	<u>990</u>	Return of Organization Exempt Fro Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Cod	e (except priva	me Tax	OMB No. 1545-0047 2019		
Treas	rtment of the ury nal Revenue	 Do not enter social security numbers on this form as it m Go to <u>www.irs.gov/Form990</u> for instructions and the 			Open to Public Inspection		
		 alendar year, or tax year beginning 01-01-2019 ,and ending 12-3	1-2019				
B Che	ck if applicable: dress change	C Name of organization Open Doors With Brother Andrew Inc		D Employer id 23-727534	lentification number 2		
🗆 Init	me change :ial return al return/terminated	Doing business as					
□ Am	nended return plication	Number and street (or P.O. box if mail is not delivered to street address) Room/su PO Box 27001	lite	E Telephone nu (949) 752-6			
-perio	g	City or town, state or province, country, and ZIP or foreign postal code Santa Ana, CA 92799		G Gross receipts \$ 27,435,729			
		F Name and address of principal officer: David Curry	H(a) Is this	a group return	for		
		PO Box 27001		dinates? subordinates	🗌 Yes 🗹 No		
Г Тах	-exempt status:	Santa Ana, CA 92799	includ	ed?	🗌 Yes 🗍 No		
	•	✓ 501(c)(3) □ 501(c) () ◀ (insert no.) □ 4947(a)(1) or □ 527		" attach a list. exemption nur	(see instructions)		
		w.opendoorsusa.org		r			
K Forn	n of organization:	Corporation Trust Association Other	L Year of format	tion: 1973 M	State of legal domicile: CA		
Pa		mary scribe the organization's mission or most significant activities:					
e		hen and equip the Body of Christ living under or facing restriction and pers	ecution.				
Governance							
Ë							
201		is box \blacktriangleright if the organization discontinued its operations or disposed of n of voting members of the governing body (Part VI, line 1a)	nore than 25%	of its net asset	5. 3 9		
×		of independent voting members of the governing body (Part VI, line 1a)			4 8		
es		nber of individuals employed in calendar year 2019 (Part V, line 2a)	5 55				
Activities &		nber of volunteers (estimate if necessary)			6 76		
Act		elated business revenue from Part VIII, column (C), line 12		-	7a 0		
		ated business taxable income from Form 990-T, line 39			7b 0		
	b		Prie	or Year	Current Year		
d)	8 Contribut	ions and grants (Part VIII, line 1h)		26,489,822	26,230,164		
inue	9 Program	service revenue (Part VIII, line 2g)		36,689	48,202		
Revenue	10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		48,929	200,329		
	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		32,337	45,764		
	12 Total reve	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		26,607,777	26,524,459		
	13 Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)		12,100,988	11,258,457		
		paid to or for members (Part IX, column (A), line 4)		0	0		
8		other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,152,790	6,499,761		
Exp enses		nal fundraising fees (Part IX, column (A), line 11e)		1,206,203	819,862		
a di		aising expenses (Part IX, column (D), line 25) 3,677,809		7 252 215	0 742 506		
indust.		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		7,353,215	8,743,586		
		enses. Add lines 13-17 (must equal Part IX, column (A), line 25) less expenses. Subtract line 18 from line 12		26,813,196 -205,419	27,321,666 -797,207		
ces	To revenue		Beginning	of Current Year	End of Year		
Net Assets or Fund Balances	20 Total asso	ets (Part X, line 16)		8,451,607	9,864,508		
dB		ilities (Part X, line 26)		3,155,448	5,309,441		
Pun		ts or fund balances. Subtract line 21 from line 20		5,296,159	4,555,067		
Pa		ature Block					
knowl	edge and belie	erjury, I declare that I have examined this return, including accompanying f, it is true, correct, and complete. Declaration of preparer (other than offic					
any k	nowledge.			0-10-30			
Sign		ture of officer	Dat	e			
Here	MICHA	el Wong CFO or print name and title					
	P	rint/Type preparer's name Preparer's signature [Date	ek if PTIN	95970		
Pai			self-	employed	85870		
		irm's name 🕩 Capin Crouse LLP	Firm	's EIN 🕨 36-3990	892		
	-	irm's address > 3050 Saturn Street Suite 104	Pho	ne no. (714) 577-	0988		
		Brea, CA 92821					

For Paperwork Reduction Act Notice,	, see the separate instructions.

Cat. No. 11282Y Form **990** (2019)

Form 990 (2019) Page 2 Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III . Briefly describe the organization's mission: 1 To strengthen and equip the Body of Christ living under or facing restriction and persecution because of their faith in Jesus Christ, and to encourage their involvement in world evangelism by:>Providing Bibles, literature, media, leadership training, socio-economic development, and intercessory prayer;>Preparing the Body of Christ living in threatened or unstable areas to face persecution and suffering; and>Educating and mobilizing the Body of Christ living in the free world to identify with threatened and persecuted Christians and be actively involved in assisting them. We do so because we believe that when one member suffers, all members suffer with it (I Corinthians 12:26). All doors are open and God enables His Body to go into all the world and preach the Gospel. 2 Did the organization undertake any significant program services during the year which were not listed on 🗌 Yes 🛛 🔽 No the prior Form 990 or 990-EZ? If "Yes." describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program 🗌 Yes 🔽 No services? 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 by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 8.861.647 including grants of \$ 26.500) (Revenue \$ 61.936) Public Awareness: In 2019, over \$8.8 million was contributed to public awareness and local ministry through events like the International Day of Prayer for the Persecuted Church, our World Watch List Press Conference, webinars, and our media and advocacy efforts. More than 11,000 people engaged in our advocacy efforts through petitions, letters to representatives, congressional briefings, and letters to persecuted believers. In addition, a monthly average of 50 radio, print, and television pieces featured Open Doors, including USA Today, Fox News, and CNN. 4b (Code:) (Expenses \$ 4,628,761 including grants of \$ 4,628,760) (Revenue \$ Leadership Training: Throughout the world, as persecution is on the rise, thousands of Christian leaders are finding great encouragement at training seminars and workshops offered through Open Doors. In 2019, \$4.6 million was contributed towards worldwide leadership and training programs of Open Doors International. Open Doors trained 3.8 million people through discipleship, mentoring, persecution preparedness training, trauma counseling, and more. The ministry included Bible training for Christian leaders and believers, Sunday School teachers, and children. Various seminars were also held in many countries, including Standing Strong Through the Storm (SSTS) which helps pastors and leaders learn how to stand strong in the face of suffering and persecution. 4c (Code:) (Expenses \$ 3,409,882 including grants of \$ 3,409,882) (Revenue \$ Christian Community Development: For more than 60 years Open Doors has worked in the world's most oppressive and restrictive countries, strengthening Christians to stand strong in the face of persecution and equipping them to shine Christ's light in these places. In 2019, more than \$3.4 million was contributed towards the worldwide Christian Community Development programs of Open Doors International. Open Doors International served more than 718,000 people through community development projects, such as sponsoring literacy courses, vocational/job training, prison ministry, medical/healthcare, church restoration, school support, community building aid, safe houses, food supplies, helping widows, emergency assistance and support to persecuted families in 2019. (Code:) (Expenses \$ 2,713,557 including grants of \$ 2,713,557) (Revenue \$ Bible and Literature Distribution: In 2019, over \$2.7 million was contributed towards Bible and Literature Distribution programs of Open Doors International, Open Doors International delivered more than 1.8 million pieces of literature including Bibles, children's Bibles, study Bibles, New Testaments, religious literature, training materials, Sunday school materials, and other resources to Christians in countries around the world. (Code:) (Expenses \$ 853,888 including grants of \$ 479,758) (Revenue \$ Advocacy (2019)In 2019, Open Doors USA focused its advocacy efforts on raising awareness of the many challenges to religious freedom faced by Christian communities around the world with key decision-makers in Washington D.C. This included meetings with the Vice President and facilitating the visit of a persecuted Christian from Nigeria with the President of the United States. Throughout the year, we met with U.S. State Department, USAID, and Congressional staff and principals to provide insight into addressing challenges to international religious freedom. Dr. David Curry, CEO of Open Doors USA, testified before the House Foreign Affairs Committee on major concerns for the global Christian community, and at key moments we provided information on the persecution of Christians in Northeast Syria, India, and China, to policymakers. Our advocacy efforts also included regular articles in Presence magazine, e-mail updates, and blog articles, as well as letters or Op-Ed's published by the Houston Chronicle and the Wall Street Journal. 4d Other program services (Describe in Schedule O.) (Expenses \$ 3,567,445 including grants of \$ 3,193,315) (Revenue \$

20,467,735

Total program service expenses 🕨

4e

Form **990** (2019)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D</i> ,Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	Yes	
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	Yes	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17	Yes	
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	

Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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? <i>If "Yes," complete</i> <i>Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
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 defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \ldots .	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes, " complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	
Pai	t 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			
			Yes	No

1a	Enter	the nur	nber	reported	in	Box	3	of Form	1096.	Enter	-0- if	not	applicable	•
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			-		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable $\ .$.	1a	13		
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 backup withholding rules for reportable payments to ve (gambling) winnings to prize winners?			1c	Yes

es	No	

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Form 990 (2019)

