EXTENSION ATTACHED

(Rev. January 2020)

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

2019

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public

A	For	the 2019 calen	dar year, or tax year beginning 7/01 , 2019, and ending			1.00	mspection
В	Chec	k if applicable:	C , 2015, and endin				2020
	-	Address change	Getting Out and Staying Out, Inc.				fication number
		Name change	2283 Third Avenue			1711.	
	\vdash		New York, NY 10035		E Telepho		
	H				(21:	2) 8:	31-5020
	\vdash	Final return/terminated		- 6			
	\vdash	Amended return			G Gross re	eceipts :	4,409,665.
		Application pending	F Name and address of principal officer: Reginald Andre	H(a) Is this a	group retur	n for sub	ordinates? Yes X No
_			Dame As C ADOVE	H(b) Are all s	ubordinates	included	? Yes No
╧	Tax	k-exempt status:	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	ii ivo, a	attach a list.	(see ins	tructions)
J	W	ebsite: ► ww	w.gosonyc.org	H(c) Group ex	xemption nu	mher >	
K		m of organization:	X Corporation Trust Association Other ► L Year of formati				egal domicile: NY
P	art I	Summar	V		_		
	1	Briefly describ	be the organization's mission or most significant activities: GOSO parting	nere wi	th no	mlo	imposted by
a)		arrest a	ing incorderation on a lourney of education Am	miormar	at and	Omo	tional
2		wellbein	g and collaborates with NYC communities to sup	nort a	Cultu	eiiio	t CIONAL
Ë		HOHATOTE	nce.				
ð	2	Check this box	x if the organization discontinued its operations or disposed of mo	re than 25	% of its r	et acc	
g	3	Number of vol	ting members of the doverning pody (Part VI, line 1a)		1	3	23
S	4	indiliber of life	rependent voting members of the governing body (Part VI, line 1b)			4	23
ij	6	rotai number	of individuals employed in calendar year 2019 (Part V. line 2a)			5	67
Activities & Governance	7.	Total upralata	of volunteers (estimate if necessary).			6	300
⋖		Not uprolated	d business revenue from Part VIII, column (C), line 12			7a	0.
_	-	Net unrelated	business taxable income from Form 990-T, line 39		erene e	7b	0.
	8	Contributions	and monte (Dest VIII II . 11)		or Year		Current Year
Pe	9	Program consi	and grants (Part VIII, line 1h).	2,	276,0	75.	4,330,322.
Revenue	10	Investment in	ce revenue (Part VIII, line 2g)		25,0	00.	55,000.
ě	11	Other revenue	come (Part VIII, column (A), lines 3, 4, and 7d)	8			
	12	Total revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).	-			
-	13	Grants and sin	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		301,0		4,385,322.
	14	Reposits poid t	nilar amounts paid (Part IX, column (A), lines 1-3).		209,5	21.	405,664.
		Selector attack	o or for members (Part IX, column (A), line 4)				
S	15	Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10)	1,	170,0	L6.	2,789,149.
SE	16a	Professional fu	undraising fees (Part IX, column (A), line 11e)		45,5		12,960.
Expenses	b	Total fundraisii	ng expenses (Part IX, column (D), line 25) ►502, 635.	Della Visita		(000 lb	12,500.
۳	17	Other expense	s (Part IX, column (A), lines 11a-11d, 11f-24e)		020 01		1 10 5 0 7
	18	Total expenses	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		839,01		1,406,258.
	19	Revenue less e	expenses. Subtract line 18 from line 12.	<u></u>	264,12		4,614,031.
p 8			COULDE IN TO HOM HIC 12 PROPERTY OF THE PROPER		36,95		-228,709.
a de	20	Total assets (P	art X, line 16)	Beginning (End of Year
Aee	21	Total liabilities	(Part X, line 26)		065,29		2,522,320.
Fund B					249,39	2.	935,125.
	rt II	Signature	und balances. Subtract line 21 from line 20	1,	815,90	4.	1,587,195.
omp	lete. De	claration of prepare	are that I have examined this return, including accompanying schedules and statements, and to the r (other than officer) is based on all information of which preparer has any knowledge.	e best of my k	nowledge ar	nd belief,	it is true, correct, and
_			A LUX ATTE		27 13		
Sig	n	Signature	of officer V		4 1	-71	2021
ler	'P	Togo	Lynna Dalassa	Date	,		
	•	Type or pr	Lynne Rainey int name and title	Presid	ent &	CEO	
		Print/Type pres	pararia nama				
)	_		Date		eck	if PT	IN
aic		Michael	TIZOTACE OCHA T	21 sel	f-employed	P	02024184
100	pare Onl	C. I	SCHALL & ASHENFARB CPAS				
30	Oili	Firm's address	55 5 5 5 11 5 7 15 CM 1 1 1001	Fin	m's EIN ►	13-4	036703
_			NEW YORK, NY 10016	Ph			268-2800
lay	the IF	RS discuss this	return with the preparer shown above? (see instructions)	000000000000000000000000000000000000000	200-1-1		X Yes No

Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only s	ubmit origin	al (no copies needed).			
All corporations required to file an income tax return other use Form 7004 to request an extension of time to file income Name of exempt organization or other filer, see instruction	er than Form 99 ome tax return	20-T (including 1120 C filors), portnershi			
Type or print			Taxpayer identification number (TIN)		
File by the due date for filing your return. See instructions. Getting Out and Staying Out Number, street, and room or suite number. If a P.O. box, so the property of the pr		uctions.	106-	-1711370	
Enter the Return Code for the return that this application	is for (file a se	parate application for each return)			1
Application Is For	Return Code	Application Is For			eturn Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720 (other than individual)			09
Form 990-PF	04	Form 5227			10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
Telephone No. ► (212) 831-5020 If the organization does not have an office or place of If this is for a Group Return, enter the organization's finite check this box ► . If it is for part of the group the extension is for.	our digit Group	e United States, check this box	this is	s for the whole grou	ın 🖳
I request an automatic 6-month extension of time until for the organization named above. The extension is	for the organiz	ng <u>6/30</u> , ²⁰ <u>20</u> .	zation		
3 a If this application is for Forms 990-BL, 990-PF, 990-nonrefundable credits. See instructions.	ومحقامه إلى مصموم	**************	3 a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, tax payments made. Include any prior year overpayments	nent allowed as	s a credit	3 b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include y EFTPS (Electronic Federal Tax Payment System). S.	our payment wee instructions	vith this form, if required, by using	3 с		0.
Caution: If you are going to make an electronic funds with	drawal (direct	debit) with this Form 8868, see Form 84	53-EC	and Form 8879-FC) for

