anv	 unr	elated organiz	 ation or in	 dividual	4		X
	for services rendered to the organization									. <u></u>	· ·	5		×
	on B. Independent Contractors										6400	000 - 6		
1	Complete this table for your five highest of compensation from the organization Repyear.													ЭХ
	(A) Name and business add	ress						-	(B) Description of se	ervices		(C) Compens	ation	
											ļ			
					_									
	Total number of independent contracto	re (includes	a hi	1 5	3	im it.	od *c	4 h	asa listed at-	wal who	Section 1		- Contract	7
2	rotal number of independent contracto	is uncludin	y bu	י חכ)	::::::::::::::::::::::::::::::::::::::	eu 10	ពេ	ose listed abo	ive) who				

Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (C) Unrelated Revenue excluded from tax under sections 512-514 Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns Membership dues 1b Fundraising events . 1c Related organizations . . . 1d Government grants (contributions) 1e \$ 10.929 All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f. \$ 610.979 Total. Add lines 1a-1f Program Service Revenue Business Code 9000 99 A199,60 \$299.6(D All other program service revenue. Total. Add lines 2a-2f . 4299.610 Investment income (including dividends, interest, and other similar amounts) . . . # 1,724 81724 4 Income from investment of tax-exempt bond proceeds ▶ 5 Royalties (i) Real (II) Personal 6a Gross rents b Less rental expenses Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss) Other Revenue Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 . . **b** Less direct expenses . С 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 Gross sales of inventory, less 10a returns and allowances Less: cost of goods sold . . . Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 900099 \$2,838 11a Missellaneous b C d All other revenue 53 838 Total, Add lines 11a-11d. Total revenue. See instructions Form 990 (2018)

	The test of the state of the st	mprote an obtaining.	Till Giller Grganizatio	ns must complete co	olullili (A).
	Check if Schedule O contains a respor	ise or note to any li	ine in this Part IX		[
Do no	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising
	<u> </u>		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	\$276,300	\$ 270,300		
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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f(1))$) and persons described in section $4958(c(3))$.				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10 11	Other employee benefits				
а	Management				
þ	Legal				
С	Accounting	\$16,792		\$16,792	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O) .				
12	Advertising and promotion				
13	Office expenses	51870		\$470	
14	Information technology				
15	Royalties				
16	Occupancy				<u> </u>
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	\$1.657		81,657	
20	Interest	, , , , , , , , , , , , , , , , , , ,			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	\$ 300		31800	
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.)				
а	Education, Promo + Communication	\$ 113,369	\$ 113,367		ļ <u>-</u>
b	Minrollaneaus	€ <u>3,374</u>	<u> </u>	\$2,374	
С	Mauagement Contracts	\$29,036		949,03b	
d		ļ		·	
е	All other expenses	A 1/2 1/2 1/2 1	6 26 2 4 4 4	4 -1 -14	
25	Total functional expenses. Add lines 1 through 24e	#435,196	\$ 383,667	851,529	
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)				

Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year Cash - non-interest-bearing 1 #277, DO4 \$ 203.930 1 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 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 other basis. Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c Investments - publicly traded securities 11 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 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 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 \$44,293 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 Unrestricted net assets #234,908 28 Temporarily restricted net assets 28 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 33 33 Total net assets or fund balances Total liabilities and net assets/fund balances Form **990** (2018)

Form 9	90 (2018) Delaware System Bd 20-44	405	220	Pa	ige 1 2
Par	XI Reconciliation of Net Assets		<u> </u>		
	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)	11	6315	15	<u> </u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	\$434		
3	Revenue less expenses. Subtract line 2 from line 1	3	- \$ 121	14	$\overline{}$
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	\$ 234	9/	(इ)
5	Net unrealized gains (losses) on investments	5		4-4-6	
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				
	33, column (B))	10	\$11	4,8	63
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u> .	. ′.	
				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," ex	plain ir	1		
	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 compared to the statement of the year were compared to the statement of the year were compared to the year were year.	piled o	r Sin		100
	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	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a	3 3		
	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 over	versigh	i .		
	of the audit, review, or compilation of its financial statements and selection of an independent account	intant?	2c	ハー	

If the organization changed either its oversight process or selection process during the tax year, explain in

3b

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

the Single Audit Act and OMB Circular A-133?

