(Rev. January 2020)

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2019

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information

Open to Public

A		calendar year, or tax year l	beginning	, 2019, and end	ing	25(4)	mspection
В	Check if applicat	le: C		, 2010, and end			1
	Address cha)		0.1		tification number
	Name chang		LL BLVD		95	-4792	1792
	Initial return	CLAREMONT, CA	91711		100	hone num	
	Final return/ter	minated			90	9 625	2248
	Amended re	urn					
	Application p	pending F Name and address of p	rincipal officer:		G Gross	receipts	\$ 4,711,143.
	=	SAME AS C ABO			H(a) Is this a group ret	urn for sub	pordinates?
ī	Tax-exempt st	atus: X 501(c)(3) 501(c		1 40474 >44> 1 1-	H(b) Are all subordinat	es included	d? Yes No
J	Website: ►	WWW.UNCOMMONGOOI) ODC	4947(a)(1) or 527	_		
K	Form of organiz	ation: X Corporation Trust			H(c) Group exemption	number 🕨	•
Pa	rt Sun	mary	7 ISSOCIATION Office	L Year of forma		State of le	egal domicile: CA
	1 Briefly	describe the organization's	mission or most significant	call illia mo saa			
Ф	ECONO	MICALLY AND ENVI	RONMENTALLY SUSTA: WORK, HEALTHY FOR	activities: TO WORK F	OR THE CREAT	CION (OF
2	HEAL	H CARE, JUSTICE.	WORK HEALTHY FOR	TINADLE COMMONIT.	IES IN WHICH	EDUC	CATION,
Activities & Governance	ENERO	Y ARE AVAILABLE T	O ALL PECAPDIECE	OF CHEVIN HIK'	FRESH WATER	AND R	RENEWABLE
8	2 Check t	nis box > if the organia	ration discontinuity	OF TINCOME.		=	
প্র	3 Number	of voting members of the c	governing body (Part VI, line	e 1a).	ore than 25% of its		
es	4 Number	of independent voting men	nbers of the governing body	(Part VI, line 1b)	statatesetteetveesooxikiskii. Saasaannissa aantoo	3	19
Ξ	6 Total nu	mber of individuals employed	ed in calendar year 2019 (F	Part V, line 2a)		5	19
Ę	7a Total up	related business revenue to	te if necessary).			6	20
	b Net unre	lated business revenue fr	om Part VIII, column (C), li	ne 12	5.555555555555555555555555555555555555	7a	0.
-		rated business taxable into	ome from Form 990-T, line	39	* * * * * * * * * * * * * * * * * * * *	7b	0.
						-	Current Year
Revenue	9 Program	service revenue (Part VIII)	line 1h).		3,325,2	203.	4,559,211.
Ne l							51,510.
<u>۾</u>		VOLIGE (FAIL VIII. COIDITIII IA	1 lines 5 6d 8c 0c 10c -	2.4			100,422.
			I I I (MIIST AGUAL Dart VIIII -				
	13 Grants a	nd similiar amounts baid (P:	art IX column (A) lines 1 3	2)	-,000,		4,711,143.
1.	14 Denemis	Paid to or for members (Pa	Iff IX. column (Δ) line (1)			19.	1,404,757.
, 1	15 Salaries,	other compensation, emplo	byee benefits (Part IX, colu	min (A) C			
ise 1	16a Professio	nal fundraising fees (Part I	X, column (A), line 11e)	inii (A), lines 5-10)	760,0	87.	783,455.
Expenses	b Total fun	draising expenses (Part IX,	A, column (A), line TTe),				
ŭ 1	17 Other evi	Denses (Part IV as I was (A)	column (D), line 25) ►	57,537.			
1	18 Total exp	onses (Fait IX, column (A)), lines 11a-11d, 11f-24e)		271,7	90	207 (02
- 1	19 Revenue	loss experies (3-1/ (mu	ust equal Part IX, column (A	A), line 25)		96	307, 603.
	13 Nevenue	ess expenses. Subtract lin	e 18 from line 12		1,948,6		2,495,815.
ances					1		2, 215, 328. End of Year
Assets Balan	7 Total liah	ities (Part V. line 20)			4,631,6	03	
S Find 5		mics (rait X, mic 20)			1 1		6,849,193. 30,533.
	2 Net asset	or fund balances. Subtrac	ct line 21 from line 20.	* * * * * * * * * * * * * * * * * * * *	4,603,3		
Part	Jigiia	ture block			-,000,0		6,818,660.
Under pe complete	enalties of perjury	I declare that I have examined this	return, including accompanying sch	edules and statements and to u			
	i.		return, including accompanying sche on all information of which preparer	has any knowledge.	ne best of my knowledge	and belief,	, it is true, correct, and
		nature of officer					
Sign Here		(1	3(U)16) AL		Date		
IICIC	Tyr	ANCY MINTIE e or print name and title			PRESIDENT		
		De preparer's name	9,0		THESTORNI		
n - 1 - 1			Preparer's signature	Date	Check X	if PTI	N
Paid		NE HOFFMAN	JOANNE HOFFMAN	6/08/2			
Prepa Jse C	N. 1	HOFFMAN SHO	RT RUBIN DEWINTER	SANDERSON	Sen-employed	IPU	00364437
	Pirm's a	103 / PARK V	TEW DR		Firm's EIN ▶	01 0	700415
101 +4	0 IDC =1:	COVINA, CA	91724-3750			QT-3	709413
ay the	e IRO discuss	this return with the prepare	er shown above? (see instri	uctions)	rnone no.	026)	932-0100
AA F	or Paperwork	Reduction Act Notice, see	e the separate instructions.		0101L 01/21/20	33.57 E.	X Yes No
				I LEA(HUIL 01/21/20		Form 000 (0010)