Form 990	(2019)
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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	_
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4a		No
b	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5.0 5.0		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? \ldots	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources			
2	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
_	Is the organization licensed to issue qualified health plans in more than one state?	13a		
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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
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.	16		No

Dart \/I

Pai	tt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	•		ines
Se	ection A. Governing Body and Management	• •		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervisior of officers, directors or trustees, or key employees to a management company or other person?		105	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
4 5	Did the organization make any significant changes to its governing documents since the phot point 990 was need?	5		No
		6		
6	Did the organization have members or stockholders?	0		No
	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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code)	
		- couc	.)	
		2 0000	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No No
10a				
10a b	Did the organization have local chapters, branches, or affiliates?	10a		
10a b 11a	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	10a 10b	Yes	
10a b 11a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b	Yes	
10a b 11a b 12a	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. 	10a 10b 11a	Yes	
10a b 11a b 12a b	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 	10a 10b 11a 12a	Yes	
10a b 11a b 12a b c	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in</i> 	10a 10b 11a 12a 12b	Yes Yes Yes	
10a b 11a b 12a b c 13	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>. Did the organization have a written whistleblower policy? 	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the organization have a written document retention and destruction policy? 	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14 15	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	
10a b 11a b 12a c 13 14 15 a	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? 	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a c 13 14 15 a	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i> Did the organization have a written obcument retention and destruction policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization 	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14 15 a b	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a c 13 14 15 a b 16a	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i> Did the organization have a written document retention and destruction policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation 	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a c 13 14 15 a b 16a	 Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a c 13 14 15 a b 16a b	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i> Did the organization have a written document retention and destruction policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the yea? 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 	10a 10b 11a 12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a c 13 14 15 a b 16a b	 Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the organization have a written document retention and destruction policy? Did the organization have a written bicct, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization to low 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? 	10a 10b 11a 12a 12b 12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes Yes	No

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 19

State the name, address, and telephone number of the person who possesses the organization's books and records: Randy Moore PO Box 27001 Santa Ana, CA 92799 (949) 752-6600 20

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, or 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.

(A) Name and title	(B) Average hours per week (list	Positio tha perse	n (do in one on is	(C) not e bo both	: che x, u n an	eck me nless office	ore er	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	any hours for related organizations below dotted line)	and Individual trustee or director	a Institutional Trustee	_		ustee) Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) David Curry	40.00	х		x				129,150	0	176,950
President/CEO (2) Tim Muret	40.00									
Chief Communications Officer					х			198,402	0	47,242
(3) Michael Wong	40.00			х				96,391	0	132,274
Treasurer/CFO				^				90,391	0	152,274
(4) Jeff Taylor Chief of Staff	40.00					x		153,173	0	34,868
(5) Brian Orme	40.00					x		139,778	0	37,634
Sr. Director of Content						Â		155,770		57,034
(6) Jesse Teasley Sr. Director of IT	40.00					х		137,600	0	38,042
(7) Sasha Tyan	40.00					х		132,203	0	19,242
Director FP&A						Â		152,205		15,242
(8) Jonathan Huang Creative Director	40.00 					х		134,929	0	9,420
(9) Sally Rae Secretary / Executive Assistant	40.00			х				65,148	0	38,239
(10) Colin Stewart Chairman	1.00 	х		x				0	0	0
(11) Steve Haas Vice Chairman	1.00 	х		x				0	0	0
(12) Matthew P Yates Secretary (part year)	1.00	х		x				0	0	0
(13) Nathaniel Spoelman	1.00									
Director		х						0	0	0
(14) Roger Spoelman Director	1.00 	х						0	0	0
(15) Bruce Dingman	1.00									
Director		х						0	0	0
(16) Tim Kachuriak Director	1.00	х						0	0	0
(17) Daisy Szabo	1.00	х						0	0	0
Director		~							0	Form 990 (2019)

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(A) Name and title		(B) Average hours per week (list any hours for	than o is b	one bo oth a direct	ox, ι n of	t che unles ficer	and a	son	Rep comp fro organi	(D) ortable ensation m the zation (W-	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F Estim amount comper from	ated of other isation the
		related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/10	99-MISC)	(W-7)1033-MI2(_) (organizat relat organiz	ted
	rancesca Fajinmi tor	1.00	×							0		0		0
												_		
												+		
												-		
												_		
												_		
c]	Gub-Total Fotal from continuation sheets to Part Fotal (add lines 1b and 1c) Total number of individuals (including but		 	•	bov	e) w		ceive		86,774 than \$100,	000 of			533,911
	reportable compensation from the organi												¥	
3	Did the organization list any former offic										nployee on		Yes	No
4	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the organization and related organizations gr individual	sum of reportal	ole com	pens	atio	n an	d othe	er co	ompensa	tion from tl	ne	3	Yes	No
5	Did any person listed on line 1a receive or services rendered to the organization? If '								ganizatio	on or individ	dual for	5		No
	ection B. Independent Contractors													
1	Complete this table for your five highest the organization. Report compensation for	r the calendar y									ear.	ensa		
Maste	Name and	(A) business address							F	Descrip undraising co	(B) otion of services		(C Comper	760,840
1946	2 Powder Hill PL NE p, WA 98370								ľ					700,040
Merkl	e Response								C	onation Proc	essor			164,948
Hagg	amison Court erstown, MD 21740 all GroupInc								2	019 event/nl	anning for 2020			140,000
75 Fo	urteenth St NE Suite 3050 a, GA 30309								2	erendbi	aing for 2020			1-0,000
Jennif	er Crane								C	RM impleme	ntation	\uparrow		102,160
	9 Woodland Way S WA 98030													

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 4

Form 990 (2019)
Part VIII
Statement of Revenue

Page **9**

	Check if Schedule O contai	ns a respor	ise or note to any	line in this Part VIII			U
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a Federated campaigns	1a	23,622				
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues	1b					
La l	Eundraising events						
ပ်ခို	c Fundraising events						
fts.	d Related organizations	1d					
	e Government grants (contributions)	1e					
- si is	f All other contributions, gifts, grant	s,					
	and similar amounts not included above	1f	26,206,542				
- pri	g Noncash contributions included in						
ĒŌ	lines 1a - 1f:\$	1g	432,803				
jo je	h Total. Add lines 1a-1f			26.220.164			
			Business Code	26,230,164			
			Business Code	48,202	48,202		
	2a Program Rental Income		531120	10,202			
nue							
eve	b						
8							
NC.	с						
Ser	d						
E							
Program Service Revenue	e						
ď							
	f All other program service rever	nue.					
	9 Total. Add lines 2a-2f	►	48,202				
	3 Investment income (including di		terest, and other	86,15	2		86,152
	similar amounts)		•		2		80,132
	4 Income from investment of tax-e	exempt bon					
	5 Royalties		►	•			
	(1)	Real	(ii) Personal	-			
	6a Gross rents 6a						
	b Less: rental			-			
	expenses 6b						
	c Rental income or (loss) 6c						
		curities	•••••				
		cunties	(ii) Other	-			
	7a Gross amount from sales of 7a	1,021,215	903	1			
	assets other than inventory						
	b Less: cost or						
	other basis and sales expenses 7b	906,293	1,640	b			
	c Gain or (loss) 7c	114,922	-74				
	d Net gain or (loss)		• • • •	114,17	/		114,177
e	8a Gross income from fundraising even (not including \$	of					
nue	contributions reported on line 1c).						
eve	See Part IV, line 18	8a					
Other Revenue	b Less: direct expenses	. 8b					
ler	c Net income or (loss) from fund	raising ever	nts 🕨				
	9a Gross income from gaming activit See Part IV, line 19						
		9a		-			
	b Less: direct expenses						
	c Net income or (loss) from gami	ing activitie	s 🕨				
	10a Gross sales of inventory, less						
	returns and allowances	10a	17,065				
	b Less: cost of goods sold	10b	3,331				
	c Net income or (loss) from sales	of invento	ry 🕨	13,73	4 13,734	L .	
	Miscellaneous Revenue		Business Code				
	11a	ľ					
	b						
					+	-	
	c						
	d All other revenue	L		32,03	0		32,030
	e Total. Add lines 11a-11d .	· · · ·	>	32,03	0		
	12 Total revenue. See instruction	ns		26,524,45		5 0	232,359
				20,324,43	J U1,930	/ U	232,339

Form **990** (2019)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must con	mplete all columns. A	II other organizations	s must complete colur	mn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 	3,211,702	3,211,702		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	8,046,755	8,046,755		
4 Benefits paid to or for members	1			
5 Compensation of current officers, directors, trustees, and key employees	886,553	516,953	279,247	90,353
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,069,087	2,435,830	1,185,709	447,548
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	253,993	148,495	75,067	30,431
9 Other employee benefits	928,892	486,966	346,933	94,993
10 Payroll taxes	361,236	182,010	140,492	38,734
11 Fees for services (non-employees):				
a Management				
b Legal	90,152	2,710	87,442	
c Accounting	69,236	2,077	67,159	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	819,862			819,862
f Investment management fees	56		56	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,850,816	1,569,975	195,753	85,088
12 Advertising and promotion	3,277,766	1,898,274	20,168	1,359,324
13 Office expenses	1,213,313	490,409	351,262	371,642
14 Information technology	642,296	289,795	230,572	121,929
15 Royalties	1,352	1,352		
16 Occupancy	72,495	57,360	12,700	2,435
17 Travel	731,528	580,126	98,680	52,722
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	271,553	213,873	20,290	37,390
20 Interest	357	239	118	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	224,496	157,838	43,813	22,845
23 Insurance	93,973	76,069	14,971	2,933
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Fundraising - other	83,501			83,501
b Donor/Volunteer Appreci	66,424	60,138	4,754	1,532
c Premiums	47,252	31,769	936	14,547
d Radio Announcements	7,020	7,020		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	27,321,666	20,467,735	3,176,122	3,677,809
 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ✓ if following SOP 98-2 (ASC 958-720). 	5,214,102	4,565,636	227,169	421,297
				Form 990 (2019)

