ئى Form	. 99	90	Retur	n of Org	anizat	ion Exem	pt Froi	m In	con	ne Ta	X	OMB No 15	545-0047
6-	. Januar	2020)	Under section 501	I(c), 527, or 4	947(a)(1) c	of the Internal Re	evenue Coo	de (exc	cept p	rivate fou	ndations	d 20°	19
-			l			numbers on this		-				Open to	
		of the Treasury nue Service	•			90 for instructio		_		-	1910	Inspec	
			dar year, or tax yea			****	2019, and					, 20	
		applicable	C Name of organizati		nge	· · · · · · · · · · · · · · · · · · ·			- 3	· · ·	D Emplo	yer identificatio	n number
_	Address		Doing business as	Dulla One	inge	<del> </del>						35-2237155	
=	Name ch			(or P O, box if	mail is not o	delivered to street a	ddress)	F	Room/s	uite	E Teleph	one number	
_	Initial ret	-	1001 Bannock St	(4			,			467		303-953-7750	3
=		rn/terminated		or province, co	untry, and 2	ZIP or foreign posta	l code		<u></u>			000 / 00	<u></u>
_	Amende	4	Denver, CO 8020	•	•	5,					<b>G</b> Gross	receipts \$	5,218,404
=		on pending	F Name and address		cer Elizab	eth Hausler			Н	(a) is this a g	roup return fo	r subordinates?	
		, ,	1001 Bannoci St #	#467 Denver,	CO 8020	)4		•	- 1			es included? 🔲	
<u> </u>	Tax-exe	mpt status	✓ 501(c)(3)	501(c) (	) ◀ (inse		7(a)(1) or _	527	75	If "No,"	attach a lis	st. (see instruction	ns)
J	Website	: ▶					1		н	(c) Group e	exemption	number 🕨 '	1
K	Form of	organization 🗸	Corporation Trus	st Associat	tion Oti	her ▶	L Year	of forma	ation	2004	M State	of legal domicile	CA
Pa	art I	Summa	ry										
	1	Briefly des	cribe the organiza	ation's missi	on or mo	st significant a	ctivities: F	Reduce	e deatl	hs and lo	ss cause	d by housing	
9		collapses d	ue to natural disas	sters in emer	ging natio	ons							
nar													
Activities & Governance	2	Check this	box ▶ ☐ If the o	rganization	discontin	ued its operation	ons or disp	posed	of m	ore than	25% of	its net assets	i.
é	3	Number of	voting members	of the gover	rning bod	ly (Part VI, line	1a)				3		
∞ŏ	4	Number of	independent voti	ng member	s of the g	overning body	(Part VI, li	ine 1b	) .		4		6
ties	5	Total numb	per of individuals e	employed in	calenda	r year 2019 (Pa	rt V, line 2	2a)			5		16
ξį	6	Total numb	per of volunteers (	estimate if r	necessary	/)					6		
₹	7a	Total unrela	ated business rev	enue from F	art-VIII, c	column (C), line	_12				7a		(
	_ b	Net unrelat	ted business taxa	ble income	from Forr	的國人同時後	בח ·	٦.			7b		(
					[++]	TEOLIV	<u> </u>			Prior Yea	r	Current \	/ear
<u>o</u>	8	Contributio	ons and grants (Pa	art VIII, line 1	In E.	'05T' 0'E'	S ·	81 - 1		5,	573,092		5,227,002
en	9	Program se	ervice revenue (Pa	art VIII, line 2	2g 🕌 .	OCT 0.5 20	,				4,237		9,784
Revenue	10		income (Part VIII				<u></u> . ∤£	2 -			506		323
-	11	Other revei	nue (Part VIII, colu ue-add lines 8 th	ımn (A), line	s 5, 6d 8	9 9 100 and					-12,293		-18,705
_	12	Total reven	ue-add lines 8 th	rough 11 (m	ustrequa	Part VIII, colup	m (A), line	12)		5,	565,542	<del> </del>	5,218,404
	13	Grants and	l similar amounts	paid (Part I)	K, column	n (A), lines 1–3)					335,090		
	14	Benefits pa	aid to or for memb	oers (Part IX	, column	(A), line 4) .			ļ		0		
es	15		her compensation,		-			,		3,	563,196		3,394,554
sesus	16a		al fundraising fees			-					0		
Expe	b		aising expenses (									<u> </u>	
ا تتا	17	•	enses (Part IX, col	• • •		•				1,	732,682		1,418,206
	18	•	nses. Add lines 13		•					5,	630,968		4,812,760
	19	Revenue le	ess expenses. Sub	otract line 18	3 from lin	e 12	<u> </u>				-65,426		
s or									Beginn	ing of Curi	rent Year	End of Y	
Net Assets or Fund Balances	20		s (Part X, line 16)					• • [		3,	070,565		3,349,535
풀	21		ties (Part X, line 2							<del></del> -	726,225		599,551
ž [	22		or fund balances	. Subtract lii	ne 21 froi	m line 20 .	<u></u>			2,	344,340		2,749,984
Pa	rt II	Signatu	re Block										
			I declare that I have e									iy knowledge an	d belief, it is
true	, correct	, and complete	Declaration of prepa	rer (other than	officer) is ba	ased on all informat	ion of which	prepare	er nas a	ny knowled	uge —————		
		26	jelot Hand										
Sig		,	re of officer		_ <u>_</u>	<del></del>				Date			
He	re	Eliza	abeth A Hausle	r, Ph.D., F	ounder	and CEO					Septem	ber 28, 202	0
		Туре о	r print name and title										
Pai		Print/Type	preparer's name		Preparer's	signature		D	ate	· · · · · · · · · · · · · · · · · · ·	Check [	ıf PTIN	

For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

Preparer

Firm's name

Firm's address ▶

Cat. No 11282Y

Firm's EIN ▶

Phone no.

☐ **Yes** ☐ **No**/ Form **990** (2019)

	successfully comp		Scale Up program		strengthening in Guatemala	with Project Concern
b	Nepal: Build Chan 2015 earthquakes. in partnership with home strengthenir living in over 24,00	ge continued its larg Through 21 technic the government an ng to 100,000 homeo	est recovery effort al support centers, d its partners, Build wners entitled to a d or structurally stra	to date, working at sca 23,000 homeowners re I Change trained gover \$1,000 subsidy. By Ap engthened houses.	15,000 ) (Revenue \$ le across all 32 districts that eceived advice on resilient ho nment engineers to provide to ril 2020, more than 120,000 p	were impacted by the ome building. Working technical assitance for seople in Nepal were
	Philippines: Build facilitate resilient h Simultaneously in to better enable co also provided tech financing approach	Change worked with nousing loans for low the Philippines, Buil ommunity engageme nucal support on the nes.	h four microfinance w-income homeowr Id Change also crea nt. Together with t creation of a new o	lenders to build their the scaling the scaling ted a safe schools conthe Philippines Red Croparly action protocol for the scaling action protocol for the scal	100,000) (Revenue \$ echnical capacity and develor ig of these new financial production monitoring app with the German Red Croser typhoons, linked with innoverse	op resources to ducts in 2020. th Plan International ss, Build Change vative forecast-based
	Philippines: Build facilitate resilient h Simultaneously in to better enable co also provided tech financing approach	Change worked with nousing loans for low the Philippines, Built mmunity engagement on the nes.  Tryices (Describe on 1,242,296 includir	h four microfinance wincome homeowr ld Change also crea nt. Together with the creation of a new of	lenders to build their t lers ahead of the scalir led a safe schools cor ne Philippines Red Cro early action protocol fo	echnical capacity and develong of these new financial production monitoring app with second the German Red Crost typhoons, linked with innoverse	op resources to ducts in 2020. th Plan International ss, Build Change vative forecast-based

rart	Checklist of Required Schedules		¥	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
2	complete Schedule A	2	<b>✓</b>	
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		<b>✓</b>
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		<b>√</b>
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		<b>√</b>
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		✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		<b>✓</b>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10	<b>√</b>	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	1	
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		1
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		1
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		1
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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	✓	
12a	Schedule D, Parts XI and XII	12a	1	
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		<b>√</b>
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	1	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<b>✓</b>	
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		1
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		1
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		✓
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		<b>√</b>
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		1
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<b>1</b>
b	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		1