Form 990 (2019) UNCOMMON GOOD Part IV Checklist of Required Schedules

-1	to the expensional consideration of the constant of the consta		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	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3		3		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6				X
7		7		X
8		8		X
9		9		X
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		х
11				
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	X	SE (45.5)
	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.	11 b		X
	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 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
	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	11 d	Х	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.	11 e		X
	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	11 f		X
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII.	12a	Х	
١	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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.			
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.	14b		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		X
2 0 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		X
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	rm 990 (2019) UNCOMMON GOOD	95-4792792	F	age 4
Pa	art IV Checklist of Required Schedules (continued)			
22	2 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals	on Part IX,	Yes	No
23	column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	current	X	
	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.	23		Х
24	4a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24 complete Schedule K. If 'No, 'go to line 25a.	d and		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to de any tax-exempt bonds?	efease 24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?			
25	5a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess ben transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	nefit 25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior ye that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' compacted by Compact I. Schedule L, Part I.	ear, and		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any of former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% contro or family member of any of these persons? If "Yes," complete Schedule L, Part II.	current or olled entity 26		Х
27	7 Did the organization provide a grant or other assistance to any current or former officer, director, trustee 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.	2		Х
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):			
	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor 'Yes,' complete Schedule L, Part IV.			Х
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.,	28b		Х
	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	f		Х
29		M 29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified contributions? If 'Yes,' complete Schedule M	conservation 30		Х
31		N, Part I 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sec 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	ctions		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, and Part V, line 1	III or IV		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a concentity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	o recommo miles		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable re organization? If 'Yes,' complete Schedule R, Part V, line 2	alatad		Х
37		od that is		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 193 Note: All Form 990 filers are required to complete Schedule O	?	Х	
Pa	ort V Statements Regarding Other IRS Filings and Tax Compliance		-	
	Check if Schedule O contains a response or note to any line in this Part V	************		
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1	Yes	No
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b	0		
	c Did the organization comply with hacking withholding rules for reportable payments to vendors and specially reportable re-		mest.	
3AA	(gambling) winnings to prize winners?			(0010
		Forn	990 (2019

