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Fam	. 99	10-	Ret	urn of Org	anization	Exempt From	Inco	me Ta	K	<u> </u>	1545-0047
	January	-	Under section	501(c), 527, or 4	1947(a)(1) of the li	nternal Revenue Code (except	private four	ndations	, 20	19
•		the Treasury	▶ 00	not enter socia	secunty numbe	rs on this form as it ma	y be n	rade public.	ر کل م	Open	to Public
inter	nal Reven	ue Service	<u> </u>			nstructions and the lat			U		ection
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	Applicati	on pending	F Name and adds	ress of principal off	licer					or subordinates?	
-	Taxover	ngt status	501(4(3)	501(c) (Lon heard) > (4947(a)(1) or 52				ies included? si (see instru	☐Yes ☐No
	Website) = (0.0011103	C -24/8/4/ 0: C 34	-	H(c) Group e		-	,1101107
			Corporation	Trust Associa	rtion Other >	L Year of fo	rmation			of logal domi	die
P	artI	Summa	ry								
_	1	Briefly des	cribe the orga	nization's miss	ion or most sign	nificant activities					
Activities & Governance	1		Helping.3			INTERNAL REVE	(6) (ETA)	#6017E		·····	
Ĕ	2	XQ.) F .:	23 WON'X	C. For Chai	dispostinued it	operations of Eigh			2596 0	de not nee	
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45	1					ing body (Pat IS IRe	11507	n . `	4		35
E						2019 (Part V <u>line</u> 2a)			5		11
à				ers (estimate if		CAMPUS :	JPPOF	(1 · · ·	6		2
₹	7a	Total unrel	lated business	revenue from	Part VIII, colunt	HOHNED FLOREN	3E, KY F#136		7a		
_	ь	Net unrela	ted business to	axable income	from Form 950	NOW BASE	``	Prior Yea	7b	C	ent Year
_	8	Contribute	ons and orante	s (Part VIII, line	1b)	EP 0 3 2020	\vdash	VIIII 100	159652	Curre	1287
ğ				(Part VIII, line	29)	1 00 2020			133032		1207
Revenue	10	Investmen	t income (Part	VIII, column (A), tines 3, 4, and	Charlet #14			255		39
_						STRUBBOAT	\perp		107240		11083
_						/III, column (A), line 12) 		123457		12410
					X, column (A), li K, column (A), lir		\vdash		3030		303
49						column (A), lines 5-10	" ├─		74339		7195
Expenses			•		enil ,(A) nmulo:	* **	· 🗀				
8.		Total lund:	raising expens	es (Part IX, col	umn (D), line 25) >	. 🗀				
ш					es 11a-11d, 11	•	·		61299		6524
				s 13-17 (must Subtract line 1	•	otumn (A), line 25)	∙		138668		14023
5 1	10	LIEAGUIDO IE	as expenses	Subtract line 1	6 HOM IME 12		Bea	Inning of Curr	(15211) ant Year	End	(16134 of Year
Lisserb Bedanc	20	Total asset	ts (Part X, line	16) .					162398		14480
48	21	Total liabili	ities (Part X, lin	1e 26)							
Fund A				ces Subtract I	ine 21 from line	20			162398		14480
_	irt II		re Block								
tru	o, correct	and complet	, idectare that ins te Declaration of ρ	ave examined this i preparer fother than	repurn, including acc officer) is based on	ompanying schedules and : all information of which pre	parer ha	nis and to the sarry knowled	igo go	ny knowiologo	and belief a
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Sig	3n	Signati	ure of officer					Date	1		
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US	e Only	Firm s add		•				Phon			
Ma	y the IA			the preparer	shown above? (see instructions)	<u> </u>		<u> </u>		res □ No
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duit.	0 (2019) Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	Raising Money for charities, People helping geople
2	Did the organization undertake any significant program services during the year which were not flistled on the pnor Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program sérvices?
•	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured be expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$)
44-	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	······································
_	
4c	(Code) (Expenses \$including grants of \$) (Revenue \$)
	······································
	<u></u>
4d	