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

Form	n 990 (2019) Getting Out and Staying Out, Inc. rt III Statement of Program Service Accomplishments	06-17113	70 Page 2
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		X
	GOSO partners with people impacted by arrest and incarceration		
	education employment and emotional wellbeing and incarceration	on a journey	<u>/of</u>
	education, employment and emotional wellbeing and collaborates to support a culture of nonviolence.	with NYC con	munities
	to support a curture or nonviolence.		
2	Did the organization undertake any significant program services during the year which were not listed on the	.a	
	Form 990 or 990-EZ?	prior	\Box
	If "Yes," describe these new services on Schedule O.		Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s		
	If "Yes," describe these changes on Schedule O.	services?	Yes X No
4			
-	Describe the organization's program service accomplishments for each of its three largest program se Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported	rvices, as measure	d by expenses.
	and revenue, if any, for each program service reported.	ons to others, the i	total expenses,
4 a	(Code:) (Expenses \$ 3,295,175. including grants of \$ 405,664.)	(Revenue \$	55,000.)
	See Schedule O	-	33,000.
4 b	(Code:) (Expenses \$ including grants of \$) ((Revenue \$	688
		(1.00 p	/
4c ((Code:) (Expenses \$ including grants of \$) (f	Revenue \$	1
24			
- 2			
	Other program services (Describe on Schedule O.)		
	Expenses \$ including grants of \$) (Revenue \$)
4eT	otal program service expenses ► 3,295,175.		

	1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete		Yes	No
		a 1	X	
	3 Did the organization engage in direct or instructions (see instructions)?	2	Х	
	for public office? If 'Yes,' complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election Is the organization a section 501(A)(f). Section 501(h) for indirect political campaign activities on behalf of or in opposition to candidates Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election	3	-	X
	 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. 		X	
	6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right			Х
	Part I Part I Complete Schedule D,	. 6		X
	environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D. Part II.			Х
	B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,'			
,	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.			X
1	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V			X
1	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule			
	b Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.			- V
	assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.			X
	in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.			X
	e Did the organization report an amount for other liabilities in Part X, line 252, If Was I security 2014, 10 and	11 d	Х	X
	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)2 If Year learning to the consolidated financial statements for the tax year include a footnote that addresses	11 f	X	-
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII			
	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	12a	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	12b		<u>X</u>
14	a Did the organization maintain an office, employees, or agents outside of the United States?	13	-	<u>X</u>
	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. Did the organization report on Port IV.	14a		<u>X</u>
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 Did the organization? If 'Yes,' complete Schedule F, Parts II and IV.	14b		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	15	+	<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	16		<u>X</u>
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.	17	-	X
19	Did the organization report more than \$15,000 - 6	18	Х	_
20a	complete Schedule G, Part III. Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H.	19		X
		20a	-	X
21	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A) line 12 if 'Yes' complete Sets of the Sets of	20ь		
ВАА	domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х
	TEE 401031 07/31/10			

Forn	1990 (2019) Getting Out and Staying Out, Inc. 06-171137	0	F	age 4
Pai	t IV Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,		Yes	No
	column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.	23		x
24 8	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and			v
ŀ	complete Schedule K. If 'No, 'go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
	any tax-exempt bonds?	24c		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		х
ŀ	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		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II.	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
ā	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
ŀ	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		Х
(A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
20	Yes,' complete Schedule L, Part IV.	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		х
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		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		х
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		х
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	х	
Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		,***	AL.
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	(500)	Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	Edward Co.	100	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	X		3
	(gambling) winnings to prize winners? TEEA0104L 07/31/19	1 c	X	(0015)
BAA	recorder over 113	rorm	990 (2019

Form 990 (2019) Getting Out and Staying Out, Inc.

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

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	67		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	14/14/19/22 2b	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	S-12	100	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			Х
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O.			
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b If 'Yes,' enter the name of the foreign country▶	fag.	250	
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	500		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organiz solicit any contributions that were not tax deductible as charitable contributions?	zation 6 a		Х
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).	ESW	1000	(-1-
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	4	B	
services provided to the payor?	и 7а	Х	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	- T	MIN'S	3 4,5
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.	7е	_	Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	****** 7f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 q		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	a		
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?	75.00	a et a	
9 Sponsoring organizations maintaining donor advised funds.	***************************************		
a Did the sponsoring organization make any taxable distributions under section 4966?	0.1		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			_
10 Section 501(c)(7) organizations. Enter:	испессов ЭВ	1000	U III SAI
a Initiation fees and capital contributions included on Part VIII, line 12		22.77	330
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	28.1		ver in
11 Section 501(c)(12) organizations. Enter:	Talki	To the	
a Gross income from members or shareholders	350		
b Gross income from other sources (Do not net amounts due or paid to other sources	370		
against amounts due or received from them.)	200		
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		5.00	00 5
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?			
Note: See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?			X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	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		
If 'Yes,' see instructions and file Form 4720, Schedule N.			A
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		Х
BAA TEEA0105L 07/31/19	Form	990 /	2019)

Form 990 (2019) Getting Out and Staying Out, Inc. 06-1711370 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year.
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad 23 authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent. 23 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?..... 2 X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 X 6 Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х **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 Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 8a **b** Each committee with authority to act on behalf of the governing body?..... X 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q...... Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10 a Did the organization have local chapters, branches, or affiliates?..... 10a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?.... 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?...... 11 a X **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See Schedule O 12c X 13 Did the organization have a written whistleblower policy?...... 13 X 14 Did the organization have a written document retention and destruction policy?..... 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See Schedule...O...... 15a X **b** Other officers or key employees of the organization..... X 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16a X b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain on Schedule O) Describe on 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. See Schedule O 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

Tula Daniel 201 East 124th Street, Ground Floor

New York NY 10035 (212) 831-5020

Form 990 (2019)	Getting	Ont	and	Staving	Out	Inc
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06-1711370