Form 990 (2019) UNCOMMON GOOD

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Enter the number of employees reported on Form W-3, Transmittol of Wage and Tax Statements. Field of the calendary sere ending with or within the year covered by this return. 2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note: If the sum of lines 1 and 2a is greater from 250, you may be required to effect sees instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 a 4 and the calendary ear, did the organization flex in provide a control of the provided of the year of the provided of the year of ye				Yes	No
bit at least one is reported on line 2a, did the organization file all required idental employment tax returns? 2b Mote: If the sum of lines 1a and 2a is greater than 250, your may be required to e-06 (see instructions) 3a Did the organization have unrelated business grass income of \$1,000 or more during the year? 3a bit if the organization have unrelated business grass income of \$1,000 or more during the year? 4a At any time during the cellendary year, did the organization have an interest in, or a signature or other authority over a third interest in the organization of the organization interest in, or a signature or other authority over a bit if year and interest in the organization of the organization interest in, or a signature or other authority over a bit if year and interest in the organization of the organization interest in the organization of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization in a foreign country (such as a basic and any and a provided in the organization of the organization at any time during the tax year? 5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any cuntributions that were not tax deductible as contributions? 6a Did any toxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6b If Yes, did the organization include with every solicitation an express statement that such contributions or gits were 6b If Yes, did the organization include with every solicitation an express statement that such contributions or gits were 6b If Yes, did the organization notify the donor of the value of the goods or services provided? 70 Organizations that may receive deductible contributions under section 170(c) 8 Did the organization include with every solicitation and express statement that such contributions and services provided to the payor? 9 Did the organization services organization in excess of \$75 made partly as a contribution and partl	2				
Note: If the sum of lines I a and 2a is greater than 250, you may be required to e-file (see instructions) 3 a bit the organization have unrelated business gross income of \$1,000 or more during the year?. 3 bit I's, but it filed a form \$90.1 for the year? If the face 8, powde an explanation are Scriedar 6. 3 bit I's, but it filed a form \$90.1 for the year? If the face 8, powde an explanation are Scriedar 6. 4 a A sary time during the calendar year, did the organization have an interest in, or a signature or other authority over a 3 bit of the year? 4 bit I's, but it filed a form \$90.1 for the year? 5 bit I's, each to the name of the foreign country. 5 see instructions for filing requirements for FindEMForm 114, Report of Foreign Bank and Financial Accountry. 5 a Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax sheller transaction? 5 bit of years, in line 5 a rot bit, did the organization line form 8886-17. 5 c I's Yes, to line 5 a rot bit, did the organization line form 8886-17. 5 c I's Yes, to line 5 a rot bit, did the organization line form 8886-17. 5 c I's Yes, to line 5 a rot bit, did the organization include with every solicitation an express statement that such contributions or gifs were not tax deductible as charitable contributions. 6 bit I'ves, to did the organization include with every solicitation an express statement that such contributions or gifs were not tax deductible as charitable contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the goods on the value of the goods or services provided? 7 bit I'ves, indicate the number of Forms 8822 filed curing the y			2h	2.700	X
3 a Did the organization have unrelated business grass income of \$1,000 or more during the year?. 3 b bit Yes, his tries a form \$5.7 for this yea? if We his \$8,000 or more during the year?. 4 a at any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account of a foreign country (auch as a basis account, securities account, or other timenoid accounty?. 4 b if Yes, enter the name of the foreign country. 5 b if Yes, enter the name of the foreign country. 5 a Wes the organization and the properties of the properties of the properties. 5 a Wes the organization of the properties of the properties of the properties. 5 a Wes the organization of the organization that it was or is a party to a prohibited tax shelter transaction?. 5 b D Dd any taxable party notity the organization that it was or is a party to a prohibited tax shelter transaction?. 5 b C of a Dess 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? 6 a Dess the organization necessary and the deductible contributions are promisely organization or grits were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided the payor? 7 a bit Yes, did the organization notify the donor of the value of the goods or services provided? 7 b If Yes, did the organization notify the donor of the value of the goods or services provided? 7 b If Yes, did the organization only the donor of the value of the goods or services provided? 7 c D if the organization sell, exchange, or otherwise dosoes of lampthe personal poreptity for which it was required to file. Form 8829: 7 c D if the organization sell, exchange, or otherwise dosoes of lampthe personal property for which the service				Viinte	