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 Inspection

Maine	the organization	_	Employer identification number
	Delaware Joyhean B	λ	20-4402221)
Pai	Organizations Maintaining Donor Ac	lvised Funds or Other Similar Fun	ds or Accounts.
	Complete if the organization answered		
		(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	y advisors in writing that the accets b	old up donor advisord
J			
_	funds are the organization's property, subject to t	· · · · · · · · · · · · · · · · · · ·	
6	Did the organization inform all grantees, donors,		
	only for charitable purposes and not for the ben		
			· · · · · · 🔲 Yes 🔲 No
Par	Conservation Easements.		
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the	e organization (check all that apply).	
	Preservation of land for public use (e.g., recre-	ation or education) 🔲 Preservation of	f a historically important land area
	☐ Protection of natural habitat	☐ Preservation of	a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. , 2a
b	Total acreage restricted by conservation easemer	nts	
c	Number of conservation easements on a certified		
ď	Number of conservation easements included in		
_			1 1
3	Number of conservation easements modified, tran	nsferred, released, extinguished, or tern	
-	tax year ►	3	3
4	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy re		pection handling of
	violations, and enforcement of the conservation e	asements it holds?	· · · · · · □ Yes □ No
6	Staff and volunteer hours devoted to monitoring, inspe		
		50tm/g, 1.2.12	, cancer and cancer and and , can
7	Amount of expenses incurred in monitoring, inspecti	ng handling of violations, and enforcing o	conservation easements during the year
•	►\$	ng, nanamig of ficialions, and officialing t	sorios, vallor, sasornismo daning ins year
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
Ū			· · · · · · · □ Yes □ No
0	In Part XIII, describe how the organization reports		
9	balance sheet, and include, if applicable, the text	of the footpote to the organization's fine	and expense statement, and
	organization's accounting for conservation easem		andia statemento that accompce the
	<u> </u>		Other Similar Assets
Part	Complete if the organization answered	"Ves" on Form 990 Part IV line 8	Otto: Onthia Assetsi
	If the organization elected, as permitted under SI	745 416 (ASC 059) not to report in its	rovenue statement and balance sheet
1a	If the organization elected, as permitted under Si works of art, historical treasures, or other simila	- access hold for public exhibition and	ucation or research in furtherance of
	public service, provide, in Part XIII, the text of the	fasters held for public exhibition, ed	describes these items
b	If the organization elected, as permitted under	SFAS 116 (ASC 958), to report in its i	revenue statement and balance sneet
	works of art, historical treasures, or other similar	r assets held for public exhibition, ed	ucation, or research in furtherance of
	public service, provide the following amounts rela	ting to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X		• \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of an	t, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under	SFAS 116 (ASC 958) relating to these it	ems:
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		

•			7 1		1 1					
_	ule D (Form 990) 2018		<u>Delau</u>	vare	Souhe	an P	x 20.	440	2220	Page 2
	t III Organizations Maintaining	<u>j Collections</u>	of Art, H	istorica	l Treasure	s, or O	ther Similar	<u>r Ass</u>	ets (cont	inued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, an	nd other rec	ords, ch	eck any of	the follo	wing that are	a sig	nificant u	se of its
а	☐ Public exhibition		d	☐ Loa	an or exchai	nge prog	grams			
b	☐ Scholarly research		е	☐ Oth	ner					
C	Preservation for future generation									
4	Provide a description of the organiza XIII.	ition's collection	ons and exp	olain how	they furthe	er the or	ganization's e	exemp	ot purpose	ın Par
5	During the year, did the organization assets to be sold to raise funds rathe								☐ Yes	□No
Par	t IV Escrow and Custodial Arra									
	Complete if the organization 990, Part X, line 21.						•			orm
1a	Is the organization an agent, trustee included on Form 990, Part X?								☐ Yes	☐ No
b	If "Yes," explain the arrangement in P									
	,		•	J				Am	ount	
С	Beginning balance					10	;			
d	Additions during the year					<u> </u>	3			
e	Distributions during the year					16	,			
f	Ending balance					11				
2a	Did the organization include an amou	nt on Form 99	0, Part X, lir	e 21, for	escrow or o	custodia	l account liab	ility?	☐ Yes	☐ No
b	If "Yes," explain the arrangement in P	art XIII. Check	here if the	explanati	on has beer	n provide	ed on Part XII	<u>II</u>		
Par	t V Endowment Funds.									
	Complete if the organization	answered "								
		(a) Current yea	ar (b) P	rior year	(c) Two ye	ars back	(d) Three years	back	(e) Four yea	rs back
1a	Beginning of year balance									
b	Contributions								<u> </u>	
С	Net investment earnings, gains, and									
	losses							ightharpoonup		
đ	Grants or scholarships				<u> </u>					
е	Other expenditures for facilities and					:		- 1		
_	programs	<u> </u>			<u> </u>	_		\longrightarrow		
f	Administrative expenses							$-\!$		
9	End of year balance	Ļ			<u> </u>					
2	Provide the estimated percentage of t			ce (line 1	g, column (a)) held a	as:			
a	Board designated or quasi-endowmer		 %							
b	Permanent endowment	%	0.7							
С	Temporarily restricted endowment ►		% al 100%							
3a	The percentages on lines 2a, 2b, and Are there endowment funds not in the			ization tl	hat are held	and ad	ministered fo	r the		
- Oa	organization by:	5 P000000000000000000000000000000000000	or the organ	ii.	inat are more	and do	.,,		Ye	s No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations							•	3a(ii)	+-
ь	If "Yes" on line 3a(ıı), are the related or							•	3b	+-
4	Describe in Part XIII the intended uses					•		•	<u> </u>	
	VI Land, Buildings, and Equip									
, ar	Complete if the organization	answered "	es" on Fo	rm 990,	Part IV, lin	e 11a. 3	See Form 99	90, Pa	art X, line	10.
	Description of property		or other basis		or other basis		Accumulated		(d) Book val	
	=		estment)	1 ' '	(other)		preciation			_
1a	Land		-	1				1		
b	Buildings			1			<u>,</u>			
e C	Leasehold improvements			 						
d	Equipment			1						
e	Other			1						
Total.	Add lines 1a through 1e. (Column (d) m		n 990. Part	X, colum	n (B), line 1	0c.)	•			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