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (do not check more than one box, unless person is both an officer and a (A) Name and title (B) (D) (E) (F) Average hours Reportable compensation from Reportable compensation from related organizations (W-2/1099-MISC) Estimated amount director/trustee) the organization (W-2/1099-MISC) of other compensation from per week Institutional Officer employee ndividual trustee -ormer (list any hours for related lighest compensated the organization and related employee organiza tions Il trustee below dotted line) (1) Mark Goldsmith 40 CEO thru 12-19 0 Х 117,500 0 18,754. (2) Kristin Pulkkinen 40 Chief Dev Officer 0 X 114,881 0. 8,458. (3) Geoffrey Golia 40 Associate ED 0 X 97,080 0 19,847. (4) Debbie Li 40 Dir. Fin. & Op. 0 Х 95,201 0 10,695. (5) Reginald Andre 1 Chair 0 X X 0. 0 0. (6) Norman Merritt 1 Vice Chair 0 Х X 0. 0. 0. (7) Matthew Bloom 1 Treasurer 0 Х Х 0. 0 0. (8) Ira Wachtel 1 Secretary 0 Х X 0. 0 0. (9) Brian Murrell 1 Director Х 0 0. 0 0. (10) Joseph Azelby 1 Director 0 Х 0 0 0. (11) Richard Block 1 Director 0 Х 0 0 0. (12) Fred Pfaff 1 Director 0 Х 0. 0 0. (13) Rakim Brooks 1 Director 0 X 0. 0 0. (14) Charles Kushner 1 Director 0 X 0. 0. 0.

rait vii Section A. Officers, Directors, It	usiees,	riey	E.II	ibio	oye	es,	ап	a Hignest Com	ipensated Emp	loyees (continued)
(A) Name and title	Average hours per week (list any hours for related organiza - tions below dotted line)	(do	not o	Po: check	sition more erson direct		one h an stee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(15) Simone Hicks	1									
Director	0	X						0.	0.	0.
(16) Jeremy Miller	1									
Director	0	X						0.	0.	0.
(17) Daniel Goldberg	1									
Director	0	X						0.	0.	0.
(18) Robert Harwood-Matthews	1		П							
Director	0	X						0.1	0.	0.
(19) Kimberly Till	1		П					0.	0.	0.
Director	0	X						0.	0.	0
(20) Edie Weiner	1	1						0.	0,.	0 %
Director	0	X						0.	0.	_
(21) Lauren Marrus	1	1						0.	υ.	0.
Director	0	х						0.	0.	_
(22) Jacob Weinig	1	Λ						0,	U.	0
Director		x						ا م	0	
(23) Wendy Nierel Bosalavage	1	^	\vdash	-	_	-		0.	0.	0.
Director		х						ا م	0	_
(24) Paul Netter	1	^	-	_		-	-	0.	0.	0.
Director	-	x								
(25) John Berman	1	^		-		-	-	0.	0.	0.
Director		x								*
1 b Subtotal	1 0	Λ.		_				0.	0.	0.
		9/16/1000		* * *		***		424,662.	0.	57,754.
c Total from continuation sheets to Part VII, Secti								0.	0.	0.
d Total (add lines 1b and 1c). 2 Total number of individuals (including but not limited	ceceseesee		e in the	* * * * * * * * * * * * * * * * * * * *	ere e	***	_	424,662.	0.	57,754.
from the organization 2	i to those ii	stea	abov	ve) v	vno	recei	vea	more than \$100,00	0 of reportable comp	pensation
on line Ta? If Yes, complete Schedule J for suc	3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual. 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes,' complete Schedule J for									
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e compen	satio	n fro	om a	any J fo	unrel	late	d organization or i	individual	4 X 5 X
Section B. Independent Contractors										T A
 Complete this table for your five highest compen compensation from the organization. Report compen 	sated inde sation for t	pend he ca	dent alenc	cor dar y	ntrac /ear	tors endir	that	t received more th	an \$100,000 of ganization's tax year	
(A) Name and business add								(B) Description o		(C) Compensation
Pier Sixty LLC 23rd St & Westside Hwy Pier	60 New	York	k, N	VY :	100	11		Rental space		155,646.
Geto and DeMilly 276 5th Ave #806 New York							\neg	Lobbying consu	ıltant	126,452.
Foresight 237 West 35th St, Suite 301 New	York, NY	100	001					Financial cons		120,279.
2 Total number of independent as the star of the Paris	and we have a		41				Ų			
2 Total number of independent contractors (including b \$100,000 of compensation from the organization		ied to	tno:	se II	sted	abo/	ve) v	wno received more	inan	

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

06-1711370

Getting Out and Staying Out, Inc.

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (A) (C) (D) (E) (F) Name and title Position (check all that apply) Average hours per week (list any hours for related organiza-tions below Reportable compensation from the organization (W-2/1099-MISC) Reportable compensation from related organizations (W-2/1099-MISC) Estimated amount of other compensation from the Individual trustee or director Officer Former Institutional trustee Highest compensated employee y employee organization and related organizations below dotted line) Erich Linker Director 0 X 0. 0. 0. Ashish Prashar 1 Director 0 X 0. 0. 0.

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII **(A)** Total revenue (C) Unrelated (B) Revenue excluded from tax Related or exempt business function revenue under sections 512-514 revenue 1 a Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts 1a **b** Membership dues..... 1 b 1 c 60,089. d Related organizations.... 1 d e Government grants (contributions) 1 e 2,359,562 f All other contributions, gifts, grants, and similar amounts not included above . . . 1 f 1,910,671. g Noncash contributions included in lines 1a-1f...... 1 g h Total. Add lines 1a-1f..... 4,330,322 Business Code Program Service Revenue 2a Program Income 55,000 55,000 f All other program service revenue.... g Total. Add lines 2a-2f 55,000. Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds. Royalties (i) Real (ii) Personal 6a Gross rents **b** Less: rental expenses c Rental income or (loss) 6c d Net rental income or (loss)..... (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis 7b and sales expenses c Gain or (loss) 7с d Net gain or (loss) 8 a Gross income from fundraising events Other Revenue (not including \$_ 60,089. of contributions reported on line 1c). 8a 24,343 **b** Less: direct expenses 86 24,343. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. 9a **b** Less: direct expenses. 9 b c Net income or (loss) from gaming activities..... 10 a Gross sales of inventory, less..... returns and allowances 10a **b** Less: cost of goods sold.... 10b c Net income or (loss) from sales of inventory..... Business Code Miscellaneous d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions.....

4,385,322

55,000

0.