Checklist of Required Schedules Yes No is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 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 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 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 98-197 If "Yes," complete Schedule C, Part III 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 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III 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 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 or in quasi endowments? If "Yes," complete Schedule D, Part V. If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 107 if "Yes," 11a complete Schedule D. Part VI . 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 167 If "Yes," complete Schedule D, Part VII 116 c. 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 167 if "Yes," complete Schedule D. Part VIII 11c 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 110 Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X 116 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, Independent audited financial statements for the tax year? If "Yes," complete 12a Schedule D. Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization enswered "No" to line 12a, then completing Schedule O, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E... 13 14a Old the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have eggregate revenues or expenses of more than \$10,000 from grantmaking. fundralsing, 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 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 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 Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 1B Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 If "Yes." complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 20a 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Form 990 (2019)

Form 99	0 (2019)			Page 4
Part	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 27 // "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		,
24a_	Did the organization have a tax-exempt bond issue with an outstanding grincipal 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		
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
C	Did the drganization 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? .	240		$\overline{\mathcal{L}}$
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
þ	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		1
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part III	27		/
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filling thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .	28b	L	1
c	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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		4
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	⊢–	1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>_</u>
34	Was the organization related to any tex-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
	Oid the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
ь	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	35ъ		1
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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note: All Form 990 filers are required to complete Schedule O.	38	1	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V .	- · · ·	<u> </u>	
4	Establish surpher annuded in Day 2 of Com. 1000 Enter 5 March and ankles	,	Yes	No_
1a b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	4 /	}	1
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1	i	
·	reportable gaming (gambling) winnings to prize winners?	1c	1	
		For	990	(2019)

Form 99	0.0019		۶	ege 5
Part				
بمنته			Yes	No
_	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 10			_
ь	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).	2b		—
	Ond the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
Q	If "Yes," enter the name of the foreign country >-			1
£-	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?	5a	1	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		7
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chantable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b ,		1
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?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		_
¢.	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
đ	# "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or Indirectly, on a personal benefit contract?.	71		✓
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79	L	_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		-
8	Sponsoring organizations maintaining donor advised funds. Oid a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8_		1
9	Sponsoring organizations maintaining donor advised funds.	1		į
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	.	<u> </u>
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u>/</u>
10	Section 501(c)(7) organizations Enter	1	!	ĺ
a b	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 10b			
11	Section 501(c)(12) organizations. Enter.		i	l
а		l	l	
ь	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?	12a		<u> </u>
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	ŀ	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>	L_	<u> </u>
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	13a	\vdash	1
b	the organization is licensed to issue qualified health plans			1
C	<u> </u>	<u> </u>	<u> </u>	
14a		14a	⊢	
b		14b	├-	
15	Is the organization subject to the section 4980 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	L	<u>/</u>
16	If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," see instructions and file Form 4720, Schedule N If "Yes," a proposed Form 4720, Schedule N	16		<u>/</u>
	if "Yes," complete Form 4720, Schedule O	L	990	2015

Form 99	0 (2019)		<u> </u>	age 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			tions.
	Check If Schedule O contains a response or note to any line in this Part VI	<u> </u>		<u> </u>
Secti	on A. Governing Body and Management			
	and the second s		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			١.
	committee, explain on Schedule O		-	
ь		. 1		
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		/
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	L	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?.	5		
6	Did the organization have members or stockholders?	6	\	
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_	L	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		-	
	the year by the following			
8	The governing body?	8a		
Ь	Each committee with authority to act on behalf of the governing body?	8ъ_	V	<u> </u>
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		1-
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
			Yes	No
10a	Oid the organization have local chapters, branches, or affiliates?	10a	<u> </u>	_
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ъ	L	1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	L	<u> </u>
þ				
12a		12a		<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b		<u> </u>
¢	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1		
	describe in Schedule O how this was done	120		/
13	Old the organization have a written whistleblower policy?	13	<u> </u>	<u></u>
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>	_ _
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	1
ь	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15b		-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		_
b	If "Yes." did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
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 Another's website Upon request Other (explain on Schedule O)	í (Sec	tion	501(c)
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.	d inter	rest p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	•	
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Form 990 (2018)

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee Postuna (do not check more than one Average Reportable Reportable Estimated amount box, urless person is both ar compensation from related hours of other officer and a director/in stee compensation --from the from the (list any organization (W-2/1099-MISC) omanization and related organizations related organization (1) Fred Miller 4 Worthy President (2) Al Goodwin 4... Worthy Jr Past President (3) Paul Triollo .2... Vice President (4) Pete Giambalvo Worthy Chaptin (5) Rylyn dodd 12 7552 Worthy Secratary (6) Charles Ward 20 Worthy Treasurer (7) Mark Lockhart 4 **Warthy Conductor** (B) Ron Bredlove Z Inside Guard INTERNAL REVENUE SERVICE (9) Ellis Berliner 2 RECEIVED Outside Guard (10) Brett Jackson 6... Trustee (11) Anton Dubb . . . . Trustee (12) Al Goodwin Trustee (13) Pete Grambalvo Trustee (14) Bruce Behar Trustee