Part VII	Investments - Other Securities		m 000 Port IV lin	o 11h Soo Form	000 Dart V line 10
	Complete if the organization ans (a) Description of security or categor		(b) Book value		hod of valuation
	(including name of security)	y	(b) Dook value	, , ,	of-year market value
(1) Financia	I derivatives				
	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G) (H)					
	h) must a sud Form 200. Part V and (D) to 40.1 h				
Part VIII	b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related	<u>. </u>			
rait VIII			m 000 Port IV lin	o 11a Saa Earm	000 Part V line 12
	Complete if the organization ansu	wered res on For	(b) Book value		
	(a) Description of investment		(b) BOOK Value		nod of valuation of-year market value
(1)					
(2)					
(3)					
(4)			- N		
(5)					
(6)					
(7)					
(8)					
(9)					
	n) must equal Form 990, Part X, col (B) line 13) ▶			alama ar ann an aile	
Part IX	Other Assets.	167 9 5	000 D. + IV II	. 44 0 - 5	000 D-4V E 45
	Complete if the organization answ	Wered res on Form i) Description	n 990, Part IV, Illi	e 11a, See Form	(b) Book value
	10	ny Description			(b) Book Value
(1)					
(2)					
(3)		·			
(5)					
(6)	 ·				
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, co	ol (B) line 15.)		<u> ▶</u>	
Part X	Other Liabilities.				
	Complete if the organization answ	wered "Yes" on Forr	n 990, Part IV, line	e 11e or 11f. See	Form 990, Part X,
	line 25.		Topography and the control of the co	one of decree 1931 we are the traited bee	
1.	(a) Description of liability	(b) Book value		2 7 2 4 3	raid and the
(1) Federal in	come taxes			ar i ka	
(2)					
(3)					
(4)			40.00		Committee of the Commit
(6)					
(7)			We require the	Section 200	
(8)					
-(0)					

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No 1545-0047	2018	Open to Public Inspection

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

Name	Name of the organization 7 1 7 1	Employer identification number
	Delaware Joynean Award	0555 0 44 0 2220
Ра	Part i General Information on Grants and Assistance	
-	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ssistance, and
	the selection criteria used to award the grants or assistance?	XYes No
7	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Bot IV, line 24, for any recipient that received more than \$5,000 Bot II, on the desirable of the organization answered "Yes" on Form 990, 2 De Part II

(1) United Scale and William Bull 18305 473-159307	(c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (f applicable) grant cash assistance or assistance or assistance
(2) U.A. & D.J. Personal Office. 30 U.A. & D.J. Personal Office. (3) U.A. & M. & 30743. (4) College Park ma 30743. (5) (6) (6) (7) (7) (10) (10) (10) (10) (11) (11) (11) (11	
(9) U.A. A. M. M. M. J. Lie, B. M. J. S. S 60, 2033	803,538
	\$14,418
1_	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	
	int organizations listed in the line 1 table
3 Enter total number of other organizations listed in the line 1 table	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

SCHEDULE O (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.

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

20-4472227 Qualified State Soybean Board Section R. Line 120: Conflict of Interest on C. Line 19: coverning documents. Conflict This process has not charged from Pri Form 990, Part XI, Line 2c:

XI.B.Z.I.S