bill Yes, has it flies a form 950.1 for this year? If Wor to the 2b, provide an explanation and Schedule C. 4 at All and your counting the calendary ears, dich se agranization have an interest in, or a spaniary or other sultivity over, a financial account, in a foreign country (such as a bank account, securities account, or other financial account)? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction? 5 bill of any taxable party norty the organization that it was or is a party to a prohibited tax shelter transaction? 5 c. 6 a Does the organization as a emula gross receipts that are normally greater than \$100,000, and did the organization as often a solicitismy contributions that were not tax deductible as charitable contributions? 6 a 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 a Did the organization receive a payment in excess of 1575 made partly as a contribution and partly for goods and services provided to the payor? 7 a Did the organization receive a payment in excess of 1575 made partly as a contribution and partly for goods and services provided to the payor? 7 b If Yes, indicate the number of Forms 8282 flied during the year. 7 d If Yes, indicate the number of Forms 8282 flied during the year. 7 d If Yes, indicate the number of Forms 8282 flied during the year. 9 d If the organization received a contribution of qualitied intended the payment of the payor organization received a contribution of cars, beats, airplanes, or other vehicles, did the organization file a Pay 1 funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 g If the organization received a contributio	3		3a	LIME BO	X
4 a Aray time during the calendar year, did the organization have an interest in, or a signature or other authority even, a financinal account in a foreign country (such as a bank account, securities account, or other financial accounty?). b If Yeas, 'enter the name of the foreign country'— See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter frensaction? 5 b Did any taxable party notify the organization file Form 8859-17 (a party file of the organization shelt was on the organization file Form 8859-17 (a party file of the organization shelt was entitled to the organization of the organization file form 8859-18 (a party file organization shelt any receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7 a Did the organization shelt may receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7 a b If Yes, it did the organization notify the donor of the value of the goods or services provided? 7 a Did the organization sell, exchange, or orderwise dispose of tangible personal property for which it was required to file Porm 8282? 8 a Did the organization sell, exchange, or orderwise dispose of tangible personal property for which it was required to file Porm 8282? 9 a Did the organization sell, exchange, or orderwise dispose of tangible personal property for which it was required to file Porm 8282? 10 bif the organization sell, exchange, or orderwise dispose of tangible personal property for which it was required to file Porm 8282? 11 bif the organization sell, exchange, or orderwise dispose of tangible personal property for which it was required to file or granization from the property or personal benefit c			_		
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a Initiation fees and capital contributions included on Part VIII, line 12.	Ŀ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 110 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.). 112 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 12 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. 13 c Enter the amount of reserves on hand 14 a 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? If 'Yes,' see instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.		09 W	15		EUM I
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 11b 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 11b 11a 11a 11a 11b 11a 11					
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excess parachute payment(s) during the year? If 'Yes,' see instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.			14b		
If 'Yes,' see instructions and file Form 4/20, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.		excess parachute payment(s) during the year? If 'Yes,' see instructions and file Form 4720, Schedule N	15	SHALL SHALL	X
If 'Yes,' complete Form 4720, Schedule O.	16				17
	10	If 'Yes' complete Form 4720. Schedule O	16		X
	AA	TEENDOSI 07/21/10	188	000	10015