Form 990 (2019) Getting Out and Staying Out, Inc. 06
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	Check if Schedule O contains a r	esponse or note to any	line in this Part IX		X
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	405,664.	405,664.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				with the
4					
5	Compensation of current officers, directors, trustees, and key employees	257,612.	202,079.	30,369.	25,164.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0 -	0.	0.	0.
7	Other salaries and wages	2,103,754.	1,650,257.	247,999.	205,498.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,020.	800.	120.	100.
9	Other employee benefits	223,566.	175,373.	26,354.	21,839.
10	Payroll taxes	203,197.	159,395.	23,954.	19,848.
11	Fees for services (nonemployees):		2037030.	23,754.	17,040.
	a Management				
	b Legal				
	c Accounting				
	d Lobbying	77,514.		77,514.	
	e Professional fundraising services. See Part IV, line 17.	12,960.		11,514.	12 060
	f Investment management fees	12, 700.			12,960.
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule 0.5Ch. Q Advertising and promotion.	630,786.	261,632.	291,582.	77,572.
13	Office expenses	104,264.	62,039.	8,297.	33,928.
14	Information technology	201/2011	02/033.	0,251.	33,720.
15	Royalties				
16	Occupancy	275,670.	216,245.	32,497.	26 020
17	Travel	9,720.	9,720.	32,497.	26,928.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	3,120.	9,120.		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	52,868.	41,471.	6,233.	5,164.
	Insurance	31,039.	24,348.	3,659.	3,032.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
ā	Equipment and Maintainence	105,582.	37,316.	23,011.	45,255.
	Telephone & Internet	62,256.	48,836.	7,339.	6,081.
	Other Expense	46,844.		37,293.	9,551.
•	Special Event Expense	9,715.			9,715.
	All other expenses				27,120.
25	Total functional expenses. Add lines 1 through 24e	4,614,031.	3,295,175.	816,221.	502,635.
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				
D	SOP 98-2 (ASC 958-720)				
BAA		TEEA0110L 07/	31/19		Form 990 (2019)