Part X Balance Sheet

1 G		Check if Schedule O contains a response or not	e to any line in this Part IX	(
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		1,939,846	1	2,037,926
	2	Savings and temporary cash investments .		. 606,170	2	1,463,542
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		. 30,989	4	34,360
	5	Loans and other payables to any current or form employee, creator or founder, substantial contri or family member of any of these persons	butor, or 35% controlled e		5	
	6	Loans and other receivables from other disquali section 4958(f)(1)), and persons described in se			6	
\$	7	Notes and loans receivable, net			7	
ssets	8	Inventories for sale or use		19,147	8	12,188
SS	9	Prepaid expenses and deferred charges		715,817	9	785,915
1	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,59	0,121		
	b	Less: accumulated depreciation	10b 2,02	1,020,721	10c	1,565,112
	11	Investments—publicly traded securities .	·	3,874,867	11	3,965,465
	12	Investments-other securities. See Part IV, line	11	244,050	12	0
	13	Investments—program-related. See Part IV, line	11		13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equ	ual line 34)	8,451,607	16	9,864,508
	17	Accounts payable and accrued expenses		677,105	17	980,972
	18	Grants payable		908,000	18	2,799,435
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability. Complete P	art IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or form employee, creator or founder, substantial contri or family member of any of these persons			22	
Ë	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	•		24	
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D	ayables to related third pa	rties, 1,570,343	25	1,529,034
	26	Total liabilities. Add lines 17 through 25 .	•	3,155,448	26	5,309,441
Net Assets or Fund Balances	27	Organizations that follow FASB ASC 958, cl complete lines 27, 28, 32, and 33. Net assets without donor restrictions	neck here 🕨 🗹 and	. 5,227,616	27	4,486,529
Bal	28	Net assets with donor restrictions		. 68,543	28	68,538
und l	20	Organizations that do not follow FASB ASC	958, check here 🕨 🗌		20	08,338
L L	29	complete lines 29 through 33. Capital stock or trust principal, or current funds			29	
s o	29 30	Paid-in or capital surplus, or land, building or eq			30	
set		Retained earnings, endowment, accumulated in	•		31	
As	31	5	come, or other runus	E 206 150		4 555 067
let	32	Total net assets or fund balances		. 5,296,159	32	4,555,067
2	33	Total liabilities and net assets/fund balances .		. 8,451,607	33	9,864,508 Form 990 (2019)

Form **990** (2019)

Form	990 (2019)				Page 12
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	6,524,459
2	Total expenses (must equal Part IX, column (A), line 25)	2		2	7,321,666
3	Revenue less expenses. Subtract line 2 from line 1	3			-797,207
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\ .$	4			5,296,159
5	Net unrealized gains (losses) on investments	5			113,201
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-57,086
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			4,555,067
Par	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 dccrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed or separate basis, consolidated basis, or both:	na			
	□ Separate basis □ Consolidated basis □ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate b consolidated basis, or both:	asis,			
	Separate basis Consolidated basis Both consolidated and separate basis				
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?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	ule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	le	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	d audit	3b		

Form **990** (2019)

efil	e GR	APHIC prin	nt Sub	mission Date	e - 2020-10-30			DLN:	93493304005480
(Fo	(Form 990 or _{Co} 990EZ)			mplete if the c	narity Statu organization is a sec 4947(a)(1) nonexe ► Attach to Form	tion 501(c)(3) o mpt charitable 990 or Form 99	organization or trust. 00-EZ.	a section	OMB No. 1545-0047
Depa Treas		t of the		Go to <u>www.ir</u>	<u>s.gov/Form990</u> for ir	structions and	the latest info	rmation.	Open to Public Inspection
Nhaen	eadfRte	Ne organizati Vith Brother An						Employer identifica	ation number
	r t I organiz				t us (All organization e it is: (For lines 1 thro			ee instructions.	
1					ssociation of churches	5		A)(i).	
2		A school de	scribed in s	ection 170(b)(1)(A)(ii). (Attach Sche	edule E (Form 99	0 or 990-EZ).)		
3		A hospital o	or a coopera	tive hospital ser	vice organization desc	ribed in section	170(b)(1)(A)(ii	i).	
4		A medical r name, city,		anization operat	ed in conjunction with	a hospital descri	bed in section 1	170(b)(1)(A)(iii). En	ter the hospital's
5		170(b)(1)	A)(iv). (Cor	nplete Part II.)	it of a college or unive				bed in section
6				•	governmental unit de				
7 8		section 17	0(b)(1)(A)	(vi). (Complete	a substantial part of it Part II.) n 170(b)(1)(A)(vi) . ((-	nit or from the genera	ai public described in
9					escribed in 170(b)(1) ee instructions. Enter				ge or university or a
10		activities re income and	lated to its of unrelated b	exempt function	income (less section !	xceptions, and (2	2) no more than 3	331/3% of its support	from gross investment
11		An organiza	ation organiz	ed and operate	d exclusively to test fo	r public safety. S	ee section 509((a)(4).	
12		more public	ly supporte	d organizations	d exclusively for the bo described in section 5 ne type of supporting o	509(a)(1) or sec	tion 509(a)(2).	See section 509(a)	
а		organizatio	n(s) the pow		ated, supervised, or co appoint or elect a majo •				
b		manageme	nt of the sup						ing control or inization(s). You must
с		Type III fu	nctionally i	ntegrated. A s				d functionally integra	ted with, its supported
d		Type III no functionally	n-function integrated.	ally integrated The organization	I. A supporting organized and on generally must satis rt IV, Sections A and	zation operated in fy a distribution	n connection with	h its supported organ an attentiveness req	ization(s) that is not uirement (see
е		Check this	box if the or	ganization recei	ved a written determir upporting organizatior	nation from the IF	RS that it is a Typ	e I, Type II, Type III fu	nctionally integrated,
f	Enter			, ,					
g	(1) N			formation about	the supported organiz		nization listed	(v) Amount of	(vi) Amount of
organization organization in your governing document? monetary support other supp					other support (see instructions)				
						Yes	No		
Tota	1								
For I	Paperv	work Reduc or 990-EZ.	tion Act No	tice, see the I	nstructions for	Cat. No. 1128	5F	Schedule A (Form	990 or 990-EZ) 2019

P	art II Support Schedule for (Complete only if you cl	hecked the box o	on line 5, 7, or 8	of Part I or if the	e organization fa					
-	the organization failed t ection A. Public Support	to qualify under	the tests listed l	below, please co	omplete Part III.)					
	lendar year	(2) 2015	(b) 2016	(a) 2017	(4) 2019	(2) 2010		(f) Total		
(or	fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019		(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.").	20,769,607	20,638,142	23,466,590	26,489,822	26	5,230,164	117,594,325		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
	Total. Add lines 1 through 3	20,769,607	0,769,607 20,638,142 23,466,590 26,489,822	26,230,164		26,230,164		117,594,325		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							5,388,885		
6	Public support. Subtract line 5 from line 4.							112,205,440		
S	ection B. Total Support									
Ca	lendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019		(f) Total		
(or 7	fiscal year beginning in) Amounts from line 4.	20,769,607	20,638,142	23,466,590	26,489,822		5,230,164	117,594,325		
8	Gross income from interest,	20,700,007	20,000,212	25,100,550	20,100,022	20	12301201	117,00 1,020		
-	dividends, payments received on securities loans, rents, royalties and income from similar sources	67,550	70,137	85,762	89,755	86,152		399,356		
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	6,254		17,684	23,403	32,030		23,403 32,0		79,371
11	Total support. Add lines 7 through 10							118,073,052		
12	Gross receipts from related activities,	etc. (see instructi	ons)			12		348,110		
13	First five years. If the Form 990 is f	•						nization, check		
	this box and stop here									
	ection C. Computation of Pub		-							
	Public support percentage for 2019 (I					14		95.030 %		
	Public support percentage for 2018 S					15		93.080 %		
16a	33 1/3% support test—2019. If the									
b	and stop here. The organization qua 33 1/3% support test—2018. If the							his		
17a	box and stop here. The organizatio 10%-facts-and-circumstances tes is 10% or more, and if the organizatio in Part VI how the organization meets	t—2019. If the orgon meets the "facts	ganization did not s-and-circumstance	check a box on line es" test, check this	e 13, 16a, or 16b, s box and stop he	and line 1 re. Explai	4 n	. ► 🗆		
b	organization	st—2018. If the or zation meets the "	rganization did not facts-and-circumst	check a box on lir ances" test, check	ne 13, 16a, 16b, or < this box and stor	[.] 17a, and b here.	line	. ► 🗆		
18	supported organization	tion did not check	a box on line 13, 1	6a, 16b, 17a, or 1	7b, check this box	and see		_		
	instructions							. ► 🗆		