Form 990 (2019) UNCOMMON GOOD 95-4792792 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year..... 19 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 1 Ь 19 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 Х 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? X 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? X 6 7 a 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? Χ 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... 7 h Χ Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X 8 a **b** Each committee with authority to act on behalf of the governing body? X 8 b 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..... Χ 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Yes No 10 a Did the organization have local chapters, branches, or affiliates? Χ 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13. X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Χ c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done... SEE SCHEDULE 0. 12c Χ 13 Did the organization have a written whistleblower policy? X 13 14 Did the organization have a written document retention and destruction policy?..... X 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official. X 15 a **b** Other officers or key employees of the organization... SEE SCHEDULE .0. X 15_b 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? 16 a X b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶

Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only)

X Upon request

BAA

19

20

Own website

the public during the tax year.

TEEA0106L 07/31/19

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to

available for public inspection. Indicate how you made these available. Check all that apply

SEE SCHEDULE O

State the name, address, and telephone number of the person who possesses the organization's books and records ► NANCY MINTIE 211 W. FOOTHILL BLVD CLAREMONT CA 91711 909 625-2248

Another's website

Other (explain on Schedule O)

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

- 1 a 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.

			(C)							
(A) Name and title	(B) Average hours per	Pos thar is	both dire	an o	ot che unles officer /truste			(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) NANCY MINTIE	40									
PRESIDENT	0			Х				75,972.	0.	0.
(2) MICHAEL FAY	11									
TREASURER	0	X		Х				0.	0.	0.
(3) CHRISTINE_L_HAYES	_0.5_									
DIRECTOR	0	X						0.	0.	0
(4) STEPHANIE LOVE	0.5									
DIRECTOR	0	Х						0.	0	0:
(5) ALISON ANDERSON	0.5									
CO-CHAIR	0	X		Х				0 :	0.	0.
(6) MARGARET LEVY	0.5									
DIRECTOR	0	X						0.	0 .	0.
(7) CHARLES BAYER	0.5									
DIRECTOR	0	X						0.	0.	0.
_(8)_MICHAEL_COBO	0.5									
DIRECTOR	0	X						0	0	0.
(9) VICTOR DE LA CRUZ	0.5									
DIRECTOR	0	X						0	0.	0 .
(10) MARSHA MOUNTRIE	0.5									
DIRECTOR	0	X						0.	0.	0.
(11) JO MARIE REILLY, M.D.	0.5									
DIRECTOR	0	X						0.	0.	0.
(12) RICHARD GOETZ	0.5									
DIRECTOR	0	Х						0,	0	0
(13) JANET EVANS	0.5									7
SECRETARY	0	X						0.	0 :	0
(14) NORMA GRANNIS	0.5									
DIRECTOR	0	Х						0.	0.	0.
BAA	TEEAO	ובחו	07/21	/10						Farm 000 (0010)