1 Cash - non-interest-bearing. 42,232. 1 1,243,656. 2 2			Check if Schedule O contains a response or note to	any line	in this Part X		000000000000000000000000000000000000000	
2 Savings and temporary cash investments. 2 3 Pickoges and grants receivable, net. 1,742,989, 3 3 869,913								
2 Savings and temporary cash investments. 2 3 Redges and grants receivable, net 1,742,999, 3 869,913 4 Accounts receivable, net 1,742,999, 3 869,913 10,7923 4 Accounts receivable, net 1,742,999, 15 Accounts parable net 1,742,999, 17		1	Cash — non-interest-bearing		ed dan manastana	42,232.	1	1,243,656.
A Accounts receivable, net		2					2	
A Accounts receivable, net 107,923 4		3	Pledges and grants receivable, net			1,742,989.	3	869, 913
1		4	Accounts receivable, net	1000			4	000/0101
Comparison Com		5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled on the controlled o	director, or, or 35%				
Section 4958(p(1)), and persons described in section 4958(c)(3)(B)		١.					5	
7 Notes and loans receivable, net. 7 8		6	Loans and other receivables from other disqualified pe	ersons (as	s defined under			
Social Reservation Social		۱.						
9 Prepaid expenses and deferred charges	۰,		Notes and loans receivable, net.	E800 - 10000 - 10000		7		
10a	ë	_	Inventories for sale or use.			8		
10a	SS	-			5520	4,808.	9	162,960.
b Less: accumulated depreciation. 10b 243,292. 123,754. 10c 134,490. 11 Investments – publicly traded securities. 11 1 12 13 Investments – other securities. See Part IV, line 11. 12 13 Investments – program-related. See Part IV, line 11. 13 14 Intangible assets. 14 15 15 15 15 16 16 17 15 16 16 17 16 17 17 17 17	•	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	377,782.			
11 Investments - publicly traded securities. 11 12 17 12 17 12 17 12 17 13 18 18 19 19 19 19 19 19		Ŀ	Less: accumulated depreciation	10 b	243,292.	123,754.	10 c	134.490
12 Investments — other securities. See Part IV, line 11.			Investments - publicly traded securities	6.04.04.04.04.04.04.04.04.04.04.04.04.04.			11	101/1001
13 Investments — program-related. See Part IV, line 11 13 14 Intangible assets. 14 Intangible assets. 14 15 Intangible assets. 15 Other assets. See Part IV, line 11 15 Intangible assets. 16 Intangible assets. 17 Intangible assets. 18 Intangible assets. 18 Intangible assets. Int		12	Investments - other securities. See Part IV, line 11				12	
14		13	Investments - program-related. See Part IV, line 11.				13	
15 Other assets. See Part IV, line 11. 43,590. 15 111,301. 16 Total assets. Add lines 1 through 15 (must equal line 33). 2,065,296. 16 2,522,320. 17 Accounts payable and accrued expenses. 239,875. 17 270,946. 18 18 19 19 19 19 19 19		14	Intangible assets.				14	
Total assets. Add lines 1 through 15 (must equal line 33)		15	Other assets. See Part IV, line 11			43.590	15	111 301
18 Grants payable		16	Total assets. Add lines 1 through 15 (must equal line	33)				
Page 19 Deferred revenue			Accounts payable and accrued expenses			239,875.		270,946.
20 Tax-exempt bond liabilities			Deferred revenue					
21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. 27 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 28 Net assets without donor restrictions. 29 Net assets with donor restrictions. 20 Capital stock or trust principal, or current funds. 21 Total liabilities and rust principal, or current funds. 29 Paid-in or capital surplus, or land, building, or equipment fund. 30 Retained earnings, endowment, accumulated income, or other funds. 31 Total liabilities and rust payables to any current of firector, trustee, key employee, creator or 35% controlled with the section of 189% and 24 288,630. 21 Total liabilities (including federal income tax, payables to related third parties. 22 288,630. 23 24 288,630. 24 288,630. 25 249,392. 26 935,125. 24 29,392. 26 935,125. 249,392. 26 935,125. 249,392. 26 935,125. 240,392. 26 935,125. 241,794,654. 27 1,169,299. 21,250. 28 417,896. 21,250. 28 417,896. 21,250. 28 417,896. 21,250. 28 417,896. 21,250. 28 417,896.		20	Tax-exempt bond liabilities					
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. 27 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 28 Net assets without donor restrictions. 29 Net assets without donor restrictions. 20 Crapital stock or trust principal, or current funds. 21 Capital stock or trust principal, or current funds. 29 Paid-in or capital surplus, or land, building, or equipment fund. 30 Paid-in or capital surplus, or land, building, or equipment funds. 31 Total net assets or fund balances. 32 Total liabilities and not spayable to unrelated third parties. 22 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 25 375, 549. 24 288, 630. 27 1, 169, 299. 28 24 288, 630. 29 9, 517. 25 375, 549. 24 288, 630. 24 288, 630. 24 288, 630. 24 288, 630. 25 375, 549. 26 935, 125. 27 1, 169, 299. 28 417, 896. 29 21, 250. 29 20 21, 250. 20 21, 250. 20 21, 250. 21 250. 22 21, 250. 23 21, 250. 24 288, 630. 25 24 288, 630. 26 28 28, 630. 27 1, 169, 299. 28 21, 250. 29 21, 250. 20 21, 250. 20 21, 250. 21 250. 22 21, 250. 23 21, 250. 24 288, 630. 25 24 288, 630. 26 28 28, 630. 27 1, 169, 299. 28 21, 250. 28 417, 896. 29 21, 250. 20 21, 250. 21 250. 22 25. 23 21, 250. 24 288, 630. 25 24 288, 630. 26 24 288, 630. 27 24 288, 630. 28 24 288, 630. 29 24 288, 630. 20 24 29, 392. 20 24 29, 392. 21 250. 22 25. 23 21, 250. 24 28, 630. 25 24 28, 630.	9	21	Escrow or custodial account liability. Complete Part IV	√ of Sche	dule D			
23 Secured mortgages and notes payable to unrelated third parties. 24 288,630. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. Net assets without donor restrictions. Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total net assets or fund balances. 34 288,630. 25 24 288,630. 26 375,549. 27 249,392. 26 3935,125. 27 1,169,299. 28 1,794,654. 27 1,169,299. 29 21,250. 29 21,250. 29 30 375,549. 21,794,654. 27 1,169,299. 21,250. 28 417,896. 29 30 30 30 30 30 30 30 30 30 30 30 30 30	劉		loans and other navables to any current or former offi	cor direc	tor trustee	TO STANDARD SYN	21	THE PART OF THE PART
23 Secured mortgages and notes payable to unrelated third parties. 24 288,630. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. Net assets without donor restrictions. Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total net assets or fund balances. 34 288,630. 25 24 288,630. 26 375,549. 27 249,392. 26 3935,125. 27 1,169,299. 28 1,794,654. 27 1,169,299. 29 21,250. 29 21,250. 29 30 375,549. 21,794,654. 27 1,169,299. 21,250. 28 417,896. 29 30 30 30 30 30 30 30 30 30 30 30 30 30	∐abil		controlled entity or family member of any of these per	tor, or 35° sons	%		22	
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. Net assets without donor restrictions. Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. 27 Net assets with donor restrictions. Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total net assets or fund balances. 34 Total liabilities and not reserve funds believed by the land.		23	Secured mortgages and notes payable to unrelated this	ird parties	Hanna - Hannasa Ca		23	
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. Organizations that follow FASB ASC 958, check here ▶ X and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions. Organizations that do not follow FASB ASC 958, check here ▶ 1,794,654. 28 Net assets with donor restrictions. Organizations that do not follow FASB ASC 958, check here ▶ 21,250. 29 Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities not included on lines 17-24). Complete Part X of Schedule D. 9,517. 249,392. 26 935,125. 27 1,169,299. 28 417,896. 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20		24	Unsecured notes and loans payable to unrelated third	parties	. 6660		24	288, 630
Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. 7 Net assets without donor restrictions			Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Comp	s to relate plete Part	ed third parties, X of Schedule D.	9,517.	25	
Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. Net assets without donor restrictions. Net assets with donor restrictions. Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, or equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. Total line lities and not constant fund balances. Total line lities and not constant fund balances. 1,815,904. 32 1,587,195.		26			11.1-1.1-1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	249,392.	26	935,125.
28 Net assets with donor restrictions. Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and not contact fund balances. 34 Total liabilities and not contact fund balances. 35 Total liabilities and not contact fund balances. 36 Total liabilities and not contact fund balances. 37 Total liabilities and not contact fund balances. 38 Total liabilities and not contact fund balances.	nces		and complete lines 27, 28, 32, and 33.		1			
Problem 28 Net assets with donor restrictions. Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total liabilities and not contact fund belances. 33 Total liabilities and not contact fund belances. 34 17,896. 21,250. 28 417,896. 30 30 30 30 30 30 30 30 30 30 30 30 30 3						1,794,654.	27	1,169,299.
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and net assets/fund balances. 34 Total liabilities and net assets/fund balances. 36 Total liabilities and net assets/fund balances.	9	28				21,250.	28	
29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and net assets/fund balances. 34 1,587,195. 35 2065 296 33 2 2 533 230	Ē		Organizations that do not follow FASB ASC 958, checand complete lines 29 through 33.	k here 🕨				
30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and net assets/fund balances. 30 Salary Sal	8	29	Capital stock or trust principal, or current funds.			29		
31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and net assets/fund balances. 31 1,815,904. 32 1,587,195.	왕	30						
32 Total net assets or fund balances 1,815,904. 32 1,587,195. 33 Total liabilities and net assets/fund balances 2,065,296, 33 2,532,330	SS	31						
Z 33 Total liabilities and net assets/fund balances.	2	32	Total net assets or fund balances		55554V454V41VVVVVII	1 815 904	-	1 507 105
	≱	33				2,065,296.	33	2,522,320.