Page 8 of

Par	VII Section A. Officers, Directors, 1	rustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated	Emplo	yees (	contii	nued)
(A) Name and title			(C) Position (do not check more if box, unless person is officer and a director/lek					nan tee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estimated amount of other compensation		
		(list any hours for related organizations below dotted tine)	Individual inusies or director	bratautional mustee	Officer	Key employee	Highest compensated employee	Formar	organization (W-2/1099-MISC)	organiz (W-2/109	etions	fr	om the	and
(16)											_			
(17)														
(19)														
(20)	***************************************													
(21)														
(22)					_			Γ						
(23)														
(24)					Γ									
(25)					Г	Ė								
	Total from continuation sheets to Part Total (add lines 1b and 1c)				•			<b>A A</b>						<u> </u>
2	Total number of individuals (including but reportable compensation from the organi	not limited zation >	l to th	iose	list	ed	above	e) w	ho received more	e than \$1	00,000	of	. <b>.</b>	
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5	officer, dire Schedule J	ctor. for so	tru uch	ste	e, k	ey e.	mpl	oyee, or highes	t compe	nsated	3	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual			50,										_
5	Did any person listed on line 1a receive o for services rendered to the organization?	r accrue co ? If "Yes," c	ompl	nsal ete	ion Sch	froi	n any ile J f	uni or s	related organizat uch person	on or inc	hvidual	5		<b>✓</b>
1	on B. Independent Contractors  Complete this table for your five high compensation from the organization. Repo	est compe	ensate	ed o for	inde	por	ndent	CO	ntractors that n	oceived	more 1	han \$1	00,00	10 OC
	(A) Name and business add		3640.				Cita	,,,,	(B) Description of serv			(C)		<del>yea.</del>
			_					_						
								_						
2	Total number of independent contracto							th	ose listed above	e) who				
	received more than \$100,000 of compens	auon trom t	ne on	gan	zet	on I				_		Forn	990	(2019)

		Statement of Reve Check if Schedule O		spon	se or note to an	y line in this Pa	rt VIII	<u> </u>	<u></u> . [
				·		(A) Total revenue	(8) Related or exempt function revenue	(C) Urvelated business revenue	(D) Revenue exclude from tax under sections 512-51
इ	1a	Federated campaigns		1a					
and Other Similar Amounts	ь	Membership dues		15	12872	;			
Ĕ	C	Fundraising events	•	1c					
1	d	Related organizations		10					
Ē	8	Government grants (c	-	10				i	
Š	f	All other contributions, and similar amounts not it		11				-	
ĕl	٥	Noncash contributions		<u> </u>			•		
اق	-	ines 1a-1f .		19	\$				
盲	h	Total. Add lines 1a-1f			▶	12873	· ·		
I					Business Code				
ļ	2a		<b></b>	••-••					Ĺ
9	ь				ļ				
Revenue	C			••••	<b></b>		<del> </del>		<u> </u>
اڇ	ď		·	•••••	-				
	e	All other program serv		••••					<del></del>
١	9	Total. Add lines 2a-21		•	•				
┪	3	Investment income (I		dends	, interest, and				Î
-		other similar amounts			▶[	390			L
- (	4	Income from investme	nt of tax-exeπ	npt bo	nd proceeds 🟲 [				
- 1	5	Royalties .	· · · · · · · · · · · · · · · · · · ·		<i>.</i> ▶				
	_		(I) Rea	<u> </u>	(ii) Personal				ļ
- [	6a	<u></u>	ia				1		
ı		, <u> </u>	ib ic				ł		ł
	d	Net rental income or (			•				<del> </del>
	72	Gross amount from	() Securi	163	(II) Other	· · · · · · · · · · · · · · · · · · ·			
١		sales of assets							[
-		other than inventory 7	ra 📗						
;	b	Less cost or other basis							ļ
:			ь						1
!	c		/c		<u> </u>				<u> </u>
	đ	Net gain or (loss)	, , ()	<del></del>	· · ·				<del> </del>
3	8a	Gross income from events (not including \$	lunuraising		]				Ì
-		of contributions repo	rted on line						ł
-		1c). See Part IV, line 1		₽a	12110				1
ı	ь	Less ¹ direct expenses		8b	18758				
١	C	Net income or (loss) fr	om fundraisin	g eve	nts 🕨	-6648			<u> </u>
	9a	Gross income fro							1
١		activities. See Part IV,		9a	85568				1
J	ь	Less, direct expenses		9 <b>b</b>	65495	*****			ļ
J	10a	Net income or (loss) fr Gross sales of inve		LIAITIE	:s . •	20073	-	····	<u> </u>
ļ	iva	returns and allowance	• •	10a	160222				
-	ь	Less cost of goods so		10b					<u> </u>
	c	Net income or (loss) fr				97413			
T					Business Code				
9	11a				$\vdash$				
Revenue	þ				<u> </u>				
اچَ	c	All adhan and a de-				<del> </del>			
-1	a	All other revenue	114	•	L	<del></del>			<del> </del>
_1	12	Total revenue. See in			. •	124101			<del> </del>
		TOWN TO VEHICLE . SEE III	3400110113	•		144 101		L	Form 990 (20