Part VII Section A. Officers, Directors, Tru	ustees,	Key	Em	plo	oye	es,	and	d Highest Com	pensated Empl	oyees	(conti	nued)	
	(B)			((-								
(A) Name and title	Average hours per week	Position (do not check more that box, unless person is bufficer and a director/tr					h an	(D) Reportable compensation from	(E) Reportable compensation from		(F) aled amo	ount	
	(list any hours for	individual or director	Institut	Officer	Key er	Highest c employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compe the o	of other compensation from the organization and related		
	related organiza - tions	individual trustee or director	nstitutional trustee	_	Key employee	t com	-4			org	anization	iS	
	dotted line)	ıştee	rustee		ð	Highest compensated employee							
(15) ALEJANDRA VELAZQUEZ DIRECTOR	0.5	Х						0.	0.			0.	
(16) BENJAMIN HUNSAKER CO-CHAIR	0.5			v									
(17) JIM PATRICK	0.5	X		X				0.	0.			0.	
DIRECTOR (18) CRYSTAL SILVA	0.5	X						0,	0.			0 .	
DIRECTOR	0	X						0 .	0.			0.	
(19) MIGUEL RUIZ DIRECTOR	0.5	X						0.	0.			0.	
(20) DEBORAH SIRIAS DIRECTOR	0.5	6											
(21) DANIEL WOODS	0.5	X						0,	0,.			0.	
DIRECTOR (22)	0	X						0.	0.			0.	
(23)												-	
(24)													
(25)													
1 b Subtotal		771.502					>	75,972.	0.			0.	
c Total from continuation sheets to Part VII, Section				¥¥		107 55,057	>	0.	0.			0.	
d Total (add lines 1b and 1c). 2 Total number of individuals (including but not limited		20.50	* (*)(*/.** <u>-</u>				•	75,972.	0.			0.	
 Total number of individuals (including but not limited from the organization ► 0 	to those I	istea	abov	re) v	vho	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n		
3 Did the organization list any former officer, direc	tor tructs			1			la taut			ENGV	Yes	No	
on line Ta? If Yes, complete Schedule J for suc	h individu	ıal							CONTRACTOR	. 3		X	
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	50.00	707	If 'Y	PS	com	nnle	te Schedule I for				17	
5 Did any person listed on line 1a receive or accrue	e comper	satio	ın fro	om:	anv	unre	late	d organization or	individual	4	E TATE	Х	
for services rendered to the organization? If 'Yes Section B. Independent Contractors										. 5		X	
1 Complete this table for your five highest compen compensation from the organization. Report compen	sated ind sation for	epen the ca	dent alenc	cor	ntra	etors	tha	It received more the	nan \$100,000 of				
(A) Name and business add					Chall state			(B) Description o			C) ensatio	on .	
2 Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not limi	ted to	thos	se li	isted	abo	ve) v	who received more	than				
3AA		TEEAA	1001	07.0			_						

	m 990 (2019) UNCOMMON GOOD				95-4792792	Page 9
Par	rt VIII Statement of Revenue Check if Schedule O contains a response.	onse or note to any	/ line in this Part VII	ı		
	encon a susception of contains a rospo	shad of flote to diff	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a Federated campaigns					
irai our	b Membership dues					
S, (c Fundraising events					
Gift	d Related organizations 1 d					
S II	e Government grants (contributions) 1 e					
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above 1 f	4,559,211.				
重豆	g Noncash contributions included in lines 1a-1f. 1 g					
Cor	h Total. Add lines 1a-1f.		4,559,211.	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
e e		Business Code	1,000,211.			
Program Service Revenue	2a FARMING INCOME		51,510.	51,510.		MINISTER STATE OF THE STATE OF
æ	b					
ice.	c					
Sen	d					
E	e					
ogu	f All other program service revenue					
ç	g Total. Add lines 2a-2f	31(10)(1)(55)(53)(53)(53)	51,510.			MARKET SEED WEST
	3 Investment income (including dividends, in	terest, and				
	other similar amounts)	50 SSEE	100,422.			100,422.
	4 Income from investment of tax-exempt	152.6				
	5 Royalties (i) Real					
		(ii) Personal				
	6a Gross rents 6a					
	b Less: rental expenses 6b					
	c Rental income or (loss) 6c					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets (i) Securities	(ii) Other				
	other than inventory 7a					
	b Less: cost or other basis					