Part	IV 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		1
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	1	
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
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		1
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		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<b>√</b>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>√</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<b>\</b>
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<b>✓</b>	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule $M$	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38 Bost	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	· ·	· · · ·	<u> </u>
۵.	Entantha number reported in Day 2 of Four 1000 Entant 0 if mat analysis is		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	10		

2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax   2a   16   18 least one is reported on line 2a, did the organization life all required faderal employment tax returns? Note: If the sum of lines 1 and 2 a list greater than 250, you may be required to e-file (see instructions) . 3b of the organization of lines 1 and 2 a list greater than 250, you may be required to e-file (see instructions) . 3d of the organization and provided business gross income of \$1,000 or more during the year? . 3a   you have 1 file year or during the year you have 1 file year and you have 1 file year yo	Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
Statements, filed for the calendar year ending with or within the year covered by this return				Yes	No
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Dut the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-f for this year? If "No" to line 80, prowde an explanation on Schedule O  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 county (such as a bank account, securities account, or other financial account)?  If "Yes," the fire the name of the foreign county (such as a bank account, securities account, or other financial accounts?  If "Yes there the name of the foreign county (such as a bank account, securities account, or other financial accounts?  If "Yes there the name of the foreign county (such as a bank account, securities account, or other financial accounts?  B Was the organization sfer finice the foreign county (such as a bank account, securities account, or other financial accounts?  If "Yes," did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax shelter transaction at any time during the tax shelter transaction at a stream organization shelt the organization into file foreign shelt. The organization shelt are not tax deductible as chartable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  b If If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization or second any funds, directly or indirectly, or pay permition file form 1899 as required?  If	2a				
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3					
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3b If "Yes," with it filed a Form 99.0T for this year? If "No" or time 3b, provide an explanation on Schedule O.  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)?  5b If "Yes," enter the name of the foreign country \$\int \text{Yes}\$ the securities account, or other financial accounts (FBAR).  5c instructions for filing requirements for FInCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5c in the security of the organization that twas or is a party to a prohibited tax shelter transaction?  5c in the security of the organization have annual gross receipts that are normally greater than \$100,000, and did the organizations have annual gross receipts that are normally greater than \$100,000, and did the organizations have annual gross receipts that are normally greater than \$100,000, and did the organizations have annual gross receipts that are normally greater than \$100,000, and did the organizations that were not tax deductible an exhantiable contributions?  6c if "Yes," did the organization include with every solicitation an express statement that such contributions and services provided to the payor?  7c organizations that may receive deductible contributions under section 170(c).  8d bif "Yes," did the organization notify the donor of the value of the goods or services provided?  7b bif "Yes," did the organization notify the donor of the value of the goods or services provided?  7c bif the organization neceive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor?  7c bif the organization receive and contribution of undersordate the organization file form 8282?  1d f"Yes," indicate the number of Forms 8282 filed during the year  9c bif the organization	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	<b>✓</b>	<u></u>
b If "Yes," has it field a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O  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 accountry of "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accountry of the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6c If "Yes," did the organization interest were not tax deductible as charitable contributions?  6c Does the organization valve 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?  6c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8d Did the organization and the payor?  8d If "Yes," did the organization notify the donor of the value of the goods or services provided?  9d If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  9d If "Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d If "Yes," indicate the number of Forms 8282 filed during the year  9d Did the organization received a contribution of cash beta for the payor and pa					
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 bark account, securities account, or other financial account)?  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). Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  If "Yes" to line Sa or 5b, did the organization file Form 8886-1?  Do be the organization have annual gross receipts that are normally greater than \$100,000, and did the organizations have annual gross receipts that are normally greater than \$100,000, and did the organization shict any receive deductible contributions an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  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?  To gradizations that may receive deductible contributions under section 170(c).  Did the organization notify the donor of the value of the goods or services provided?  To but the organization notify the donor of the value of the goods or services provided?  To but the organization notify the donor of the value of the goods or services provided?  To but the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  To but the organization receive and contribution of qualified intellectual property, did the organization file and contribution of qualified intellectual property, did the organization file and contribution of good and services, did the organization file and the property did the organization file and the property did the programation file form 1088-028 (agreed) and the property did the programation file form 1088-028 (agreed) and property did the	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			✓
a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  bit "Yes," einter the name of the foreign country be see instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  bit and the organization for the organization that it was or is a party to a prohibited tax shelter transaction?  if "Yes" to line 5a or 5b, did the organization flat organization flat organization tax shelter transaction?  if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  bit for granization enceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  bit "Yes," indicate the number of Forms 8282 filed during the year  bit of the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  dif "Yes," indicate the number of Forms 8282 filed during the year  bid the organization received a contribution of qualified intellectual property, did the organization the form 8899 as required?  If the organization received a contribution of qualified intellectual property, did the organization file form 8899 as required?  If the organization received a contribution of qualified intellectual property, did the organization file form 8899 as required?  If the organization received a contribution of cars, boats, analiens, or their vehicles, did the organization file form 8990 cars, boats, analiens, or their vehicles, did the organization file form 8990 cars, boats, analiens, and organization file form 8990 cars, boats, analiens, or their vehicles, did the organization file form 8090 cars, boats, analiens, and organization file form 8090 cars, boats, a	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
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).  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b) Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  if "Yes" to line 5a or 5b, did the organization file form 8886-17  5a  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 charlable contributions?  if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  b) If "Yes," did the organization include with every solicitation an express statement that such contributions and services provided to the payor?  b) If "Yes," 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?  c) Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d) If "Yes," indicate the number of Forms 8282 filed during the year  D) Did the organization, during the year, pay premiums, directly, or indirectly, on a personal benefit contract?  f) Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f) If the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organization maintaining donor advised funds.  b) Did the sponsoring organization maintaining donor advised funds.  c) Section \$501(c)(7) organizations Enter:  a) Initiation fees and capital contributions included on Part VIII, line 12  b) Gross income from there sources (Do	4a				
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58 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 59 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 60 If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 61 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? 62 organization served that were not tax deductible contributions under section 170(c). 63 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 65 Organizations that may receive deductible contributions under section 170(c). 66 Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 70 Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 71 Did the organization neceive a payment in excess of \$75 made partly as a contribution of are services provided for which it was required to file Form 8282? 71 Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 72 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 73 Did the organization received a contribution of cars, boats, airplaines, or other vehicles, did the organization file Form 893 as required? 74 If the organization received a contribution of cars, boats, airplaines, or other vehicles, did the organization like a form 1098-C? 75 Sponsoring organization have excess business holdings at any time during the year? 76 Did the sponsoning organization maintaining donor advised funds. 77 Did the sponsoning organization have excess business holdings at any time during the year? 78 Did the sponsoning organization have exc	b				
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6a	b		5b		✓
organization solicit any contributions that were not tax deductible as charitable contributions? . 6  b   f "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b   f "Yes," did the organization notify the donor of the value of the goods or services provided?  c   Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d   f "Yes," indicate the number of Forms 8282 filed during the year  Did the organization, during the year, pay premiums, directly, to pay premiums on a personal benefit contract?  f   Did the organization received a contribution of qualified intellectual property, dot the organization file Form 8299 as required?  h   If the organization received a contribution of qualified intellectual property, dot the organization file a Form 1098-C?  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?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  B   Did the sponsoring organization make any taxable distributions under section 4966?  B   Did the sponsoring organization make any taxable distributions under section 4966?  B   Did the sponsoring organization make any taxable distributions under section 4966?  B   Did the sponsoring organization is included on Part Vill, line 12  C   Orsos receipts, included on Form 990, Part Vill, line 12, for public use of club facilities  Did the sponsoring organization is property fo	C		5c		
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and services provided to the payor?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  To bid the organization contract or indirectly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  Sponsoring organization make a distribution of the verification of the organization file a Form 1098-C?  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?  Did the sponsoring organization make and stirribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  Gross income from members or shareholders  b Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  110a  Section 501(c)(12) organizations. Enter:  a It is the organization incomes to issue qualified health plans in more than one state?  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 organization is licensed to issue qualified health plans in more than one state?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  Is the organization and educational information	7				
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If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   7g   7h   1f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   7h   2nd   2	_				<b>▼</b>
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  10 Initiation fees and capital contributions included on Part VIII, line 12  10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Gross income from members or shareholders  11 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  13 Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  13 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  13 Enter the amount of reserves on hand  14 Did the organization receive any payments for indoor tanning services during the tax year?  14 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  15 If "Yes," see instructions and file Form 4720, Schedule N.			_		
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?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12.  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  Gross income from members or shareholders.  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.  Enter the amount of reserves on hand.  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  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?  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?		· · · · · · · · · · · · · · · · · · ·			
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9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	В		8		
a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter: 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: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b if "Yes," enter the amount of tax-exempt interest received or accrued during the year  13b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c Did the organization receive any payments for indoor tanning services during the tax year? b if "Yes," has it filled a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 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?	9	• • • •			1
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12			9a		
Initiation fees and capital contributions included on Part VIII, line 12	_		9b		
a Initiation fees and capital contributions included on Part VIII, line 12	10				1
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	а				[
a Gross income from members or shareholders	b				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  13 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.  15 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  15c Enter the amount of reserves on hand  16c Enter the amount of reserves any payments for indoor tanning services during the tax year?  16d If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  16 If "Yes," see instructions and file Form 4720, Schedule N.  18 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	11	Section 501(c)(12) organizations. Enter:			
against amounts due or received from them.)	а	Gross income from members or shareholders			
Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b				
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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 organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  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 on Schedule O  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	13				
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	а	· · · · · · · · · · · · · · · · · · ·	13a		
the organization is licensed to issue qualified health plans		- · · · · · · · · · · · · · · · · · · ·			
c Enter the amount of reserves on hand	b				
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 on Schedule O.  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?			140	-	!
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?	_				
excess parachute payment(s) during the year?			140		<del></del>
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?  16  16	15		15		
Is the organization an educational institution subject to the section 4968 excise tax on net investment income?					i
· · · · · · · · · · · · · · · · · · ·	16		16		
	. •	If "Yes," complete Form 4720, Schedule O.			1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struc	"No" tions. . ✓
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 1			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . 1b			
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		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>✓</b>
6	Did the organization have members or stockholders?	6		<b>/</b>
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		1
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		<b>/</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	<b>√</b>	<del> </del>
b	Each committee with authority to act on behalf of the governing body?	8b	✓	<del> </del>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	200	<u> </u>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	103	<b>√</b>
10a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	104		<del></del>
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	1	
11a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	_	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
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	1	
13	Did the organization have a written whistleblower policy?	13	1	
14	Did the organization have a written document retention and destruction policy?	14	1	
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	<b>\</b>	
b	Other officers or key employees of the organization	15b	✓	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<b>✓</b>
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		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► California			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords		