Part III

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support						
	ndar year	(-) 2015	(1) 2010	(-) 2017	(4) 2010	(-) 2010	(f) T-+-1
	iscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and			1	1		
-	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
2	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
4	organization's benefit and either paid						
_	to or expended on its behalf.						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
74	received from disgualified persons						
h	Amounts included on lines 2 and 3						
	received from other than disgualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year.						
С	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ction B. Total Support						
	ndar year						
(or f	iscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources.						
b	Unrelated business taxable income						
-	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975.						
_							
с	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on.						
12	Other income. Do not include gain or			1	İ		
	loss from the sale of capital assets						
	(Explain in Part VI.)						
17	Total support. (Add lines 9, 10c,			1			
13	11, and 12.).						
	First five years. If the Form 990 is fo	r the organization	s first second th	ird fourth or fifth	tax yoar as a soc	1000 501(c)(3)) organization
14	-	-			-		
	check this box and stop here						🕨 🗆
Se	ction C. Computation of Public	Support Perce	entage				
15	Public support percentage for 2019 (lir	ne 8. column (f) di	vided by line 13	column (f))		15	
16	Public support percentage from 2018 S	Schedule A, Part III	l, line 15			16	
Se	ction D. Computation of Invest	ment Income	Percentage				
17	Investment income percentage for 20	19 (line 10c. colur	nn (f) divided hy l	ine 13 column (f))	17	
	1 5						
18	Investment income percentage from 2					18	
19a	331/3% support tests-2019. If the or	rganization did no	t check the box o	n line 14, and line	15 is more than 3	3 1/3%, and li	ne 17 is not more
	han 33 1/3%, check this box and stop h	ere. i ne organiza	uon quaimes as a	publicly supporte	eu organization		
b	33 1/3% support tests—2018. If the	organization did n	ot check a box or	n line 14 or line 19	a, and line 16 is m	nore than 33	1/3% and line 18 is not
	more than 33 1/3%, check this box and	stop here. The o	rganization quali	fies as a publicly s	supported organiza	tion	
20		•	5		11 5		_
20	Private foundation. If the organization	on did not check a	i box on line 14, 1	.ya, or 19b, check			
					Schedu	le A (Form	990 or 990-EZ) 2019

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

Section A. All Supporting Organizations

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

Yes No

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019

Part IV Supporting Organizations (continued)

			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the				
	governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c			
Section B. Type Supporting Organizations					

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting</i>			
	curred out the purposes of the supported organization(s) that operated, supervised of controlled the supporting			

Section C. Type II Supporting Organizations

organization.

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

			res	NO
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
	mantaneu a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
 - a 🕥 The organization satisfied the Activities Test. Complete line 2 below.
 - **b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
 - c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)

2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
 b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer (a) and (b) below.**
 - a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
 - **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in **Part VI.** the role played by the organization in this regard.

3a

Yes

N

Yes

No

No

Schedule A (Form 990 or 990-EZ) 2019

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganiza	ations					
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.							
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8						
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1						
а	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
e	Discount claimed for blockage or other factors (explain in detail in Part VI):							
2	Acquisition indebtedness applicable to non-exempt use assets	2						
3	Subtract line 2 from line 1d	3						
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by .035	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
	Section C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1						
2	Enter 85% of line 1	2						
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
4	Enter greater of line 2 or line 3	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6						
7	Check here if the current year is the organization's first as a non-functionally-int	egrate	d Type III supporting orga	nization (see instructions)				

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019			Page 7						
Part V Type III Non-Functionally Integrated	509(a)(3) Supporting O	rganizations (continued	d)						
Section D - Distributions			Current Year						
1 Amounts paid to supported organizations to accomplisi	h exempt purposes								
	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity								
	Administrative expenses paid to accomplish exempt purposes of supported organizations								
4 Amounts paid to acquire exempt-use assets									
5 Qualified set-aside amounts (prior IRS approval require	d)								
6 Other distributions (describe in Part VI). See instruction	ons								
7 Total annual distributions. Add lines 1 through 6.									
8 Distributions to attentive supported organizations to w details in Part VI). See instructions	hich the organization is respons	sive (provide							
9 Distributable amount for 2019 from Section C, line 6									
· · · ·									
10 Line 8 amount divided by Line 9 amount		(!!)	(:::)						
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019						
1 Distributable amount for 2019 from Section C, line 6									
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.									
3 Excess distributions carryover, if any, to 2019:									
a From 2014									
b From 2015									
c From 2016									
d From 2017									
e From 2018									
g Applied to underdistributions of prior years									
h Applied to 2019 distributable amount									
i Carryover from 2014 not applied (see instructions)									
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.									
4 Distributions for 2019 from Section D, line 7:									
\$									
Applied to underdistributions of prior years									
b Applied to 2019 distributable amount									
c Remainder. Subtract lines 4a and 4b from 4.									
 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions. 									
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.									
7 Excess distributions carryover to 2020. Add lines 3j and 4c.									
8 Breakdown of line 7:									
a Excess from 2015									
b Excess from 2016									
c Excess from 2017									
d Excess from 2018									

Schedule A (Form 990 or 990-EZ) (2019)

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

Facts And Circumstances Test					
Return Reference	Explanation				

Schedule A, Part II, Line 10,Other Revenue - 2015 Amount: \$ 6,254. 2017 Amount: \$ 17,684. 2018 Amount: \$ 23,403. 2019 Amount: \$Explanation of Other Income:32,030.

Schedule A (Form 990 or 990-EZ) 2019

efile GRAPHIC pri	nt	Submission Date - 202	20-10-30		DLN	: 93493304005480
SCHEDULE C		Political Cam	paign and Lob	bying Act	ivities	OMB No. 1545-0047
(Form 990 or	For C		pt From Income Tax			2019
990-EZ)		on 527		Under Seetio	1 502(0) and	
Department of the Treasury	►Com		is described below. ►Atta			Open to Public Inspection
Internal Revenue			i <u>orm990</u> for instructions a 990, Part IV, Line 3, o			(Political
Campaign Activiti			550, Part IV, Line 5, 0	1 FOIIII 990-EZ	, Part V, life 40	Fontical
 Section 501(c)(3) Section 501(c) (6 	organ other 1	nizations: Complete Par	rts I-A and B. Do not con organizations: Complete		below. Do not c	omplete Part I-B.
			990, Part IV, Line 4, o	r Form 990-EZ	, Part VI, line 4	7 (Lobbying
 Section 501(c)(3) orga	nizations that have file	d Form 5768 (election u	nder section 50	1(h)): Complete F	Part II-A. Do not
 complete Part II-B. Section 501(c)(3)) orga	inizations that have NO	T filed Form 5768 (elect	ion under sectio	n 501(h)): Comp	lete Part II-B. Do not
complete Part II-A.						
990-EZ, Part V, lin	ie 35o	: (Proxy Tax) (see sep	990, Part IV, Line 5 (P parate instructions), th		separate instru	ctions) or Form
Name of the organiza	tion	or (6) organizations: Co	omplete Part III.		Employer identifi	cation number
Open Doors With Brother	Andrew I	Inc			23-7275342	
Part I-A Complet	te if tl	he organization is exe	mpt under section 501	(c) or is a secti		ation.
1 Provide a descrip "political campaig			d indirect political campaign a	activities in Part IV (see instructions for	definition of
2 Political campaig	n activit	ty expenditures (see instruct	tions)		. ► \$	
			e instructions)			
Part I-B Complet	te if ti	he organization is exe	mpt under section 501	(c)(3).		
			organization under section 49			
			nization managers under sec			
3 If the organization	n incurr	red a section 4955 tax, did it	t file Form 4720 for this year?			🗌 Yes 🗌 No
4a Was a correction	made?					🗌 Yes 🗌 No
b If "Yes," describe						
Part I-C Complet	te if tl	he organization is exe	mpt under section 501	(c), except sec	tion 501(c)(3).	
			anization for section 527 exe	•		
			ontributed to other organizati			
3 Total exempt fund	tion ex	penditures. Add lines 1 and	2. Enter here and on Form 11	20-POL, line 17b	Þ s	
4 Did the filing orga	anizatio	n file Form 1120-POL for th	his year?			🗌 Yes 🗌 No
organization mad political contribut	e paym ions rea	nents. For each organization ceived that were promptly a	tion number (EIN) of all sectic listed, enter the amount paic nd directly delivered to a sep nal space is needed, provide i	from the filing org	anization's funds. A nization, such as a s	so enter the amount of
(a) Name		(b) Address	(c) EIN	fil	Amount paid from ing organization's nds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1						
2						