Form 95	0 (2019)				Page 10							
Part	IX Statement of Functional Expenses											
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).												
Check if Schedule O contains a response or note to any line in this Part IX												
Do no	t include amounts reported on lines 6b, 7b,	(A) Total expenses	(B)	(C) Management and	(D) Fundralsing							
8b, 9b	, and 10b of Part VIII.	(CIB) expenses	Program service expenses	general expenses	expenses							
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3029										
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, tines 15 and 16											
5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	7552										
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 salanes and wages	57736		1								
8	Pension plan accruats and contributions (include section 401(k) and 403(b) employer contributions)		,									
9	Other.employee benefits											
10	Payroll taxes	6666										
11	Fees for services (nonemployees)		-									
a	Management											
ь	Legal											
۵	Accounting											
d e	Lobbying			+								
1	Investment management fees			<del> </del>								
•	Other (If line 11g amount exceeds 10% of line 25, column	<del></del>										
•	(A) amount, list line 11g expenses on Schedule (C)	866										
12	Advertising and promotion	1764										
13	Office expenses	3254										
14	Information technology											
15	Royalties											
16	Occupancy		<del></del>									
17	Travel		·									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials											
19	Conferences, conventions, and meetings	ļļ		ļ <u>-</u>								
20	Interest	ļ <del></del>		<del> </del>								
21 22	Payments to affiliates											
23	Depreciation, depletion, and amortization insurance			<del> </del>								
		8668		<del>           </del>								
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.)			[								
a	Bank Charges	3384										
b	Dues License Permits	1411										
c	<b>Vulities</b>	35695										
đ	MUSIC (Bands & Karokee)	10200										
0	All other expenses											
25	Total functional expenses. Add lines 1 through 24e	140235										
26	Joint costs. Complete this line only if the organization reported in column (8) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).											
	10110 mily 30F 30-2 (M3C 330-720) .											

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			Paga	<u> 11</u> .

	Check if Schedule O contains a response or note to any line in this Par	(A) Beginning of year		(8) End of year
Ti	Cash—non-interest-bearing	59552	1	4888
2	Savings and temporary cash investments	80279	2	7044
3	Pledges and grants receivable, not		3	
4	Accounts receivable, net		4	
5	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	
6	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	•
2 7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
₹   9	Prepaid expenses and deferred charges		9	291
10a	• • • • • • • • • • • • • • • • • • • •			
۱ь	• • • • • • • • • • • • • • • • • • • •	22567	100	2256
111	Investments – publicly traded securities		11	_2235
12	Investments – other securities See Part IV, line 11		12	
13	Investments – program-related. See Part IV, line 11		13	<del></del>
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	162398		14480
17	Accounts payable and accrued expenses	105390	17	14489
18	Grants payable	•	18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other 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		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tex, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
1	of Schedule D		25	
26	Total fiabilities. Add lines 17 through 25		26	
	Organizations that follow FASB ASC 958, check here ▶ □ and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions		27	
28	Net assets with donor restrictions		28	
27 28 29 30 31 32	Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds	•	31	· · · · · · · · · · · · · · · · · · ·
32	Total net assets or fund balances	162398	32	14480
33	Total liabilities and net assets/fund balances	162398	33	14480