Daga	•
raue	

Part VII	Compensation of Officers,	Directors,	Trustees,	Key Employees,	Highest	Compensated	<b>Employees</b>	, and
	Independent Contractors							

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

Check this box if neither the organization no		d org	anız	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.
					C)					
(A)	(B)	Position (do not check more than one						(D)	(E)	(F)
Name and title	Average	box, unless person is both an					an	Reportable	Reportable compensation	Estimated amount of other
	hours per week	officer and a director/trustee)						compensation from the	from related	compensation
	(list any	or and	lnst.	Officer	₹	en g	Former	organization	organizations	from the
	hours for related	rect in	Ē	ğ	E S	loye	ner	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	organizations	학회	nal	ł	Key employee	e co				J
	below dotted line)	Individual trustee or director	Institutional trustee		8	E		-	•	
	dollog iii.o,	°	ee			Highest compensated employee				
(1) Martin Fisher	2.0			-						
Board Member		<b>/</b>					ļ			
(2) Sig Anderson	2.0				ŀ					
Board Member	ļ	<b>/</b>	├-	├	ļ	ļ	<u> </u>			
(3) David Friedman	2.0	,	ĺ							
Board Member		1		-	<u> </u>		-			
(4) Grace Hanson	2.0	/		1			1			
Board Chairperson		-	├	-			$\vdash$			
(5) Hemant Shah	2.0	1						]		
Board Member	2.0	-				-	-		<del></del>	
(6) Erin Bradner Board Member	2.0	1								
(7) Elizabeth Hausler	40.0	<del></del>			_					
Founder and CEO		1		1				181,296		10,212
(8) Diane Datteri	40.0							1		
Controller						1		101,958		12,325
(9)										
(10)		ļ		-	-					
<u>,,</u>									,	
(11)						,				
(12)										
(13)										
(14)										

Part	VII Section A. Officers, Directors,	Trustees,	Key	Em	plo	yee	s, an	ıd F	lighest Compe	nsated Empl	oyees (d	contii	nued)
						C) ution							
	(A) Name and title	(B) Average	(do not check more than box, unless person is bot						( <b>D</b> ) Reportable	(E) Reportable	Estima	(F) ted.am	ount
	value and the	hours	hours officer and a director						compensation	compensation from related	O	fother	
		per week (list any	Individual trustee or director	Inst	Officer	K <sub>0</sub> y	em High	Former	from the organization	organizations	fre	pensat om the	
		hours for related	vidua	tutio	er	Key employee	lest c	l eq	(W-2/1099-MISC)	(W-2/1099-MISC)	related of	ization organız	
		organizations below	or tag	nal tr		loyee	omp			J			
		dotted line)	ee	Institutional trustee			Highest compensated employee						
(1E)				<u> </u>	_	ļ	8.	L			<del> </del>		
(15)			ł										
(16)													
(17)					<u> </u>	-		-					
77.77						]							
(18)													
(10)				_						· · · · · · · · · · · · · · · · · · ·	├		
119)		<b></b>											
(20)													
					_			_			<del> </del>		
14.11													
(22)													-
(23)							_						
											<del> </del>		
35:37													
(25)													
1b	Subtotal							<u> </u>	283,254		<del> </del>		22,537
c	Total from continuation sheets to Part							•	203,234				£,337
<u>d</u>	Total (add lines 1b and 1c)							<b>&gt;</b>	283,254		<u>L</u>	2	2,537
2	Total number of individuals (including but reportable compensation from the organi		to th	ose	list	ed a	above	e) WI	ho received more 2	e than \$100,000	) of		
<del></del> ,									<u> </u>			Yes	No
3	Did the organization list any former of								oyee, or highes	t compensated			لبِــُــ
4	employee on line 1a? If "Yes," complete 5 For any individual listed on line 1a, is the										3		<b>✓</b>
4	organization and related organizations												
	ındıvıdual										4	<b>✓</b>	
5	Did any person listed on line 1a receive of for services rendered to the organization?										5		<b>-</b>
Section	on B. Independent Contractors	7 700, 0	<u> </u>	0.0	-			0, 0					
1	Complete this table for your five high												
	compensation from the organization. Repo	ort compen	sation	tor	the	cal	endai	r yea	<u>~</u>	within the orga		s tax	year.
	(A) (B) (C) Name and business address Description of services Compensation												
										<del></del>			
											<u></u>		
2	Total number of independent contractor received more than \$100,000 of compensations.							the		e) who			
	received more than \$100,000 of compens	auon irom t	HE OF	yarı	Lall	UIL			NONE				

Form **990** (2019)