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n -	-	-	-
Ра	(1	е	

Sch	edule C (Form 990 or 990-EZ) 2019			Page 2
P	art II-A Complete if the organization is section 501(h)).	exempt under section 501(c)(3) and file	ed Form 5768 (el	ection under
	Check b if the filing organization belongs to an expenses, and share of excess lobbyin	g expenditures).	group member's name	, address, EIN,
В	Check 🕨 🗌 if the filing organization checked box	A and "limited control" provisions apply.	•	-
	Limits on Lobbyin (The term "expenditures" mean		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opini	on (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative	e body (direct lobbying)		
с	Total lobbying expenditures (add lines 1a and 1b)			
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1c an	d 1d)		
f	Lobbying nontaxable amount. Enter the amount from columns.	n the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
		-		
g	Grassroots nontaxable amount (enter 25% of line 1f			
h				
i	Subtract line 1f from line 1c. If zero or less, enter -0-			
j	If there is an amount other than zero on either line 1 section 4911 tax for this year?			🗌 Yes 🗌 No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total	
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
c	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2019

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		((a)		(b)	
rore	ach les response on lines ta chrough th below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
с	Media advertisements?		No			
d	Mailings to members, legislators, or the public?		No			
е	Publications, or published or broadcast statements?		No			
f	Grants to other organizations for lobbying purposes?		No			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				1,986
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	Other activities?		No			
j	Total. Add lines 1c through 1i					1,986
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), oı	r sectio	<u>on</u>		
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
	Carryover from last year	2b	
с	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		
		4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	
D	vt V Supplemental Information		

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
	In 2019, Open Doors USA's engagement on legislation continued to be minimal, representing no more than 10% of one staff members total output. Efforts to this end were entirely focused on assisting policymakers as they negotiated the reauthorization of the U.S. Commission on International Religious Freedom.

efile	GRAPHIC pri	nt	Submission Date - 2020	-10-30					DLN: 93	493304005480
	EDULE D		Supplement	tal Fi	inanci	al State	emen	ts		B No. 1545-0047
Depart Treasu Interna Service	 Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. 						Ομ	2019 Open to Public Inspection		
Name Open I	e of the organization Doors With Brother	ation Andrev	/ Inc					Employei	r identificatio	on number
Part	Organiz	zatior	ns Maintaining Donor Adv	ised Fu	inds or Ot	ther Similar	Funds o			
	Complet	e if th	ne organization answered "Ye	es" on Fo	orm 990, P	art IV, line 6.				
					(a) Donor	advised funds		(b)	Funds and oth	ner accounts
		-	year							
			ributions to (during year)							
		-	nts from (during year)							
			of year		ing that the	accate hold in	daparad	ricod fundo	ara tha	
6 [organization's pr Did the organizat charitable purpos	operty tion in ses an	form all donors and donor adviso	xclusive lo onor advi r or dono	egal control sors in writi r advisor, or	?	unds can b purpose co	De used only	y for	YesNoYesNo
Part			n Easements. ne organization answered "Ye	s" on Fr	orm 990 P	art IV line 7				
1 F			tion easements held by the orga							
			nd for public use (e.g., recreation			\frown	tion of an	historically	important lan	id area
	Protection c				,				oric structure	
	Preservation							cremed mot		
2 (ugh 2d if the organization held a	gualified	conconvativ	on contribution	in the for	m of a cons	onvation	
			ay of the tax year.	quaimed	Conservatio		in the for			d of the Year
a⊺	otal number of c	onserv	vation easements				[2a		
b⊺	otal acreage res	tricted	by conservation easements					2b		
c N	lumber of conse	rvatior	n easements on a certified histor	ic structu	ire included	in (a)		2c		
S	tructure listed in	n the N	n easements included in (c) acqu ational Register n easements modified, transferm				L	2d	ation during th	20
	ax year >	atio		eu, reieus	seu, extingu	isiled, of termi	nated by t			
4	Number of states	s wher	e property subject to conservation	on easem	ent is locate	ed 🕨				
5 [Does the organiz enforcement of t	ation l he cor	nave a written policy regarding t iservation easements it holds? .	he period	lic monitorir	ng, inspection, 	handling o	of violations	s, and 🗌 Yes	🗆 No
Ŭ	•		urs devoted to monitoring, inspe		-		-			
	Amount of exper	nses in	curred in monitoring, inspecting,	, handling	g of violatior	ns, and enforci	ng conserv	ation easer	ments during	the year
			n easement reported on line 2(d 3)(ii)?...................					70(h)(4)(B)(i	i) 🗌 Yes	🗆 No
k	balance sheet, a the organization'	nd incl 's acco	w the organization reports conse ude, if applicable, the text of the outing for conservation easeme	e footnote nts.	e to the orga	anization's fina	ncial state	ements that	describes	
Part			ns Maintaining Collections ne organization answered "Ye					ner Simila	ar Assets.	
	f the organizatio	n elec	ted, as permitted under SFAS 11 , or other similar assets held for	6 (ASC 9	58), not to r	eport in its rev	enue state			
i b I	n Part XIII, the te f the organizatio historical treasur	ext of t on elec res, or	he footnote to its financial state ted, as permitted under SFAS 11 other similar assets held for pub	ments the	at describes 58), to repoi	these items. t in its revenu	e stateme	nt and bala	nce sheet wor	rks of art,
	•		ting to these items:							
			Form 990, Part VIII, line 1							
			n 990, Part X							
- f	following amount	ts requ	ived or held works of art, histori ired to be reported under SFAS	116 (ASC	958) relatin	ig to these iter	ns:		rovide the	
			orm 990, Part VIII, line 1					· · · ·		
			n 990, Part X							

Par	t III	Organizations Mainta	ining Collections	of Art, Histo	rical [·]	Treasures,	or Other Simila	r Assets (cor	tinued)
3		ng the organization's acquisition ns (check all that apply):	1, accession, and other	records, check	any of	the following	that are a significan	t use of its colle	ection	
а		Public exhibition		d		Loan or exc	hange programs			
b	\Box	Scholarly research		e		Other			-	
с		Preservation for future generation	ations							
4		vide a description of the organiz	zation's collections and	explain how the	ey furtl	ner the orgar	ization's exempt pur	pose in		
5		ing the year, did the organization to be sold to raise funds rath						🗌 Yes		o
Pai	rt IV	Escrow and Custodial Complete if the organiza line 21.		on Form 990,	Part	IV, line 9, oi	r reported an amo			-
1a		ne organization an agent, truste uded on Form 990, Part X?						🗌 Yes		o
b	lf "۱	les," explain the arrangement ir	n Part XIII and complete	the following t	able:			Amount		—
c		inning balance		•			1c			_
d	Add	litions during the year					1d			_
е		ributions during the year					1e			_
f	End	ing balance					lf			-
2a	Did	the organization include an am	ount on Form 990, Part	X, line 21, for e	scrow	or custodial	account liability?	. 🗌 Yes		- 0
b	lf "Y	es," explain the arrangement in	ו Part XIII. Check here if	the explanation	n has b	een provideo	d in Part XIII			
Ра	rt V	Endowment Funds.								
		Complete if the organiza							_	
1-	Pogir	ning of year balance	(a) Currei	nt year (b)	Prior ye	ar (c) lwo	o years back (d) Three	years back (e)	Four yea	ars back
	-	nning of year balance	· ·							
		ributions								
		nvestment earnings, gains, and	losses							
		ts or scholarships								
		r expenditures for facilities programs								
f	Admi	nistrative expenses								
g	End o	of year balance								
2 a		vide the estimated percentage of rd designated or quasi-endowm	-	balance (line 1	g, colui	mn (a)) held	as:			
a 5		manent endowment 🕨		-						
U		porarily restricted endowment								
с		percentages on lines 2a, 2b, ar	••••••	0/						
3a		there endowment funds not in t	•		are he	eld and admi	nistered for the			
54		anization by:			. ure n				Yes	No
	(i) ເ	unrelated organizations						3a(i)		
	(ii)	related organizations						3a(ii)		
b		es" on 3a(ii), are the related or	•	•				. 3b		
4	Des	cribe in Part XIII the intended us	5	s endowment fu	unds.					
Pa	rt VI									
	Dece	Complete if the organiza) Cost or other basis	(b) Cost or other			. See Form 990, Pa ccumulated depreciation		ook valu	0
	Des(cription of property (a	(investment)	w, cost of other	54315 (1			(u) b		-
1~	اعمط									
					1 0	15,387	1,333,76	0		581,627
					1,9		1,555,70	<u> </u>		551,027
		ehold improvements			E.	13,876	327,49	0		186,386
		oment				60,858	363,75			797,099
e	othe	r			1,1	55,050	303,75	~ [131,033