છ :≌		d Related organizations	1 d		TOTAL PLANTS OF			
(n)		e Government grants (contributions)						
io s	1	f All other contributions, gifts, grants, an		0.5				
but	Ι.	similar amounts not included above g Noncash contributions included in	1 f	4,559,211.				
Contributions, Gifts and Other Similar A	'	lines 1a-1f.	1 g					
	1	h Total. Add lines 1a-1f			4,559,211.			
ne				Business Code				
Program Service Revenue	2 8	a FARMING INCOME			51,510.	51,510.		
e B	1	b 						
Š	۱ ۹	c						
Se	۱ ۹	d 						
am	9	e 						
Ş.		All other program service rever	0.000000					
Δ.	_	g Total. Add lines 2a-2f			51,510.			
	3	Investment income (including diviother similar amounts)	dends, ii	nterest, and	100 400			1.00
	4	Income from investment of tax		87 CARSON	100,422.			100,422.
	5	Royalties						
	-		Real	(ii) Personal		Ingligates and an	CASTEST STATE	naly strate ting is
	6 8	a Gross rents 6a						
	E	b Less: rental expenses 6b						
	، ا	c Rental income or (loss) 6c						
	(d Net rental income or (loss)						AND THE RESERVE AND AND ADDRESS OF THE PERSON OF THE PERSO
	7 a	a Gross amount from (i) Se	curities	(ii) Other			COLUMN TO STATE OF THE STATE OF	
		sales of assets						
	١.	other than inventory b Less: cost or other basis						
	[b Ecas. cost of other pasis					THE RESERVE OF THE PARTY OF THE	
		and sales expenses 7b						
		and sales expenses C Gain or (loss) 7b 7c						
		and sales expenses C Gain or (loss) 7b 7c						
ne	c	and sales expenses c Gain or (loss) Net gain or (loss) Gross income from fundraising events	******					
enne	c	and sales expenses C Gain or (loss) Net gain or (loss) Gross income from fundraising events (not including \$						
Revenue	c	and sales expenses C Gain or (loss) C Ga						
er Revenue	8 2	and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8:	a				
Other Revenue	8 z	and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising events (not including \$_ of contributions reported on line 1c). See Part IV, line 18	8:	a b				
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Other Revenue	8 a a b c c 10 a b	and sales expenses Gain or (loss) C Gain or (loss) A Gross income from fundraising events (not including \$	88 88 99 99 91 100 100	a b events				
Other Revenue	8 a a b c c 10 a b	and sales expenses Gain or (loss) C Gain or (loss) A Gross income from fundraising events (not including \$	88 88 99 99 91 100 100	a b covents co				
	9 a b c c	and sales expenses Gain or (loss) C C C C C C C C C C C C C C C C C C C	88 88 99 99 91 100 100	a b events				
	8 a a b c c 10 a b	and sales expenses Gain or (loss) C C C C C C C C C C C C C C C C C C C	88 88 99 99 91 100 100	a b covents co				
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	9 a b c c d	and sales expenses Gain or (loss) Call Net including \$ Call Call Call Call Call Call Call Call	8.88 sraising 6 9.9 9.1 10 10 10 10 10 10 10 10 10 10 10 10 10	a b events				
Revenue	9 a b c c d	and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 Net income or (loss) from fund Gross income from gaming activities. See Part IV, line 19 Less: direct expenses. Net income or (loss) from gam Gross sales of inventory, less returns and allowances Less: cost of goods sold Net income or (loss) from sales	8.88 sraising 6 9.99 sing active 10 10 so of investigation 10 10 so of investigation 10 so	a b events	4,711,143.	51,510.	0.	100,422.

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..... (A) (B) (C) (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Program service Management and Fundráising expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21..... Grants and other assistance to domestic individuals. See Part IV, line 22 1,404,757 1,404,757 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 75,972 64,576 6,838 4,558. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 590,778 502,161 53,170 35,447. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) èmployer contributions)...... Other employee benefits. 62,724 58,961 3,136 627. 10 Payroll taxes 53,981 50,742 2,699 540. Fees for services (nonemployees): a Management... **b** Legal **c** Accounting 8,125 8,125 d Lobbying e Professional fundraising services. See Part IV, line 17 g Other, (If line 11g amount exceeds 10% of line 25, column 22,523. (A) amount, list line 11g expenses on Schedule O.)..... 22,523 Advertising and promotion 12 Office expenses. 17,060 14,500 1,280 1,280. Information technology..... 14 Royalties Occupancy 16 17 Travel 3,301 2,179 561 561. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials..... Conferences, conventions, and meetings.... 942 622. 160. 160. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 27,725. 18,299 4,713 4,713. 23 Insurance 37,604 4,701. 30,083 2,820. Other expenses. Itemize expenses not 24 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 PROGRAM COSTS 119,364 119,364 b FARMING EXPENSE 21,276 21,276 c TELEPHONE 20,279 13,181 3,549 3,549. d BANK CHARGES 9,587 9,587 e All other expenses. 19,817 14,405 2,130. 3,282. 25 Total functional expenses. Add lines 1 through 24e 2,495,815 2,315,106. 123,172 57,537. 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)