Pari	VIII	Statement of Rev Check if Schedule			senon	se or note to an	v line in this Pa	ort VIII		
	*	Oneok ii donoddio	0 00	Tituli is a re	, <u>3</u>	SC OF HOLD TO CA	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>v</u> v	1a	Federated campaig	ns .		1a					
ran und	b	Membership dues			1b					
Q E	С	Fundraising events			1c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organization			1d					
S, G	е	Government grants			1e	711,509				
io Si is	f	All other contribution and similar amounts no			4.6	4 545 400				
the the	_	Noncash contribution			1f	4,515,493				
g g	9	lines 1a-1f			1g	\$ 31,981				
Cont	h	Total. Add lines 1a-					5,227,002			
						Business Code				
<u>S</u>	2a	Fees	. <b></b>				9,784			9,784
Program Service Revenue	b									
ı Sı	С									
gram Ser Revenue	d									
F	е									
₫.	f	All other program se								
	g	Total. Add lines 2a- Investment income					9,784			
	3	other similar amoun		-		s, interest, and	323			323
	4	Income from investr					323			
	5	<b>–</b>				▶				
				(ı) Rea		(II) Personal				
	6a	Gross rents	6a		10,800					
	b	Less. rental expenses	6b		10,800					
	С	` '								
	đ						0			
	7a	Gross amount from		(i) Securi	ties	(II) Other				
		sales of assets	<b>.</b>							
		other than inventory	7a			<del> </del>				
Revenue	b	Less. cost or other basis and sales expenses .	7b							
že	c	Gain or (loss)	7c							
ž	d	Net gain or (loss)				▶	··········			,
Other		Gross income from								
8		events (not including								
		of contributions rep			į				:	
		1c). See Part IV, line	18		8a					
	b	Less: direct expens			8b	<u> </u>				
	С	Net income or (loss)			g eve	nts ▶				
	9a	Gross income f activities. See Part I			9a					
	h	Less direct expense			9b					
	b C	Net income or (loss)				es <b>&gt;</b>				
		Gross sales of in			2 41616					1
	10a	returns and allowan			10a					
	b	Less: cost of goods	-		10b					
	C	Net income or (loss)			vento	ory ▶				
2		<u> </u>				Business Code				
eor Ie	11a	Foreign Exchange Lo	oss				-18,705			-18,705
scellaneo Revenue	b		·							
cel ev	C					]				
Miscellaneou Revenue	d					L				1
		Total Add lines 11a					-18,705 5,218,404			-8,598
	12	Total revenue. See	เมอเม	uotiona			J,Z 10,404	l	l	-0,030

Form 990 (2019)

Part IX Statement of Functional Expenses

Par	IX Statement of Functional Expenses				<del></del>
Section	on 501(c)(3) and 501(c)(4) organizations must compl			nust complete colum	n (A).
	Check if Schedule O contains a response				
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> 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, trustees, and key employees	191,508	48,303	58,153	85,052
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	2,322,705	1,743,776	275,429	303,500
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	727,039	670,547	27,803	28,689
10	Payroll taxes	153,302	102,689	26,347	24,266
11	Fees for services (nonemployees):				
а	Management			Ì	
b	Legal	7,905	7,905		
c	Accounting	33,070	13,570	19,500	· · · · · · · · · · · · · · · · · · ·
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				<del></del>
f	Investment management fees	· · · · · · · · · · · · · · · · · · ·			
	Other. (If line 11g amount exceeds 10% of line 25, column				
g	(A) amount, list line 11g expenses on Schedule O)	280,355	252,379	17,237	10,739
12	Advertising and promotion	440.000	04.000	42.404	10.000
13	Office expenses	113,086	81,289	12,191	19,606
14	Information technology	41,925	29,364	9,485	3,076
15	Royalties				<del></del>
16	Occupancy	251,518	169,587	75,482	6,449
17	Travel	380,800	321,374	15,600	43,826
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	475		475	
23	Insurance	20,921	447	19,375	1,099
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	General Business Expenses	56,171	37,125	16,748	2,298
b	Training Supplies, Equipment and Materials	111,758	111,167		591
С	Transport and Freight	130,869	127,455	315	3,099
d	Housing Subsidies	-10,647	-10,647		
e	All other expenses	288,151	265,100	17,063	5,988
25	Total functional expenses. Add lines 1 through 24e	4,812,760	3,706,330	574,140	532,290
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 ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				5 990 (2018)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . . . . (B) (A) Beginning of year End of year Cash-non-interest-bearing . . . . . . . . . . . . . 1 1,625,182 1,741,734 2 2 Savings and temporary cash investments . . . . . 3 1,144,470 3 985.954 4 202,609 4 557,580 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . 6 7 7 8 8 9 9 Prepaid expenses and deferred charges . . . 69.557 40,303 10a Land, buildings, and equipment; cost or other basis. Complete Part VI of Schedule D . . . 10a 475 10c Less: accumulated depreciation . . . . . 10b b 11 Investments—publicly traded securities . . . . . . 11 12 12 Investments—other securities, See Part IV, line 11. 13 Investments-program-related. See Part IV, line 11. 13 14 14 9,750 9,029 15 Other assets. See Part IV, line 11 . . . . . . . . . . . . 18,522 15 14,935 16 Total assets. Add lines 1 through 15 (must equal line 33) . . . 16 3,070,565 3,349,535 17 17 420,311 387,688 18 18 Grants payable . . . . . . . . . . . 19 19 305,914 211,863 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 726,225 26 26 Total liabilities. Add lines 17 through 25 . . . . . . . 599,551 Organizations that follow FASB ASC 958, check here ▶ □ **Net Assets or Fund Balances** and complete lines 27, 28, 32, and 33. Net assets without donor restrictions . . . . 363,545 27 537.075 27 1,980,795 **28** 28 2,212,909 Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. 29 29 Capital stock or trust principal, or current funds . . . . . . . . Paid-in or capital surplus, or land, building, or equipment fund . . . . 30 30 31 Retained earnings, endowment, accumulated income, or other funds . . . 31 2,344,340 32 32 2,749,984 33 Total liabilities and net assets/fund balances . 3,070,565 33 3,349,535

Form **990** (2019)

orm 99	0 (5019)			Pa	ige 12
Part	XI Reconciliation of Net Assets		_		
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,21	8,404
2	Total expenses (must equal Part IX, column (A), line 25)			4,81	2,760
3	Revenue less expenses. Subtract line 2 from line 1			40	)5,644
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	Ţ		2,34	14,340
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities	1			
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))			2,74	19,984
Part	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 ☑ Accrual ☐ Other				
	If the organization changed its method of accounting from a prior year or checked "Other," expla	in ın			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were compile	d or			
	reviewed on a separate basis, consolidated basis, or both:	1			
	Separate basis Consolidated basis Both consolidated and separate basis	1			
b	Were the organization's financial statements audited by an independent accountant?		2b	✓	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	on a			
	separate basis, consolidated basis, or both:	1			
	☑ 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 oversig				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	<b>✓</b>	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	n on	i		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	n the			
	Single Audit Act and OMB Circular A-133?	.	За		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	the [			
	required audit or audite, explain why an Schodula O and describe any stops taken to undergo such audit		3h		