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

1,565,112

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	(Form 990) 2019					Page 3
Part VII	Investments Other Securities. Complete if the organization answered "Yes" on Form 990, Pa	art IV line	- 11h S	oo Form 000 Par	t Y line 12	
	(a) Description of security or category	(b) Book		(c) Method	l of valuation:	
(1) Financia	(including name of security)	value		Cost or end-of-	year market val	ue
(2) Closely-l	neld equity interests					
(3)Other						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
(1)						
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments Program Related. Complete if the organization answered 'Yes' on Form 990, Pa	art IV line	- 11c S	Soo Form 000 Par	+ V line 13	
	(a) Description of investment	arc iv, iiiie	e 110. S	(b) Book value	(c) Method	of valuation:
						f-year market lue
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total (Colum	n (b) must equal Form 990, Part X, col.(B) line 13.)					
Part IX	Other Assets.					
	Complete if the organization answered 'Yes' on Form 990, Pa (a) Description	rt IV, line	11d. S	ee Form 990, Part X		ook value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
	mn (b) must equal Form 990, Part X, col.(B) line 15.)				•	
Part X	Other Liabilities.					
1.	Complete if the organization answered 'Yes' on Form 990, Pa (a) Description of liability	rt IV, line	11e or	11t.See Form 99	0, Part X, line (b) Bool	
(1) Federal	income taxes					
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 25.)			•		1,529,034
	or uncertain tax positions. In Part XIII, provide the text of the footnote 's liability for uncertain tax positions under FIN 48 (ASC 740). Check h					
<u> </u>						orm 990) 2019

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

Pa	t XI Reconciliation of Revenue per Audited Financial Statem Return.	ents	With Revenue per		
	Complete if the organization answered 'Yes' on Form 990, Part	IV, lin	e 12a.		
1	Total revenue, gains, and other support per audited financial statements $\ .$.	•		1	26,585,555
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	113,201		
b	Donated services and use of facilities	2b	1,650		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-57,086		
е	Add lines 2a through 2d	•		2e	57,765
3	Subtract line 2e from line 1			3	26,527,790
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII.)	4b	-3,331		
с	Add lines 4a and 4b			4c	-3,331
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	26,524,459
Par	t XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered 'Yes' on Form 990, Part			Retu	r n.
1	Total expenses and losses per audited financial statements			1	27.326.647
2	Amounts included on line 1 but not on Form 990. Part IX. line 25:	• •		_	27,520,017
- a	Donated services and use of facilities	2a	1.650		
b	Prior year adjustments	2a 2b	1,050	-	
c	Other losses	20 20		-	
d	Other (Describe in Part XIII.)	2d	3.331	-	
e	Add lines 2a through 2d	24	5,551	2e	4.981
3	Subtract line 2e from line 1	•		3	27,321,666
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	• •			27,521,000
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1		
a	•	4a 4b		-	
b	Other (Describe in Part XIII.)			1.	0
с г				4c	ç
5 Po	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	• •		5	27,321,666
Pa	Supplemental information				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
Part XI, Line 2d - Other Adjustments:	Change in value of split interest agreements -57,086.
Part XI, Line 4b - Other Adjustments:	Cost of goods sold reported on Part VIII, Line 10b -3,331.
Part XII, Line 2d - Other Adjustments:	Cost of goods sold reported on Part VIII, Line 10b 3,331.

efile GRAPHIC print	Submission Date -	2020-10-30		DLN:	93493304005480
SCHEDULE F	Statement o	of Activit	ies Outside t	he United	OMB No. 1545-0047
(Form 990)	Complete if the organi	zation answer St ► Attach	to Form 990, Part IV, I to Form 990.	line 14b, 15, or 16.	2019
Department of the Treasury	P 00 10 mm.ns.g				Open to Public Inspection
NIନିହେମ୍ନିନିହେମ୍ନିକରାzation ବିଜ୍ୟାପ୍ତoors With Brother Andre				Employer iden	tification number
open-boors with Brotner Andre	ewinc			23-7275342	
	mation on Activitie Part IV, line 14b.	es Outside the	e United States. Com	plete if the organizat	ion answered "Yes"
1 For grantmakers. Doe	es the organization mai	ntain records to	substantiate the amount	of its grants and	
	5 ,	0	tance, and the selection of	criteria used	
to award the grants or a	ssistance?				🗹 Yes 🗌 No
2 For grantmakers. Des the United States.	scribe in Part V the orga	anization's proce	dures for monitoring the	use of its grants and othe	er assistance outside
3 Activites per Region. (The	e following Part I, line 3	table can be dup	olicated if additional space	e is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) North America	0	0	Grants to Recipients Located in Region		25,237
(2) South America	0	0	Grants to Recipients		25,407
(3) East Asia and the Pacific	0	0	Located in Region Grants to Recipients Located in Region		1,902,940
(4) South Asia	0	0	Grants to Recipients		838,658
(5) Sub-Saharan Africa	0	0	Located in Region Grants to Recipients		1,058,818
(6) Middle East and North Afri	ica 0	0	Located in Region Grants to Recipients		3,408,137
(7) Russia & Neighboring Stat	tes 0	0	Located in Region Grants to Recipients		787,559
			Located in Region		
(8) Middle East & North Africa			Program Services	Travel	42,410
(9) East Asia and the Pacific	0		Program Services	Travel	39,434
(Russia & Neighboring Stat 10)			Program Services	Travel	6,914
(South Asia 11)	0		Program Services	Travel	36,882
(South America 12)	0		Program Services	Travel	2,003
(Sub-Saharan Africa 13)	0	0	Program Services	Travel	2,953
(North America 14)	0	0	Program service	Travel	1,076
(15)					
(16)					
(17)					
3a Sub-total	C	C			8,089,166
b Total from continuation sh Part I	neets to				
c Totals (add lines 3a and 3	(b) 0	0			89,262 8,178,428
For Paperwork Poduction Act No		-		No 50082W Schody	0,170,420

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

Cat. No. 50082W

Schedule F (Form 990))19 .

10) 11) (12)

13)

Schedule F (Form 990) 2019 Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part Part II IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (a) Amount (h) Description (i) Method of organization section cash grant cash of noncash of noncash valuation grant (book, FMV, and EIN (if disbursement assistance assistance applicable) appraisal, other) (1) North America Field Proiects 25.237 Wire Transfer (2) Field Projects 25,407 Wire Transfer South America (3) Field Projects 1,902,940 Wire Transfer East Asia and the Pacific (4) Field Proiects 838,658 Wire Transfer South Asia (5) Field Projects 1,058,818 Wire Transfer Sub-Saharan Africa (6) Middle East and North Field Projects 3,408,137 Wire Transfer Africa (7) Russia & Neighboring Field Projects 787.559 Wire Transfer States (8) (9)

14) (15) 16) 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2019

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

Schedule F (Form 990) 2019

Page **3**

Schedule F (Form 990) 2019

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

Schedule F (Form 990) 2019

Part V Supplemental Information

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

ReturnReference	Explanation
Part I, Line 2:	Nearly all of Open Doors USA's (ODUSA) grants are to Open Doors International (ODI). Therefore most information is in ODI's records. However, ODUSA does use ODI's Granting Opportunities (GO) System to allocate Grants according to Donor Restrictions toward specific ODI Program categories and specific field projects. ODI provides periodic reporting to ODUSA showing how grants funds were spent. ODI maintains receipts and invoices as part of their records. ODI holds the Temporary Restriction on their books and reports are available for review by ODUSA at any time. ODI follows a very careful/intentional process. Each year the field directors are asked to submit their requests to ODI. ODI leadership reviews and approves them based on what is available from the development base grant budgets and prioritizes the requests in regard to the greatest needs. The grantee's eligibility is determined by the main program areas of Bible & Literature distribution, Training, Advocacy, and Socio-Economic Development. These areas are at the core of our ministry.
Part I, line 3:	Books and records are kept according to Generally Accepted Accounting Principles. The accrual method of accounting is used.
Part III Accounting Method:	
Part II, Lines 2 and 3	The grant amounts reported were granted by ODUSA to one organization to be used by the grantee organization's projects in the regions listed.
-	

Schedule F (Form 990) 2019

e	file GRAPHIC print	Submission Date -	2020-10-30					DL	N: 93493304005480
SCHEDULE G (Form 990 or 990- EZ) Department of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Department of the Treasury Department of the Sector www.irs.gov/Form 990 or instructions and the latest information.								5	OMB No. 1545-0047
· · ·	ernai Revenue Service	Go to www	v.irs.gov/Form990	for i	nstruct	ions and the latest in	formation.	Emplover ider	ntification number
	en Doors With Brother Andr	rew Inc						23-7275342	
F	art I Fundraising A	ctivities. Complete i	f the organiza	tion	n ansv	vered "Yes" on F	orm 990,	Part IV, line 17	7.
	Form 990-EZ file	ers are not required t	o complete th	is p	art.				
1	Indicate whether the org	anization raised funds t	hrough any of th	ne fo	ollowin	g activities. Check	all that ap	oply.	
а	Mail solicitations			e	è 🗸	Solicitation of nor	n-governm	ent grants	
b	Internet and email so	licitations		f	F 🗌	Solicitation of gov	vernment g	grants	
с	Phone solicitations			g	y 🔽	Special fundraisir	ng events		
d	In-person solicitations	S							
2a t	or key employees listed i	in Form 990, Part VII) or st paid individuals or en	entity in connect tities (fundraise	tior	n with	professional fundra	aising serv	ices? 🛛 🗹 Ye	es 🗆 No is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	ē		Gross receipts om activity	(or re fundrai	ount paid to etained by) ser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1	Masterworks 19462 Powder Hill Pl NE Poulsbo, WA 98370	Consulting/Direct Mail	Yes No			10,229,975		760,821	9,469,154
2	Westfall Group Inc 75 Fourteenth St NE Ste 3050	Consulting for major donor event in 2019/20	No			979,154		27,549	951,605
3	Atlanta, GA 30309	Telemarketing/Direct		+					
-	Infocision 325 Springside Drive	Mail	No			71,056		31,492	39,564
4	Akron, OH 44333			_					
4									
5									
6				╀					
7									
8				╀					
9				+					
10									
Tot	al	• • • • • • • • • • •	►	Ţ		11,280,185		819,862	10,460,323