Part X Balance Sheet

		Check if Schedule O contains a response or note to	any line	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			1,390,120.	1	2,081,368.
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net	10200000011 101 5.000000EEE0000E		4		
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	r, director, itor, or 35%		5		
	6	Loans and other receivables from other disqualified p		L			
	"	section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net					
ß	8			1		7	
Assets	9	Inventories for sale or use.		1		8	
AS:		Prepaid expenses and deferred charges	n ir	4	4,044.	9	4,977.
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		1,065,558.			
	l	Less: accumulated depreciation		221,766.	871,517.	10 c	843,792.
	11	Investments — publicly traded securities.			11		
	12	Investments - other securities. See Part IV, line 11			12		
	13	Investments - program-related. See Part IV, line 11,		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	2,366,012.	15	3,919,056.		
	16	Total assets. Add lines 1 through 15 (must equal line	33)		4,631,693.	16	6,849,193.
	17	Accounts payable and accrued expenses		45-0-760-818-9-318-9-319-4180808020	28,361.	17	30,533.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
<u>ë</u>	21	Escrow or custodial account liability. Complete Part I				21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	ficer, dire utor, or 3 rsons	ector, trustee, 5%		22	
-	23	Secured mortgages and notes payable to unrelated th				23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com				25	
	26	Total liabilities. Add lines 17 through 25			28,361.	26	30,533.
Seol		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	· •	X			
<u>ā</u>	27	Net assets without donor restrictions	E - E E E E E E E	100000000000000000000000000000000000000	2,237,320.	27	2,899,604.
۳	28	Net assets with donor restrictions	800 - 800 too.	- 1000000000000000000000000000000000000	2,366,012.	28	3,919,056.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here ¹		2,000,012.		3,313,030.
þ	29	Capital stock or trust principal, or current funds	*********			29	
ध	30	Paid-in or capital surplus, or land, building, or equipm			30		
38	31	Retained earnings, endowment, accumulated income				31	
Ž۱	32	Total net assets or fund balances			1 602 222	1	6 010 660
<u>ş</u>	33	Total liabilities and net assets/fund balances			4,603,332.	1 -	6,818,660.
		The second and balanced is recent		* 950 FOR SERVICE STREET, N. 10 TO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4,631,693.	33	6,849,193.

Pa	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI	erreren o	reiner.					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4.7	11,1	43.			
2	Total expenses (must equal Part IX, column (A), line 25).	2		95,8				
3	Devenue less systems Cubbant line Of the 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		15,3 03,3				
5	Net unrealized gains (losses) on investments.	5		,.	-			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8	_					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32)				-			
	column (B))	10	6,8	18,6	560.			
Pai	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII.							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				V 24			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.							
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?	909 • • • • • 9090)	2a	10000	Х			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe	ed on a	18/1/8	SviEv	1925			
	separate basis, consolidated basis, or both:		TO VENE	N. A.				
	Separate basis Consolidated basis Both consolidated and separate basis				DOM:			
ŀ	Were the organization's financial statements audited by an independent accountant?		2 b	Х				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate	ite						
	basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis							
			7	200				
C	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.							
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		Х			
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	it						
D 4 4	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	· · · · · · · · · · · · · · · · · · ·						
BAA	TEEA0112L 01/21/20		Form	990	(2019)			