Forr		-1711370		Pa	age 1
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1	-	85,3	-
2	Total expenses (must equal Part IX, column (A), line 25)	2		14,0	
3	Revenue less expenses. Subtract line 2 from line 1	3		28,7	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4		15, 9	
5	Net unrealized gains (losses) on investments.		1,0	10,5	704.
6	Donated services and use of facilities	6	_		
7	Investment expenses				_
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year, Combine lines 3 through 9 (must equal Part X, line 32)				0.
The state of the s	column (B))	10	1.5	87,1	95.
Par					
I al	t XII Financial Statements and Reporting				
I al					
I al	Check if Schedule O contains a response or note to any line in this Part XII				
1					
1	Check if Schedule O contains a response or note to any line in this Part XII				
1	Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other' explain				
1	Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:				No
1 2 a	Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ved on a	2a	Yes	No
1 2 a	Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	ved on a			No
1 2 a	Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both:	ved on a	2a	Yes	No
1 2 a	Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis.	ved on a	2a	Yes	No

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Form **990** (2019)

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If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

BAA

3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

TEEA0112L 01/21/20

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2019

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Getting Out and Staying Out, Inc. 06-1711370 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iii) Type of organization (described on lines 1-10 above (see instructions)) (i) Name of supported organization (iv) Is the organization listed in your governing document? (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) Yes No (A) (B) (C) (D) (E) **Total**

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support							
beg	endar year (or fiscal year jinning 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 grants.').	2,221,090.	2,949,722.	4,399,048.	2,276,075.	4.330.322	16,176,257.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				., ,	1,000,011.	0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	2,221,090.	2,949,722.	4,399,048.	2,276,075.	4,330,322.	16,176,257.	
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)						1,177,950.	
6	Public support. Subtract line 5 from line 4						14,998,307.	
Se	ction B. Total Support	/					11/200/301.	
	endar year (or fiscal year inning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
7	Amounts from line 4.	2,221,090.	2,949,722.	4,399,048.	2,276,075.	4,330,322.	16,176,257.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.	
11	Total support. Add lines 7 through 10						16,176,257.	
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	115,450.	
13	First five years. If the Form 990 is to organization, check this box and	for the organization stop here	s first, second, th	rd, fourth, or fifth t	ax year as a section	on 501(c)(3)		
Sec	tion C. Computation of Pub	olic Support P	ercentage					
	Public support percentage for 20						92.72 %	
15	Public support percentage from 2	2018 Schedule A,	Part II, line 14	C			91.05 %	
16a	33-1/3% support test—2019. If the and stop here. The organization	ne organization di qualifies as a pub	d not check the b blicly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	% or more, check	this box	
b	and stop here. The organization qualifies as a publicly supported organization. b 33-1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
1 7 a	10%-facts-and-circumstances ter or more, and if the organization r the organization meets the 'facts	st-2019. If the or meets the 'facts-a -and-circumstance	ganization did no nd-circumstances es' test. The orga	t check a box on it test, check this nization qualifies	line 13, 16a, or 16 box and stop her as a publicly supp	5b, and line 14 is e. Explain in Part ported organizatio	10% VI how n ▶ □	
	10%-facts-and-circumstances te or more, and if the organization r organization meets the 'facts-and	neets the 'f act s-a l-circumst <mark>ance</mark> s' t	nd-circumstances est. The o <mark>rga</mark> niza	s' test, check this tion qualifies as a	box and stop her a publicly supporte	 e. Explain in Part ed organization 	VI how the ▶ □	
18	Private foundation. If the organiz	ation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	tructions ►	

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.)

Sec	tion A. Public Support	711					
Caler	dar year (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 grants.)			, ,	(-) 20.0	(2) 2313	Wilde
2	Gross receipts from admissions, 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 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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
	dar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses						
_	acquired after June 30, 1975 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						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop nere		nd, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
	tion C. Computation of Pub						
15	Public support percentage for 20	19 (line 8, column	n (f), divided by li	ne 13, column (f)).,,,,,		8
16	Public support percentage from 2	2018 Schedule A,	Part III, line 15.			16	8
Sect	tion D. Computation of Inve	estment Incor	ne Percentage)			
	Investment income percentage for				ımn (f))		%
18	Investment income percentage fr	om 2018 Schedu	le A, Part III, line	17	Compared the Compared	18	
19a	33-1/3% support tests-2019. If the	he organization d	id not check the h	ox on line 14, an	d line 15 is more	than 33-1/3% and	line 17
	is not more than 33-1/3%, check	this box and stop	o here. The organ	ization qualifies a	s a publicly suppo	orted organization.	pereseauro >
	33-1/3% support tests-2018. If the line 18 is not more than 33-1/3%	he organization d , check this box a	id not check a boa and stop here. The	x on line 14 or line e organization qua	e 19a, and line 16 alifies as a publici	is more than 33-1, v supported organization	/3%, and
20	Private foundation. If the organiz	ation did not che	ck a box on line 1	4, 19a, or 19b, cl	heck this box and	see instructions	-

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Type Type Type Type Type Type Type Type	
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).	2	85	
3	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a	in Inig	
	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.	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		
4	a 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		52.
5	a 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).	5a		
	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	Shell	
	c 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8	303.1	Pito I
9	a 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		70
ı	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.	9Ь		(Sells
	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		
10	a 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 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		0000

P	art IV Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below the		fs.	
	governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	11b		
	c 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		
<u>Se</u>	ction B. Type I Supporting Organizations			
1			Yes	No
	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? 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 organization.	2		
Se	ction C. Type II Supporting Organizations			
-			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction D. All Type III Supporting Organizations			
		,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sec	ction 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).			
i	The organization satisfied the Activities Test. Complete line 2 below.			
	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see			
		instruct.	ions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
•	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 organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.		36	100
ā	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? <i>Provide details in Part VI.</i>	3a		E
BAA	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.	3b	18.5	the s
_^^				

1	irt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.	ust on No ions mus	v. 20, 1970 (explain in t complete Sections A	n Part VI) . See v through E.
Se	ction 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		
Sed	ction 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 shor tax year or assets held for part of year):	t		
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	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):			ries de la company
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		
Sec	tion 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		
	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 (see instructions).	egrated 7	ype III supporting org	janization
AAS				

Schedule A (Form 990 or 990-EZ) 2019

	edule A (Form 990 or 990-EZ) 2019 Getting Out and Sta	ying Out, Inc.	06-17	11370 Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) S	upporting Organiza	ations (continued)	
Sec	ction D - Distributions			Current Year
_ 1	Amounts paid to supported organizations to accomplish exempt pu	urposes		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organization	ns,	
3	Administrative expenses paid to accomplish exempt purposes of s	upported organizations		
4		- Andrews		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizat in Part VI). See instructions.	ion is responsive (provide	details	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sec	ction 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	MEAN BY AND		
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	mat liberal sort		
- 6	a From 2014		THE WAY THE PROPERTY OF	
	From 2015			
	From 2016			
	From 2017			
	From 2018	189 Jack 1989	BUTTO STORY	CAMBEL PROVINCE
	f Total of lines 3a through e			
Ç	Applied to underdistributions of prior years			Mark Spirit State
ŀ	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:			
a	Applied to underdistributions of prior years			
_	Applied to 2019 distributable amount		PRIVATE DEPARTMENT	
- 0	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			The production of the second
8	Breakdown of line 7;	BLOOD BOOK ON THE		
а	Excess from 2015	THE PROPERTY OF	TO VENEZA DE LOS	
	Excess from 2016	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	TARREST AND	N MANAGEMENT

e Excess from 2019. BAA

c Excess from 2017. d Excess from 2018.....