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om t	90 (2019)		,		Pe	ge 12
Pai	t 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			12	24101
2	Total expenses (must equal Part IX, column (A), line 25)	2			10	40235
3	Revenue less expenses. Subtract line 2 from line 1	3				16134
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			10	62398
5	Net unrealized gains (losses) on investments	6				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	В				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				<u>-1459</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10			14	44805
Par	XII Financial Statements and Reporting					11000
	Check if Schedule O contains a response or note to any line in this Part XII					
				- 1	1	<del></del>
				_L	Yes	No
1	Accounting method used to prepare the Form 990			+	Yes	No
1	Accounting method used to prepare the Form 990	×ptain	in		Yes	No
1 20	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain		2a	Yes	No.
1 2a	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were con		2		Yes	<u> </u>
1 2a	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.		2		Yes	<u> </u>
	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were conreviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis		2		Yes	1
	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were conreviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	 np:led	OT 2		Yes	1
	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited.	 np:led	OT 2	2a	Yes	✓ •-
	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both	 np:led	OT 2	2a	Yes	✓ •-
b	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis	npiled on	2 2 a	2a	Yes	✓ •-
b	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	npiled ted on	2 2 a	2a	Yes	✓ •-
b	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were controlled on a separate basis, consolidated basis, or both.  Separate basis Consolidated basis Both consolidated and separate basis were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both.  Separate basis Consolidated basis Both consolidated and separate basis.  If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for over the audit, review, or compilation of its financial statements and selection of an independent accountants.	npiled on ted on arsight int?	2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	2a	Yes	✓ •-
b	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	npiled on ted on arsight int?	2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	2a	Yes	<i>y</i>
b	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the audit, review, or compilation of its financial statements and selection of an independent accountar if the organization changed either its oversight process or selection process during the tax year, exchedule O	npiled on ted on arsight int? xplain c	a 2	2a	Yes	<i>y</i>
b с	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were concevered on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited basis, consolidated basis, or both  Separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the audit, review, or compilation of its financial statements and selection of an independent accountail fithe organization changed either its oversight process or selection process during the tax year, exceeding to a federal award, was the organization required to undergo an audit or audits as set for Single Audit Act and OMB Circular A-133?	npiled on araight int?	2 a 2 of 2 on 1 a 3	2a	Yes	<i>y</i>
b с	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both   Separate basis   Consolidated basis   Both consolidated and separate basis   Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both   Separate basis   Consolidated basis   Both consolidated and separate basis   Teyes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the audit, review, or compilation of its financial statements and selection of an independent accountal if the organization changed either its oversight process or selection process during the tax year, exceeding O.	npiled on arsight int? explain corth in the	2 a 2 of 2 on 1 a 3	2a	Yes	\frac{1}{\sqrt{1}}

SCHEDULE O -Supplemental Information to Form 990 or 990-EZ OMB No 1545-0047 (Form 990 or 990-EZ iplété to provide information for responses to specific questions on 2019 Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-FZ. Department of the Treasu Internal Revenue Service Inspection ► Go to www.irs.gov/Form990 for the latest information Name of the organization 23-7593065 Fraternal Order of Eagles # 538 Expenses ATM surcharg Cash Short 2073 Barbacue Kitchen pantry suppl Juke Box 727 Special Events 560 840 Kitchen Useag Grand Aerle Per Capita 6848 Hats State Aerie per Capita Music fund 1095 building Maint 3503 **RV** Parking Salf ins dividend 818 Janitorial Supplies special events 597 NSF check charges et 480 29 Veterans Dinner OICC training class Super Bowl 2021 100 Rm deposit refunds Convention fees Misc Supplies 864 Room use donation Social Rm Supplies TOTAL 18758 Totat Utilities itemized Donations Paid: CB / NB Water board Grand W President Coos Bay Senitary HAL REVENUE SERV Beloni Boys Ranch RECEIVED Pacfic Power & L Lutheran Church 50 AUG 3 1 2020 3847 Spectrum cable Young Life CAMPUS SUPPORT FLORENCE, KY MAIL UNIT # 188 TOTAL 1936 Veterans Dinne 3039 TOTAL For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 51056K