Form **990** (2019)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

**Employer Identification number** 

Build	Cha	ange					35-22	37155
Pai		Reason for Public Char	rity Status (All	organizations must	comple	te this p	art.) See instruction	ns.
The o	orga	nization is not a private founda	tion because it is	s: (For lines 1 through	12, ched	ck only or	ne box.)	~~1
1		A church, convention of church	nes, or association	on of churches descri	ibed in se	ection 17	0(b)(1)(A)(i).	(1)+
2		A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	Z))	O
3		A hospital or a cooperative hos						
4		A medical research organization	on operated in co	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and state						
5		An organization operated for tagettion 170(b)(1)(A)(iv). (Complete Complete		college or university	owned o	r operate	ed by a government	al unit described in
6	П	A federal, state, or local govern		mental unit described	in sectio	on 170(b)	(1)(A)(v).	
7		An organization that normally						n the general public
		described in section 170(b)(1)	(A)(vi). (Complet	e Part II.)		_		
8		A community trust described in	section 170(b)	(1)(A)(vi). (Complete	Part II.)			
9	_	An agricultural research organi				erated in	conjunction with a l	and-grant college
		or university or a non-land-grauniversity	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or
10		An organization that normally r	eceives: (1) more	e than 331/3% of its si	upport fro	m contri	butions, membershi	o fees, and gross
		receipts from activities related support from gross investment	to its exempt ful	nctions—subject to c	ertain exc	ceptions,	and (2) no more tha	n 331/3% of its
		acquired by the organization a	fter June 30, 197	75. See <b>section 509(</b> a	a)(2). (Co	nplete Pa	art III.)	545m65555
11		An organization organized and	operated exclus	sively to test for public	c safety.	See <b>sect</b> i	ion 509(a)(4).	
12		An organization organized and	operated exclus	ively for the benefit o	f, to perfo	orm the fu	unctions of, or to cal	rry out the purposes
		of one or more publicly suppo						
		Check the box in lines 12a thro	ugh 12d that des	scribes the type of sur	porting o	organizati	on and complete line	es 12e, 12f, and 12g
а		Type I. A supporting organ						
		the supported organization					he directors or trust	ees of the
		supporting organization. Ye	ou must comple	ete Part IV, Sections	A and B	•		
b		Type II. A supporting organ						
		control or management of				persons	that control or man	age the supported
		organization(s). You must	•					
С		Type III functionally integ						ally integrated with,
		its supported organization(						
d		Type III non-functionally i						
		that is not functionally integ						d an attentiveness
		requirement (see instruction	•	-				
е		Check this box if the organ						e II, Type III
_		functionally integrated, or T	• •	tionally integrated sur	oporting o	organizat	ion.	<del>,</del>
Ť		nter the number of supported of						· · [
		rovide the following information					<del>                                      </del>	
	(i) I	Name of supported organization	(ii) EIN	(ili) Type of organization (described on lines 1-10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
				above (see instructions))		ment?	instructions)	instructions)
					Yes	No	}	
				· · · · · · · · · · · · · · · · · · ·	163	- 110		
(A)								
<b>'</b>								
(B)								· - · <u>. · · · · · · · · · · · · · · · · · </u>
(C)						-		
(D)								
(E)								
					L	L		

Schedule A (Form 990 or 990-EZ) 2019 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2019 Calendar year (or fiscal year beginning in) ▶ (a) 2015 (c) 2017 (d) 2018 (f) Total (b) 2016 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 4,623,457 7,016,438 6,686,306 5,573,092 5,227,002 29,126,295 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge . . . . Total. Add lines 1 through 3. . . . 6,686,306 5,227,002 29,126,295 4,623,457 7,016,438 5,573,092 The portion of total contributions by 5 each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . 4,757,592 Public support. Subtract line 5 from line 4 24,368,703 Section B. Total Support (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (or fiscal year beginning in) ▶ 7 Amounts from line 4 . . . . . . 5,227,002 29,126,295 4,623,457 7,016,438 6,686,306 5,573,092 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . 303 506 553 255 323 1,940 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 1,090 2,000 3,500 -7,550 -18.705 -19,665 11 **Total support.** Add lines 7 through 10 29,108,570 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . 14 <u>83.72</u> % 14 Public support percentage from 2018 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 15 16a 331/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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Support Schedule for Organization No. 2   Part I or if the organization failed to qualify under Part II. If the organization failed to qualify under the tests listed below, please complete Part II.)    Section A. Public Support	Schedul	e A (Form 990 or 990-EZ) 2019	7					Page <b>3</b>
Section A Public Support  Calendar year for fiscal year beginning in) ►  (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total  Calendar year for fiscal year beginning in) ►  (a) 2015 (b) 2016 (e) 2017 (d) 2018 (e) 2019 (f) Total  Calendar year for fiscal year beginning in) ►  (a) 2015 (b) 2016 (e) 2017 (d) 2018 (e) 2019 (f) Total  Calendar year for fiscal year beginning in) ►  (a) 2015 (b) 2016 (e) 2017 (d) 2018 (e) 2019 (f) Total  Calendar year for fiscal year beginning in) ►  (a) 2016 (e) 2017 (d) 2018 (e) 2019 (f) Total  Calendar year for fiscal year beginning in) ►  (a) 2016 (e) 2017 (d) 2018 (e) 2019 (f) Total  (b) 2016 (e) 2017 (d) 2018 (e) 2019 (f) Total  (c) 2018 (e) 2019 (f) Total  (e) 2018 (e) 2019 (f) Total  (e) 2019 (f) Total  (e) 2018 (e) 2018 (e) 2019 (f) Total  (e) 2018 (e) 2018 (e) 2019 (f) Total  (e) 2018 (e) 2019 (f) Total  (e) 2018 (e) 2018 (e) 2018 (e) 2019 (f) Total  (e) 2018 (e) 2018 (e) 2018 (e) 20	Part	II Support Schedule for Organiza	ations Desci	ribed in Sect	ion 509(a)(2)			$\overline{}$
Section A. Public Support  Calendar year (or fiscal year beginning in)   1								der Part II.
Calendar year (or fiscal year beginning in) P 1 Gifts grants, contributions, and embership fees received (it) not include any "unsual grants" is greated to not include any "unsual grants" is greated to the formation of the property of the property from admissions, merchandise sold or services performed, or facilities in unsual draw and such with as released to the formation of the property of the unsual grants in a selection to the unsual draw of the property of the organization without charge of the organization of the decidence of the organization of the			under the te	ests listed bel	ow, please co	omplete Part	II.)	
1 Gifs, grants, controlutions, and membership fees near-level (box nichuldes my runusul grants) 2 Gross recepts from admissions, merchanduse sold or services performed, of facilities furnished in any activity that is related to the organization's tax-evenity purpose. 3 Gross recepts from activities that are not an unrelated trade or business under section 513. 4 Tax revenues level for the organization's benefit and either paid to or expended on its behalf or expended on this behalf or expended on this behalf or the organization without charge. 5 Total. Add lines 1 through 5. 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons. 5 Amounts included on lines 1, 2, and 3 received from disqualified persons. 6 Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. 6 Add lines 7 and 70 a 8 Public support. (Subtract line 7c from line 6) 9 Amounts from line 6 10 Gross income from interest, dividends, payments reviewed or securities losan, rents, reysaltes, and income from similar sources. 9 Durnistate business taxable morome (less section 511 taxes) from businesses accurred after June 30, 1975 c c Add lines 10a and 10b 1 Nel Income from unrelated business skarable morome (less section 511 taxes) from businesses accurred after June 30, 1975 c c Add lines 10a and 10b 1 Nel Income from unrelated business skarable morome (less section 50 ft) (lines 1) (lin							<del>,</del>	/
received (Do not include any "unusual grants") 2 Gross receipt from admissions, merchandes sold or services performed, or facilities furnished in any activity that realised to the organization's tax-evempt purpose 3 Gross receipt from admissions that are not an unrelated trade or business under section 510 4 Tax revenues level for the related to the organization's benefit and either paid to or expanded on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge ending the control of the policy of the organization without charge ending the control of the policy of the organization without charge ending the control of the organization ending the control organization ending the side of the control organization ending the control organization ending the control organization endin	Calen		(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's star-esterplish propose.  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues levered for the organization's themself and either paid to or expended on its behalf or expended on its behalf.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total, Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year of y	1		,	X			/	
solid or services performed, or facilities furnished in any activity that realized to the organization's tax-everify purpose of Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues leveled for the pead to or expended on its behalf in the organization's benefit and either paid to or expended on its behalf in the organization without charge furnished by a governmental unit to the organization without charge furnished by a governmental unit to the organization without charge furnished by a governmental unit to the organization without charge furnished from disqualified persons in the organization without charge furnished from disqualified persons in the organization without charge for the organization without charge for 7% of the amount on line 61, 2, and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 63 for the year of 2 Add lines 7 and 70 and 18 and	_			<b>\</b>				
furnished in any activity that is related to the organization's tar-exempt purpose.  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues leveed for the organization or expended on its behalf.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total, Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year or 4 Add lines 7a and 7b.  8 Public support. (Subtract line 7c from line 6).  9 Amounts from line 6  10 Gross noome from interest, dividends, payments received on securities loans, rents, reysless, and income from smaller sources businesses acquired after June 30, 1975.  c Add lines 10 and 10 b.  11 Nel income from unrelated businesses acquired after June 30, 1975.  c Add lines 10 and 10 b.  11 Nel income from unrelated businesses acquired after June 30, 1975.  c Add lines 10 and 10 b.  12 Other income, Do not include glain or loss from the sale of capital xissets (Explain in Part VI.).  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First five years. If fife Form 990 is for the organization's first, second, third, fourth, or fifth tax yeak as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support (Public Support Percentage  16 Public support (promputation of Investment Income Percentage  17 invest/first income percentage from 2018 Schedule A, Part III, line 17  18 33/3% support tests – 2018. If the organization of not check the box on line 14 or line 19a, and line 16 is more than 33/3%, and line 16 is more than 33/3%, shock this box and stop here. The organization qualifies as a publicly supported organization in line 18 is not may an alticle organization in line 18 is not may an alticle in 18 is not may a	2			1			/	
3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge . 6 Total Add lines 1 through 5 . 7a Amounts included on lines 2 and 3 received from disqualified persons . b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7 and 75 . 8 Public support, (Subtract line 7 or from line 6.) .  Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total 9 Amounts from line 6.) .  Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total 9 Amounts from line 6.) .  Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total 9 Amounts from line 6.) .  Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total 9 Amounts from line 6.) .  Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total 9 Amounts from lines 6.) .  Section B. Total Support (Subtract line 7 or from lines 6.) .  In the lines 10 and 10 b year has a subtractive subtrac		furnished in any activity that is related to the		\	ł		/	
unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge. 6 Total Add lines 1 through 5. 7a Amounts included on lines 1, 2, and 3 received from disqualified persons. b Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 18 for the year c Add lines 7a and 7b 8 Public support, (Subtract line 7c from line 6.) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royathes, and moone from smilar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 1 Ne income from unrelated business activities not included in line 10b, whighter or not the business is regularly cargied on 12 Other income. Do not include glan or loss from the sale of capital jässets (Explain in Part VI). 13 Total support, (Add lings 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax yeak as a section 501(c)(3) organization, chegk this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (ff)) 15 %  Section D. Cyfnputation of Investment Income Percentage  17 in not more than 33'3%, check this box and stop here. The organization qualifies as a publicly supported organization in line 18 is nore than 33'3%, auport tests – 2019. If the organization did not check the box on line 14, and line 15 is more than 33'3%, and line 18 is nor tome than 33'3%, check this box and stop here. The organization qualifies as a publicly supported organization in line 18 is nor then 33'3%, check this box and stop here. The organization qualifies as a publicly supported organiz	_			1-1			/	
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total. Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 1, 2, and 3 received from disqualified persons.  c Add lines 7a and 7b.  8 Public support (subtract line 7 from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total payments from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total payments from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total payments from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total payments from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2011 (d) 2018 (e) 2019 (f) Total payments from line 6.)  Section B. Total Support (controlled flan or loss from the sale of capital payments from line 6.)  10 Under income Do not include flan or loss from the sale of capital payments from line 6.  10 Other income. Do not include flan or loss from the sale of capital payments from the sale of capital payments for the organization's first, second, third, fourth, or fifth tax yeah as a section 501(c)(3) organization, check fits box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) 17 96 (line 50, column flant) 17 is not more than 331/36, check this box and stop here. The organ	3	· · · · · · · · · · · · · · · · · · ·			1	<b> </b>	/	
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	20							

# Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P	art V	.)	
Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	ļ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2	<u></u>	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b_		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used o ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c	<u> </u>	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).			
h	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a		
D	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		<del>                                     </del>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L. (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which		l —	
_	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b> Was the organization subject to the excess business holdings rules of section 4943 because of section	9с		
iva	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		<del> </del>
	A family member of a person described in (a) above?	11b	ļ	<del> </del>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	1110	L	L
Section	on b. Type i Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	<u> </u>		<del>                                     </del>
·	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
		1		<del>  ,</del>
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b> VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		<del> </del>
Section	on C. Type II Supporting Organizations			
00011	or Type it dupper ling organizatione		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	Ĺ	<u> </u>
Section	on D. All Type III Supporting Organizations			<del></del>
	Dilling and the state of the constant and account the last development the fifth areath of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	İ		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	—	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	<del></del> -		
Conti	on E. Type III Functionally Integrated Supporting Organizations	3		<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	netru	ction	<u></u>
· a	The organization satisfied the Activities Test. Complete line 2 below.	,,,,,,,		-,.
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1		1 1
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	-		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a		<del></del> -
D	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		<u> </u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			لـــــا
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		l

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	y int	egrated Type III support	ing organization (see
instructions).			

Schedu	e A (Form 990 or 990-EZ) 2019			Page <b>7</b>	
Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)		
Secti	on D-Distributions			Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes				
2			rted		
3	Administrative expenses paid to accomplish exempt purp	occes of supported orga	nizatione		
4		oses of supported orga	HIZATIONS		
	Qualified set-aside amounts (prior IRS approval required)				
6				<u> </u>	
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which	h the organization is res	noncive		
0	(provide details in <b>Part VI</b> ). See instructions.	in the organization is rec	ponsive		
9	Distributable amount for 2019 from Section C, line 6				
10	Line 8 amount divided by line 9 amount				
	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019	
1	Distributable amount for 2019 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in <b>Part VI</b> ) See instructions.				
3	Excess distributions carryover, if any, to 2019				
a					
<u>a</u>					
<u>c</u>					
<del>d</del>	From 2017				
e	From 2018		· · · · · · · · · · · · · · · · · · ·		
f	Total of lines 3a through e				
g	Applied to underdistributions of prior years				
	Applied to 2019 distributable amount		· · · · · · · · · · · · · · · · · ·		
	Carryover from 2014 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2019 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2019 distributable amount				
С	Remainder. Subtract lines 4a and 4b from 4				
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
7	Excess distributions carryover to 2020. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2015 .		<u></u>		
b	Excess from 2016				
С	Excess from 2017				
d	Excess from 2018		·		
е	Excess from 2019			<u> </u>	

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Schedule A	, Line 10:
Other incor	ne: Loss or Gain on Foreign Exchange
••••	
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### 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

Inspection

Employer identification number

201 Open to Public

Name of the organization **Build Change** Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . . . . Aggregate value of contributions to (during year) . 2 3 Aggregate value of grants from (during year) . . Aggregate value at end of year . . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes ☐ No funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 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 Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area ☐ Preservation of a certified historic structure ☐ Protection of natural habitat Preservation of open space 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 Year Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: **b** Assets included in Form 990, Part X . . .