Schedule A (Form 990 or 990-EZ) 2019

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2019

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	section 501 (c)(4), (5), or (6) of organization	organizations: Complete Part III.			
	V. 100 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 - 400 -	•		Employer identifie	
Pa	tting Out and Stayi	rganization is exempt under secti	on E01(a) ar is a	06-17113	70
		organization is exempt under section organization organiz			ization.
	(see instructions for definition	on of 'political campaign activities')	ampaign activities in	Part IV.	
2	Political campaign activity e	expenditures (see instructions)	esector of this total esect of the total esecution in the	**************************************	\$
3	Volunteer hours for political	campaign activities (see instructions)			·
		rganization is exempt under secti			
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	**************************************	₿ 0.
2	Enter the amount of any ex-	cise tax incurred by organization managers	under section 4955.	MARKET AND	0.
3	If the organization incurred	a section 4955 tax, did it file Form 4720 for	this year?		
4:	Was a correction made?	* * * * * * * * * * * * * * * * * * * *			
	f 'Yes,' describe in Part IV.		VIVI CLEWILL STATES		TO THO
Pai	rt I-C Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3)	
1		pended by the filing organization for section			
2	Enter the amount of the filin 527 exempt function activities	ng organization's funds contributed to other	organizations for sec	etion	5
3	Total exempt function exper line 17b	nditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,		
4	Did the filing organization fil	e Form 1120-POL for this year?		ere en	Yes No
5	Enter the names, addresses	and employer identification number (EIN) s. For each organization listed, enter the ans received that were promptly and directly deal action committee (PAC), If additional spa	of all section 527 pol	itical organizations to	which the filing
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. 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)					
(3)					
(4)			3		
(5)					
(6)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2019

	ne organization	is exempt under sec		iled Form 5768 (el	ection under
		s to an affiliated group (and	list in Part IV pach offiliat	od group mombale see	
address. E	IN. expenses, and	share of excess lobbying	expenditures)	ed group member's name	,
		cked box A and 'limited con			
(The term 'e	Limits on Lobby expenditures' mea	ing Expenditures ns amounts paid or incurre	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditure	es to influence pul	blic opinion (grassroots lob	bying)		
b Total lobbying expenditure	es to influence a le	egislative body (direct lobby	/ing)	77,514.	
c Total lobbying expenditure	es (add lines 1a a	nd 1b)		77,514.	0.
d Other exempt purpose ex	penditures			3,217,661.	Ţ.,
e Total exempt purpose exp	penditures (add lin	es 1c and 1d)	CONTRACTOR	3,295,175.	0.
f Lobbying nontaxable amo both columns	unt. Enter the am	ount from the following tabl	e in	314,759.	
If the amount on line 1e, colum		The lobbying nontaxable a		314, 133.	CONTRACTOR OF THE
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000	\$100,000 plus 15% of the excess of	ver \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000	\$175,000 plus 10% of the excess o	ver \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000	\$225,000 plus 5% of the excess ov	er \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable am	nount (enter 25% o	of line 1f),,,,,,,,	*********	78,690.	0.
h Subtract line 1g from line	1a. If zero or less	, enter -0-		0.	0.
i Subtract line 1f from line				0.	0.
j If there is an amount other t	than zero on either	line 1h or line 1i, did the orga	nization file Form 4720 re	eporting	П. П
- section 4911 tax for this y				(4,4)	Yes No
(Some o	organizations that	LYear Averaging Period Ui made a section 501(h) ele	ction do not have to co	mplete all of the five	
		ow. See the separate instru		- ,	
	Lobby	ring 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	264,385	5. 273,146.	223,709.	314,759.	1,075,999.
b Lobbying ceiling amount (150% of line				West State State	
amount (150% of line 2a, column (e))					
					1,613,999.
c Total lobbying expenditures	96,004	103,896.	91,287.	77,514.	368,701.
d Grassroots nontaxable				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	500,701,
amount	66,096	68,287.	55,927.	78,690.	269,000.
e Grassroots ceiling					
amount (150% of line 2d, column (e))					405 55
					403,500.
f Grassroots lobbying expenditures					^
BAA		-)		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	(a)		(b)	
of each respense of lines ta unough it below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Aı	nount	
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;					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?		_			
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?	-				
j Total. Add lines 1c through 1i	100.01	EU			_
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	200211	-	DIST. IN	Color S	IISII
b If 'Yes,' enter the amount of any tax incurred under section 4912		in the little	1000 100	01,	11/10
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	52.11	138			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	200	CHECK	William Inc.	2017-21	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	cV5)	01			116
section 501(c)(6).	C)(J),	OI .			
					1
4. Were reducted in H. H. (000)				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	233333	* * * * * *	1	Yes	No
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		****	2	Yes	Ne
 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the political campaign activity expenditures. 	rior ye	ar?	3		
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) is answered 'Yes.' 	rior ye c)(5), Part II	ar?	2	(01(c)	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) in the organization is exempt under section 501(c)(4), section 501(c)(4), and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) in the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B.	rior ye c)(5), Part II	ar?	2	(01(c)	
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) is answered 'Yes.' 	rior ye c)(5), Part II	ar? or se I-A, li	2	(01(c)	
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) I answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 	c)(5), Part II	or se I-A, Ii	2	(01(c)	
 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) I answered 'Yes.' 1 Dues, assessments and similar amounts from members. 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). a Current year. 	c)(5),	or se I-A, li	2	(01(c)	
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) I answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year. b Carryover from last year. 	c)(5), Part II	or se I-A, li 1 2a 2b	2	(01(c)	
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year. b Carryover from last year. c Total. 	c)(5), Part II	or se I-A, Ii 1 2a 2b 2c	2	(01(c)	
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) I answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year. b Carryover from last year. c Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 	c)(5), Part II	or se I-A, li 1 2a 2b	2	(01(c)	
 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) I answered 'Yes.' 1 Dues, assessments and similar amounts from members. 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). a Current year. b Carryover from last year. c Total. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 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 	c)(5), Part II	or se I-A, li 1 2a 2b 2c	2	(01(c)	
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year. b Carryover from last year. c Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 	c)(5), Part II	or se I-A, Ii 1 2a 2b 2c	2	(01(c)	