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

age **2**

	dule G (Form 990 or 990-EZ) 2019 rt II Fundraising Events. Comple	to if the organization	answered "Vee" on Ferr	m 000 Dart IV line 19	Page
Pal	than \$15,000 of fundraising events.	vent contributions and	answered fes on Form	990-EZ. lines 1 and 6	b. List events with
	gross receipts greater than \$5				
		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
Neveline					
	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
	4 Cash prizes				
2	5 Noncash prizes				
2	6 Rent/facility costs				
í	7 Food and beverages				
	8 Entertainment				
ŝ	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 th	hrough 9 in column (d)		🕨	
	11 Net income summary. Subtract line 10	from line 3, column (d)		🕨	
Par	t III Gaming. Complete if the orga on Form 990-EZ, line 6a.	anization answered "Ye	es" on Form 990, Part IV	/, line 19, or reported r	more than \$15,000
VEVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add co (a) through col.(c))
È	1 Gross revenue				
cocliadon	2 Cash prizes				
í	3 Noncash prizes				
	4 Rent/facility costs				
2	5 Other direct expenses				
		☐ Yes%	□ Yes%	☐ Yes%_	
	6 Volunteer labor	🗌 No	🗌 No	🗌 No	
	7 Direct expense summary. Add lines 2 th	nrough 5 in column (d)			
	8 Net gaming income summary. Subtract	line 7 from line 1, colum	n (d)	►	
)	Enter the state(s) in which the organization	on conducts gaming activ	/ities:		
а	Is the organization licensed to conduct ga				Yes No
b	If "No." explain:				

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 🗌 Yes 🗌 No If "Yes," explain: _____ b _____ _____ _____ _____

Sche	dule G (Form 990 or 990-EZ) 2019							Page 3
11	Does the organization conduct gaming	activities with nonmemb	ers?			🗌 Yes		
12	Is the organization a grantor, beneficia formed to administer charitable gamin		a member of a partnership or other ent	ity 		□ Yes	_	
13	Indicate the percentage of gaming acti	vity conducted in:						
а	The organization's facility			. :	13a			%
b	An outside facility			. :	13b			%
14	Enter the name and address of the per	son who prepares the org	anization's gaming/special events book	s and reco	rds:			
	Name -							
	Address 🕨 👘							
15a	5		nom the organization receives gaming			🗌 Yes		
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by			and the				
c	If "Yes," enter name and address of the	e third party:						
	Name 🕨 🚽							
	Address 🕨							
16	Gaming manager information:							
	Gaming manager compensation $ ightarrow$ \$							
	Description of services provided							
	Director/officer	Employee	Independent contractor	ır				
17 a b	retain the state gaming license? .		distributions from the gaming proceeds		·	□ Yes	🗆 No	
	in the organization's own exempt activ	• •						
Pai			ations required by Part I, line 2b, co ble. Also provide any additional inf					,
	Return Reference		Explanation					
Sche	dule G, Part I, Line 2b, Column (v)	The fees paid to fundrais do not include \$1,031,73 fundraisers.	ers on Schedule G, Part I, column (v) ar 84 of printing, postage, and other direct	d on Form expenses	990, F reimbu	Page 10, P ursed to p	art IX, lir rofessior	ne 11e nal

Schedule G (Form 990 or 990-EZ) 2019

efile GRAPHIC print	Submission Date	- 2020-10-30					DL	N: 93493304005480
Note: To capture the fu	Ill content of this d	locument, please se	elect landscape mod	le (11" x 8.5") wh	en printing.			
Schedule I (Form 990)			her Assistan nd Individual		-			DMB No. 1545-0047
Department of the Treasury Internal Revenue Service		omplete if the organiz	ation answered "Yes," ▶ Attach to Form ww.irs.gov/Form990 for	on Form 990, Part I\ 1 990.	/, line 21 or 22.			Open to Public Inspection
Name of the organization Open Doors With Brother And						Emplo	oyer identific	ation number
Open Doors with Brother And	new inc					23-72	275342	
Part I General Info	rmation on Grants	and Assistance						
the selection criteria us	sed to award the grants	or assistance?			for the grants or assistant	ce, and		🗹 Yes 🗌 No
-	5 1	5	e of grant funds in the Un		· · · · · · · · · · · · · · · · · · ·		D (1) (1)	01.6
		can be duplicated if addi		ents. Complete if the	organization answered "Ye	s" on Form 990,	Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descrij noncash as		(h) Purpose of grant or assistance
(1) Open Doors Internationa PO Box 27001 Santa Ana, CA 92799	al 33-0523832	501(c)(3)	3,185,202					Grants for various Open Doors projects.
(2) Christian Motorcyclists Association PO Box 9 Hatfield, AR 71945	75-1645187	501(c)(3)	26,500					General purpose grant
2 Enter total number of s	section 501(c)(3) and go	overnment organizations	listed in the line 1 table .				•	2
3 Enter total number of c	other organizations liste	d in the line 1 table					. ►	0
For Paperwork Reduction Act N	Notice, see the Instructio	ons for Form 990.		Cat. No. 5005	5P		Sch	hedule I (Form 990) 2019

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	e	(b) Number of recipients	of	(c) Amour cash gra		(d) Amour noncash assi		(e) Method of valuation FMV, appraisal, oth		(f) Description of noncash assistance
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
Part IV Supplemental II	nformati	on. Provide the ir	nformation	required in	Part I, liı	ne 2; Part III, c	olumn	(b); and any other ad	ditional	information.
Return Reference	Explanati	on								
Part I, Line 2: Nearly all of Open Doors USA's (ODUSA) grants are to Open Doors International (ODI). Therefore most information is in ODI's records. However, ODUSA does us Granting Opportunities (GO) System to allocate Grants according to Donor Restrictions toward specific ODI Programs categories and specific field projects. ODI periodic reporting to ODUSA showing how grants funds were spent. ODI maintains receipts and invoices as part of their records. ODI holds the Temporary Restrictions toward specific/lintentional process. Each year the field directors are asked to their requests to ODI. ODI leadership reviews and approves them based on what is available from the development base grant budgets and prioritizes the requiregard to the greatest needs. The grantee's eligibility is determined by the main program areas of Bible & Literature distribution, Training, Advocacy, and Socio-Development. These areas are at the core of our ministry.						pories and specific field projects. ODI provides cords. ODI holds the Temporary Restriction on a year the field directors are asked to submit rant budgets and prioritizes the requests in				

efil	e GRAPHIC pr	int	Submission Date - 2020	-10-30		DLN: 93	4933	0400	5480	
	edule J		Compe	nsati	on Information	O	MB No.	. 1545-	0047	
(Form 990)										
					ated Employees wered "Yes" on Form 990, Part IV, line	e 23.	2C)1	9	
Dona	rtment of the		► Go to www.irs.gov/For		to Form 990. instructions and the latest information			to Pu		
Treas	sury		<u></u>					pectio		
Interi Servi	nal Revenue ce									
	ne of the organiz n Doors With Brothe		v Inc		Em	ployer identificatio	on num	nber		
·					23-	7275342				
Pa	rt I Questi	ons R	egarding Compensation							
1a					the following to or for a person listed on relevant information regarding these item			Yes	No	
				_						
	 ↓ First-class ✓ Travel for 				Housing allowance or residence for pers Payments for business use of personal re					
	0		n and gross-up payments		Health or social club dues or initiation fe					
			ending account	\Box	Personal services (e.g., maid, chauffeur,					
				_	· · · · · · · · · · · · · · · · · · ·	,				
b					ollow a written policy regarding payment plete Part III to explain .		1b	Vac		
2	•		•		or allowing expenses incurred by all		2	Yes Yes		
					r, regarding the items checked on Line 1a	?				
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the									
					ot check any boxes for methods CEO/Executive Director, but explain in Par	rt III.				
	-	-								
	Compensa				Written employment contract					
			npensation consultant er organizations		Compensation survey or study Approval by the board or compensation	committee				
		or our	a organizations		Approval by the board of compensation	committee				
4	During the year, related organiza		ny person listed on Form 990, Pa	rt VII, Seci	tion A, line 1a, with respect to the filing or	rganization or a				
а							4a		No	
b	Participate in, or	r receiv	e payment from, a supplementa	al nonqual	ified retirement plan?		4b		No	
С	Participate in, or receive payment from, an equity-based compensation arrangement?			4c		No				
	I les to ally of	1 111105 -	+a-c, list the persons and provid	e the appi						
	Only 501(c)(3)	, 501(c)(4), and 501(c)(29) organiz	zations m	ust complete lines 5-9.					
5			orm 990, Part VII, Section A, line ant on the revenues of:	1a, did th	e organization pay or accrue any					
а	-						5a		No	
b			on?				5b		No	
6			orm 990, Part VII, Section A, line ent on the net earnings of:	1a, did th	e organization pay or accrue any					
а	-						6a		No	
b	, ,		on?	• •			6b		No	
7				1a did th	e organization provide any nonfixed					
,							7		No	
8	subject to the in	itial co	ntract exception described in Re	egulations	ed pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," describ		8		No	
9	lf "Yes" on line 8 53.4958-6(c)? .	, did th	ne organization also follow the re	ebuttable 	presumption procedure described in Regu	llations section	9			
For F	Paperwork Redu	ction	Act Notice, see the Instruction	ons for Fo	orm 990. Cat. No. 5005	3T Schedule	l (For	m 990) 2019	