Par	III Organizations Maintaining	Collections of	Art, Historical T	reasures, or	Other Similar A	ssets (continued)
3	Using the organization's acquisition, collection items (check all that apply):		ner records, chec	k any of the fo	llowing that make	significant use of its
а	☐ Public exhibition		d 🗌 Loan	or exchange pi	ogram	
b	Scholarly research					
С	Preservation for future generations	<b>:</b>				
4	Provide a description of the organization	tion's collections a	nd explain how t	hey further the	organization's exe	mpt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather					
Part	IV Escrow and Custodial Arra	angements.			-	
	Complete if the organization 990, Part X, line 21.	answered "Yes"	on Form 990, F	Part IV, line 9,	or reported an a	mount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?					
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following to	able: ſ		Amount
_	Beginning balance				1c	Milouit
c C	Additions during the year				1d	
ď	Distributions during the year				1e	
e f	Ending balance			T T	1f	
2a	Did the organization include an amoun					v? Nes No
	If "Yes," explain the arrangement in Pa					
	t V Endowment Funds.	art Air. Oncok here	in the explanation	Thas been pro	vidod oii i die xiii .	· · · <u> </u>
, i ai	Complete if the organization	answered "Yes"	on Form 990. F	Part IV. line 10	1.	
	Complete it the organization	(a) Current year	(b) Prior year	(c) Two years ba		ck (e) Four years back
1a	Beginning of year balance	148,846	90,656			
b	Contributions	31,896	58,152		546 16,2	
c	Net investment earnings, gains, and	31,030	30,102	40)	10,2	12 27,511
·	losses	23	38		24	
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses	400 705	440.040		250 44.0	27.044
g	End of year balance   Provide the estimated percentage of t		148,846		656 44,0	86 27,844
2	Board designated or quasi-endowmer			, column (a)) ne	au as.	
a	Permanent endowment	%	, 70			
b	Term endowment ▶ %					
C	The percentages on lines 2a, 2b, and		10%			
20	Are there endowment funds not in the			at are held and	administered for t	he
3a	organization by:	e possession or th	e organization the	at are nelo ano	auministered for t	Yes No
	400					3a(i) ✓
						3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related o					3b
4	Describe in Part XIII the intended uses	•	•			
Part						
	Complete if the organization		on Form 990. F	Part IV. line 11	a. See Form 990	. Part X. line 10.
	Description of property	(a) Cost or oth			(c) Accumulated	(d) Book value
		(investme		ther)	depreciation	<b>(.,</b>
	Land					
b	Buildings	. [				
С	Leasehold improvements					
d	Equipment			399,771	399,771	0
e	Other					
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	00, Part X, column	(B), line 10c.)	🕨	0

Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value		od of valuation of-year market value
(1) Financia	derivatives	· · · · · · · · · · · · · · · · · · ·		<u></u>
(2) Closely h	neld equity interests			
(3) Other				
(A)				
				<del> </del>
				<del></del>
(G)				
(H)	(A)			· · · · · · · · · · · · · · · · · · ·
	mn (b) must equal Form 990, Part X, col. (B) line 12.) .	l	<u> </u>	
Part VIII	Investments—Program Related.		a 11a Saa Earm	000 Part V line 12
	Complete if the organization answered "Yes" on For			
	(a) Description of investment	(b) Book value		of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				·····
	mn (b) must equal Form 990, Part X, col. (B) line 13.)	<u> </u>	<u> </u>	
Part IX	Other Assets.	000 D-+ IV II-	- 444 0 5	000 David V. Sma 45
	Complete if the organization answered "Yes" on For	m 990, Part IV, IIn	e i id. See Form	
	(a) Description			(b) Book value
(1)				· · · · · · · · · · · · · · · · · · ·
(2)		,		
(4)				
(5)				
(6)				· • · • · · · · · · · · · · · · · · · ·
(7)		***************************************		
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on For line 25.	m 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal in	ncome taxes			
(2)		·		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	•			
Total. (Colu	, , , , , , , , , , , , , , , , , , , ,			
2. Liability for	runcertain tax positions. In Part XIII, provide the text of the footnote	ote to the organization	n's financial statemer	nts that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Part		· · · · · · · · · · · · · · · · · · ·	r Return.	
	Complete if the organization answered "Yes" on Form 990		1	5.040.404
1	Total revenue, gains, and other support per audited financial statement Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ıs		5,218,404
2		.   2a		
a	Net unrealized gains (losses) on investments			
b				
C C	Recoveries of prior year grants		<del> </del>	
d	·			0
	Add lines 2a through 2d		3	5,218,404
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		-	3,218,404
4	Investment expenses not included on Form 990, Part VIII, line 7b .	. 4a		
a	Other (Describe in Part XIII.)		$\dashv$	
b	·		4c	0
C E	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, Iii			E 219 404
5 Part				5,218,404
Part	Complete if the organization answered "Yes" on Form 990		per neturn.	
1	Total expenses and losses per audited financial statements		11	4,812,760
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		·   ·	4,012,700
a	Donated services and use of facilities	.   2a	i	
_	Prior year adjustments			
b	Other losses	. 2c	$\dashv$ $\downarrow$	
G	Other (Describe in Part XIII.)	. 2d	$\dashv$	
d	Add lines 2a through 2d	<del></del>		^
_	Subtract line 2e from line 1		3	4,812,760
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:		-	4,612,700
4		40		
a	Investment expenses not included on Form 990, Part VIII, line 7b	.   4a   .   4b		
b	Other (Describe in Part XIII.)			•
_	Add lines 4a and 4b		4c	1010 700
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, Supplemental Information.	iine 18.)		4,812,760
2; Part Part V,	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this pa Line 4:  set aside for future use as determined by the Board of Directors		information.	
	Line 2:  ordance with generally accepted accounting principles, a private entity is rec	quired to disclose any materi	al uncertain ta	x postions
that ma	nagement believes does not meet a "more-likely-than-not" standard of beir	ng sustained under an income	tax audit and	l to record a
liability	for any such taxes including penalty and interest. Management of the orga	anization has not identified ar	ny uncertain ta	x positions
that red	quire the recording of a liability mentioned above or further disclosure.			
			<b></b>	

Schedule D (Fo	rm 990) 2019	Page <b>5</b>
Part XIII	Supplemental Information (continued)	
·		
		·

### **SCHEDULE F** (Form 990)

### **Statement of Activities Outside the United States** ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No 1545-0047 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

Build Change					5-2237155
Part I General Information Form 990, Part IV, line		ties Outside	the United States. Con	nplete if the organization ar	nswered "Yes" on
For grantmakers. Does the other assistance, the grante award the grants or assistant.	es' eligibility				✓ Yes □ No
2 For grantmakers. Describe outside the United States.	in Part V the	e organization	i's procedures for monitorin	ng the use of its grants and	dother assistance
3 Activities per Region. (The fo	llowing Part	I, line 3 table (	can be duplicated if addition	nal space is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) East Asia and the Pacific	2	22	Program Services	Training & Tech Assistance	683,546
(2) Central America/Caribbean	1	6	Program Services	Training & Tech Assistance	730,872
(3) South America	1	11	Program Services	Training & Tech Assistance	431,680
(4) South Asia	11	93	Program Services	Training & Tech Assistance	1,545,755
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					» h.w
(15)	-				
(16)					
(17) 3a Subtotal	5	132			3,391,853
<b>b</b> Total from continuation	<del></del>	132			3,33 1,033
sheets to Part I					<u> </u>
c Totals (add lines 3a and 3b)	5	132			3,391,853

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(I) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)		···						
(5)								
(6)								
(7)								
(8)								
(9)								
(10)		_						
(11)								
(12)								
(13)								
(14)		•						
(15)								
(16)					-			

Schedule F (Form 990) 2019

Page 3

Schedule F (Form 990) 2019

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed (h) Method of valuation (book, FMV, appraisal, other) (e) Manner of cash disbursement (f) Amount of noncash assistance (c) Number of reciplents (d) Amount of cash grant (g) Description of noncash assistance (a) Type of grant or assistance (b) Region (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Schedule F (Form 990) 2019

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Schedule	+ (+om	990)	2019

Page 4

Part	IV Foreign Forms		····
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	☑ No

Schedule r	(FOIIII 990) 201
Part V	Supplei

Supplemental	Information			

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I, Line 2:
All funds are used for the purposes agreed to in the variety of grant agreements and contracts entered into with our funders. We have
management staff situated in all our our country programs to track what the funds are used for, and detailed financial reports including all
financial transactions are submitted to headquarters at a minimum on a monthly basis.
<u>`</u>
······································
- ,

### SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Open to Public Inspection

OMB No 1545-0047

Name of the organization Employer identification number Build Change 35-2237155

Part	Questions Regarding Compensation				
				Yes	No
1a		ovided any of the following to or for a person listed on Form			
		provide any relevant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	☐ Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
_	Mary at the beauty of the desired at the	the comment of the co			
b		the organization follow a written policy regarding payment spenses described above? If "No," complete Part III to			
	explain	penses described above: if two, complete fait in to	1b		
			- 15		
2	Did the organization require substantiation price	or to reimbursing or allowing expenses incurred by all	_		
_		O/Executive Director, regarding the items checked on line			
	1a?		2	✓	
3	Indicate which, if any, of the following the organiza	ation used to establish the compensation of the			
	organization's CEO/Executive Director. Check all t	hat apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of	the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee	✓ Written employment contract			
	☐ Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
		D. D. 1300 C. St. v. A. L. v. d Ab. second Abs Abs Abs Abs Abs			
4		), Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:				
a	Receive a severance payment or change-of-control		4a 4b		<b>√</b>
b	Participate in, or receive payment from, a supplem Participate in, or receive payment from, an equity-		46 4c		<b>V</b>
С		pased compensation arrangement.	<del></del>		<u> </u>
	ir res to any or mes 4a-c, list the persons and p	vovide the applicable amounts for each term in har in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29)	organizations must complete lines 5–9.			
5		tion A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:				
а	The organization?		5a		<b>\</b>
b	Any related organization?	. <b></b>	5b		<b>\</b>
	If "Yes" on line 5a or 5b, describe in Part III.				
6		tion A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:				
a	The organization?		6a		<b>√</b>
b	Any related organization?		6b		<b>✓</b>
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990 Part VII Section	on A, line 1a, did the organization provide any nonfixed			
•		describe in Part III	7		1
8	• •	paid or accrued pursuant to a contract that was subject	- <b></b> -		<u> </u>
		Regulations section 53.4958-4(a)(3)? If "Yes," describe	]		
	in Part III	-	8		✓
					<del></del>
9	If "Yes" on line 8, did the organization also fo	llow the rebuttable presumption procedure described in	<u> </u>		
			9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any Individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
	(i)							
1Elizabeth Hausler, CEO	(ii)	181,296				10,212	191,508	. 0
	(1)							
2	(ii)							
	(i)							
3	(11)							
	(i)			,				······
	(ii)							
_	(i) (b)			•••••				
	(0)							
	(ii)		4,,,-	**** ****** *** *** ***	· •• • •			
6	(0)	-						<del></del>
-	(0)			•		<b></b>		******************
	(0)							
8	(ii)							
<del></del>	0				-			
9	(ii)						**** **** *** ******	
	(0)				·			
10	(ii)							
	(1)							
11	(ii)							
	(1)							
12	(n)							
	(1)			****				
13	(1)							
	(1)		<b>,,,,</b>					/2 #4400
14	(6)							
	(1)					<b> </b>		
15	(d)							
	(1)			***** ***** ****				
16	(ii)		<u> </u>		<u> </u>	<u> </u>		edule I (Form 990) 2019

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019	Page 3
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part I for any additional information	Also complete this part
	••••••
	•
	***************************************
	Schedule J (Form 990) 2019

### SCHEDULE M (Form 990)

### **Noncash Contributions**

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047 201**9** 

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization

**Build Change** 35-2237155 Part I Types of Property (c) (d) (a) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art . . . Art-Historical treasures . . . Art-Fractional interests . . . 3 Books and publications . . 5 Clothing and household goods . . . . . . . . . 6 Cars and other vehicles . . . Boats and planes . . . . . 7 8 Intellectual property . . . . 9 Securities-Publicly traded . . . 10 Securities—Closely held stock . Securities-Partnership, LLC, 11 or trust interests . . . Securities-Miscellaneous . . 12 13 Qualified conservation contribution-Historic structures . . . . . . 14 Qualified conservation contribution-Other . . Real estate-Residential . . . 15 16 Real estate—Commercial . . 17 Real estate—Other . . . . Collectibles . . . . . 18 19 Food inventory . . . . . . 20 Drugs and medical supplies . . . 21 Taxidermy . . . . . . . 22 Historical artifacts . . . . . 23 Scientific specimens . . . . 24 Archeological artifacts . . 25 Other ► ( Supplies ) 6,981 Market value 10 26 Other ► ( Hotel Lodging ) 25,000 Market value 27 27 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . . Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33 describe in Part II.

Part II	the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Part I, Colu	mn b:
The items	reported are the number of items received for the supplies and the number of hotel stays for the lodging.
<b></b>	

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

#### 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.

OMB No 1545-0047
2019
Open to Public

Inspection

Employer identification number Name of the organization 35-2237155 **Build Change** Form 990 Part III 4d Code Expense \$ 225,564 including grant of \$48,453 Revenue \$55,753 Haiti: The REZO (meaning "network" in Haitian Creole program continued to provide services as a business incubator for block-makers and small building contractors, increasing the number of REZO affiliates and supporting these independent entrepeneur block-maker and builder affiliates to grow their businesses successfully despite the turbulent year. Code Expense \$505,308 including grant of \$0 Revenue \$732,423 Caribbean: Build Change expanded its focus in order to help countries in the region continue to recover from the 2017 hurricane season through a potent combination of technical assistance and technology. In Dominica, Build Change created a customer housing management information system (MIS) for the Government's Housing Recovery Project designed specifically to enable government teams to screen, select, register and support 1,700 priority families to repair their homes following Hurricane Irma. In Sint Maarten, Build Change worked in collaboration with the World Bank and the Sint Maarten National Recovery Program Bureau to complete technical assessments of hurricane damaged single family houses and pave the way for their repair, retrofit, or reconstruction in 2020. Code Expense \$196,947 including grant of \$62,946 Revenue \$174,446 Indonesia: Technical assistance for the reconstruction of homes in Palu damaged by the 2018 carthquake and tsunami continued through various knowledge sharing sessions with both government and non-government agencies, as well as in local media. Code Expense \$314,477 including grant of \$532,100 Revenue \$564,976 Innovations: In Nepal, the Surakshit Ghar mobile application, which has now been downloaded over 30,000 times, continued to be key to scale, enabling homeowners in even the most remote areas to choose from several hundred disaster resilient house designs, and download the one which best suits their needs as they engage in the reconstruction of their earthquake-damaged house. In a collaboration between country programs and a Kathmandu-based coding hub, Build Change created the mobile app "Tibay Balay" for the Philippines, with the support of Czech Republic Humanitarian Aid. Meanwhilc, in Indonesia, Build Change created and field-vetted "Rumah Aman", a safe house awareness mobile app funded by the Center for Disaster Philanthropy.

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
Build Change	35-2237155
Form 990, Part V, Line 4b, List of foreign countries:	
Indonesia, Haiti, Colombia, Philippines, and Nepal	
Form 990, Part VI, Line 11b, Review of Form 990:	
The Controller prepares the tax return with review and approval by the COO and CEO. It is then presented	to the Board of Directors
for final review prior to filing.	
Form 990, Part VI, Line 12c, Review of conflict of interest policy	
All employees, including the CEO, sign a conflict of interest document. Conflicts of interest are disclosed	and those with any conflicts are
not involved in decision making relevant to the conflict in question. Should a conflict arise it would be not	
	ied in the militaes undroi orough
to the Board's attention if deemed significant.	
Form 990, Part VI, Line 15b, Process of determining compensation	
The Board of Directors determines and approves the compensation of the CEO. The Board reviews region	al, national and industry salary
comparability data including the Mountain States Employers Council compensation survey and the annua	
determining the salary of the CEO. The approval of the CEO's compensation is documented in the Board r	
approves the salary of top management officials. The Board prepapproves any new hires and their salary	
budgets. If a top management personnel is hired outside of the previously approved budgets, the Board is	
approval is requested.	
Form 990, Part VI, Line 19:	
The organization posts its financial statements on its own website. The organization's policies and govern	ning documents are available
upon request.	