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

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

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

(A) Name and Title		(B) Breakd	down of W-2 and/or compensation	r 1099-MISC	(C) Retirement and other	(D) Nontaxable benefits	e (E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1David Curry President/CEO	(i)	99,740	25,000	4,410	14,100	163,645	306,895	0
	(ii)	0	0	0	0	0	0	0
2Tim Muret Chief Communications Officer	(i)	187,500	10,000	902	15,000	33,037	246,439	0
	(ii)	0	0	0	0	0	0	0
3Michael Wong Treasurer/CFO	(i)	87,825	8,000	566	33,500	99,569	229,460	0
	(ii)	0	0	0	0	0	0	0
4Jeff Taylor Chief of Staff	(i)	150,000	1,000	2,173	6,750	28,820	188,743	0
	(ii)	0	0	0	0	0	0	0
5Brian Orme Sr. Director of Content	(i)	137,025	2,000	753	9,872	28,529	178,179	0
	(ii)	0	0	0	0	0	0	0
6jesse Teasley Sr. Director of IT	(i)	129,000	8,000	600	7,740	31,127	176,467	0
	(ii)	0	0	0	0	0	0	0
7 Sasha Tyan Director FP&A	(i)	129,625	2,000	578	5,238	14,761	152,202	0
	(ii)	0	0	0	0	0	0	0
						1	,	
	+'			+	+	·'	t'	t'
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			`			'	<u> </u>	L
4							Schedule J (F	Form 990) 2019

Schedule J (Form 990) 2019





Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
	Travel for companions - As permitted by the Board, and included as taxable compensation, the CEO may take family members on a trip to the field once per year to gain a better understanding of the work that Open Doors is involved in. Housing allowance - Pursuant to Internal Revenue Code Section 107, ministerial housing allowances are provided for qualifying ministerial employees. This is not included in taxable compensation. The CEO and CFO met the qualifications for and received a ministerial housing allowance are provided for qualifying ministerial employees. This is not included in taxable compensation. The CEO and CFO met the qualifications for and received a ministerial housing allowance during the tax year.



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(Foi	rm 990)			ION		Jonth	butions		ľ	20	1	0
►Complete if the o			organizatio	organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.					20		9	
		► Atta	ach to Form	990.								
Dama	where each of the	▶Go t	o <u>www.irs.</u>	gov/Form99	ofor the lates	t informatio	on.			Open t	o Pub	lic
Treas	rtment of the surv										ection	
Inter	nal Revenue								•			
Servi		tion						mplo	voridonti	fication nu	mhor	
Open	Name of the organization Employer identific Open Doors With Brother Andrew Inc									incation nu	nber	
23-7275342												
Part I Types of Property												
				(a)	(b)		(c)			(d)		
				applicable	Number of cont items cont		Noncash contribution amounts reported on			d of determ ontribution		its
							Form 990, Part VIII, line 1g					-
	Art—Works of art											
	Art—Historical tre							<u> </u>				
	Art—Fractional in		s					<u> </u>				
4	Books and public Clothing and hou		•••					\vdash				
3	goods											
6	Cars and other ve							L				
	Boats and planes											
	Intellectual prope	-										
9	Securities—Public			X		38	432,803	FMV				
	Securities—Close Securities—Partn											
11	or trust interests											
12	Securities—Misce	ellaneo	us									
13	Qualified conserv											
	contribution—Historic structures											
14	Qualified conserv		•••									
	contribution-Ot											
15	Real estate—Res											
16 17	Real estate—Con											
	Real estate—Oth Collectibles .											
	Food inventory											
20	Drugs and medic											
21	Taxidermy											
	Historical artifact											
	Scientific specim											
	Archeological art							<u> </u>				
25 26	Other ► (_				
26 27	Other ► (
27	Other ► (_)									
29	Number of Forms			the organizati	ion durina the ta	ax year for co	ontributions	1				
	for which the org							29				0
							L				Yes	No
30a							ported in Part I, lines 1 through					
	for the entire ho			he date of the		ion, and whi	ch isn't required to be used	ior ex	empt purp			
		51								30a		No
b	If "Yes," describe	e the a	rrangement i	in Part II.								
31	Does the organiz	zation	have a gift a	cceptance po	licy that require	s the review	of any nonstandard contribu	utions	;?	31	Yes	
32a	Does the organi	zation	hire or use th	nird parties or	related organiz	ations to sol	icit, process, or sell noncash					
	contributions?	• •			· · · · ·			•	• •	32a		No
b	If "Yes," describe	e in Par	rt II.									
33	•		n't report an a	amount in col	umn (c) for a ty	pe of proper	ty for which column (a) is ch	ecke	d,			
	describe in Part	II.										

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

Schedule M (Form 990) (2019)



	ition. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization mn (b), the number of contributions, the number of items received, or a combination of both. Also y additional information.							
Return Reference	Explanation							
	The number of contributions represent the number of contributions received, not the number of items donated.							



efile GRAPHIC print Submission Date - 2020-10-30 DLN: 93493304005480								
SCHEDUL (Form 990 990-EZ)	or	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.						
Department of t		► Go to <u>www.irs.gov/Form990</u> for the latest information.	Employer identifi	Inspection				
Vสุการับ the oro ประการอุปหรือเหตุ Service	Rother An	idrew Inc	23-7275342	Cation number				
Return Reference		Explanation	237213342					
Form 990, Part VI, Section A, line 2	Roger Spoelman and Nathaniel Spoelman have a family relationship.							
Form 990, Part VI, Section B, line 11b	Form 990 was prepared by an independent CPA and a copy of the 990 is given to the Finance the Board for detail review. Once approved by the Finance Committee, a copy is given to the Board before the 990 is submitted to the IRS.							
Form 990, Part VI, Section B, line 12c	disclos disclos Board perso discus vote. meeti staten compa	ally staff, board members, and officers are presented with the conflic use any interests or relations that could conflict with the interests of the soure. The full board reviews and approves all conflicts of interest and d Chair and CEO is notified if an officer, director, or key employee dis on in a position to affect a decision in which he/she may have a conflic soion and voting on the decision by absenting themselves from the ro The specifics of the related party transaction and votes are then refl ings. Any material related party transactions are disclosed in the foot ments of Open Doors. Comparison bids are obtained for these transac- arisons and makes a determination based on the benefit versus risk d approves the amount of the transaction, and this is documented in the	he organization d related party t scloses a conflict ct of interest mu bom during such ected in the min thotes of the aud ctions and the b to the ministry.	via a signed transactions. The t of interest. The list abstain from discussion and lutes of board dited financial oard reviews the				
Form 990, Part VI, Section B, line 15	Chair recom ("CEO Establ proce board chang compo Comp maint other Chairr reaso	L5a: Determination of executive compensation is at the sole discretion and CEO Compensation Sub-Committee ("Committee") of the board of mendations to the Board relating to: 1) Evaluating the performance ") 2) Reviewing compensation benchmarks for the CEO and establish lishing the overall compensation of the CEO; and 4) Evaluating the co dures of the overall ministry. The full board of directors will have the d is responsible to approve the organizational structure, which may re- ges in salary structures and ranges. Likewise, the board is responsible ensation adjustments regardless of performance. The board will conce bensation Policy and Procedure. Records supporting compensation de tained by the organization's Human Resources department. Line 15b: officers, comparability surveys and performance reviews are provide man of the Board of the review and process. Compensation recommen- mableness. Records supporting compensation decisions for all staff m haintained by the organization's Human Resources department.	of directors shal of the Chief Exe ing compensation pla final approval a esult in changes to approve or duct a periodic r cisions for office To determine co ed to the CEO. T endations are re	I make ecutive Officer on ranges 3) ns, policies and authority. The in job titles and withhold annual eview of the ers are ompensation for The CEO briefs the eviewed by HR for				
Form 990, The f Part VI, Section C, line 19		he financial statements, governing documents, and conflict of interest policy are available upon request.						
Form 990, Part VII, Section A, Line 1a	VII, the individual's W-2, box 1 or 5 (whichever amount is greater) per the IRS instructions. In th minister's compensation when box 5 of the W-2 is not applicable, box 1 compensation is use		the case of sed. Employee W-2. For reporting					
Form 990, Part XI, line 9:	0, Change in value - split interest agreements -57,086.							
Form 990, Part XII, Line 2c:	Part XII, statements and selection of an independent accountant. This process has not changed since the prior year							
or Paperwork	Reductio	on Act Notice, see the Instructions for Form 990 or Cat. No. 51056K	Schedule () (Form 990 or 990-FZ)				