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.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047 2019

Open to Public Inspection
Employer identification number

	Getting Out and Staying Out, Inc.	06-1711370
Pa	ort I Organizations Maintaining Donor Advised Funds or Other Similar Fu	inds or Accounts
	Complete if the organization answered 'Yes' on Form 990, Part IV, lin	e 6.
	(a) Donor advised funds	(b) Funds and other accounts
1		(-)
2	Aggregate value of contributions to (during year).	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in are the organization's property, subject to the organization's exclusive legal control?	donor advised funds
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fur for charitable purposes and not for the benefit of the donor or donor advisor, or for any other impermissible private benefit?	nds can be used only
Pa	rt II Conservation Easements.	
	Complete if the organization answered 'Yes' on Form 990, Part IV, lin	e 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (for example, recreation or education)	ition of a historically important land area
	Protection of natural habitat Preserva	tion of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the foliast day of the tax year.	rm of a conservation easement on the
		Held at the End of the Tax Year
	a Total number of conservation easements	
	b Total acreage restricted by conservation easements	
	c Number of conservation easements on a certified historic structure included in (a)	2c
	d Number of conservation easements included in (c) acquired after 7/25/06, and not on a hist structure listed in the National Register	oric 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by tax year ▶	the organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, have	— andling of violations.
	and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing c	onservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conse ▶ \$	rvation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of s and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue are include, if applicable, the text of the footnote to the organization's financial statements that conservation easements.	nd expense statement and balance sheet, and describes the organization's accounting for
Par	Organizations Maintaining Collections of Art, Historical Treasures, o	r Other Similar Assets.
1 8	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue shistorical treasures, or other similar assets held for public exhibition, education, or research Part XIII the text of the footnote to its financial statements that describes these items.	statement and halance sheet works of art
ŀ	If the organization elected, as permitted under FASB ASC 958, to report in its revenue state historical treasures, or other similar assets held for public exhibition, education, or research in furth following amounts relating to these items:	ment and balance sheet works of art, erance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line 1	F88
	(ii) Assets included in Form 990, Part X	
	If the organization received or held works of art, historical treasures, or other similar assets for fina amounts required to be reported under FASB ASC 958 relating to these items:	
a	Revenue included on Form 990, Part VIII, line 1	 \$
	Assets included in Form 990, Part X	

Schedule D (Form 990) 2019 Getti	ng Out and	Staying Out	, Inc.	06-171	1370	Page
Part III Organizations Maintai						nued)
3 Using the organization's acquisition items (check all that apply):	, accession, and of	her records, check a	any of the following that m	nake significant use of its	collection	
a Public exhibition		d \square Loan	or exchange program			
b Scholarly research		e Other				
c Preservation for future genera	ations					
4 Provide a description of the organization		and explain how they	further the organization's	s exempt purpose in		
Part XIII.						
5 During the year, did the organizate to be sold to raise funds rather the	tion solicit or rece an to be maintair	eive donations of ar ned as part of the c	t, historical treasures, c	or other similar assets	Yes	□No
Part IV Escrow and Custodial	Arrangement	s. Complete if t	he organization and	swered 'Yes' on Fo		art IV
line 9, or reported an a	amount on For	m 990, Part X,	line 21.		111 330, 1 0	art 1 V ,
1 a Is the organization an agent, trus	tee, custodian or	other intermediary	for contributions or other	er assets not included		
on Form 990, Part X?	******				Yes	No
b If 'Yes,' explain the arrangement	in Part XIII and c	omplete the followi	ng table:			
B					Amount	
c Beginning balance		. C VEVI		1c		
d Additions during the year.						
e Distributions during the year f Ending balance						
2a Did the organization include an a	mount on Form 9	0 Part V line 21	for occrow or custodial	If	7,,	
b If 'Yes,' explain the arrangement	in Part XIII. Chec	k here if the explar	nation has been provide	d on Part VIII	Yes	No
		. There is the explain	autori nas been provide	d off i art Affinesses	0.000.000.000	
Part V Endowment Funds. Co	omplete if the	organization an	swered 'Yes' on Fo	rm 990. Part IV. lin	e 10	
	(a) Current year	(b) Prior year			(e) Four year	ars back
1 a Beginning of year balance.						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
Provide the estimated percentage		ar end balance (lin	e 1g, column (a)) held a	as:		
a Board designated or quasi-endowme		8				
b Permanent endowment ▶	~~~~~ [%]					
c Term endowment ►	*					
The percentages on lines 2a, 2b, and	·					
3a Are there endowment funds not in the	e possession of th	e organization that a	re held and administered	for the		
organization by: (i) Unrelated organizations					Yes	No
(ii) Related organizations					3a(i)	-
b If 'Yes' on line 3a(ii), are the relat	ed organizations	listed as required of	n Schedule R?		3a(ii) 3b	-
4 Describe in Part XIII the intended	uses of the organ	nization's endowme	nt funds.		30	
Part VI Land, Buildings, and E						
Complete if the organiz		d 'Yes' on Forn	n 990, Part IV, line	11a. See Form 990). Part X. I	ine 10
Description of property	(a) C	ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	
1 a Land			Dadio (Strict)	deprediation		
b Buildings						
c Leasehold improvements.			230,566.	150,614.	70	,952.
d Equipment			147,216.	92,678.	1000	,538.
e Other						,
Total. Add lines 1a through 1e. (Column	(d) must equal F	orm 990, Part X, c	olumn (B), line 10c.)		134	,490.
BAA				Schedu	le D (Form 99	0) 2019

0, Part X, line
0, Part X, line f-year market valu
f-year market valu
ryear market valt
), Part X, line
(b) Book value
(b) Book value
(b) Book value
(b) Book value
(b) Book value
372,736
372,736
372,736
372,736
372,736
372,736
372,736
372,736

	-I/II3	rage 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	4,450,530.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	4.5 A	
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants	i jen	
d Other (Describe in Part XIII.)	100	
e Add lines 2a through 2d.	2 e	65,208.
3 Subtract line 2e from line 1	3	4,385,322.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.2.4	1,000,022.
a Investment expenses not included on Form 990, Part VIII, line 7b	E TO	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	4,385,322.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	1,000,522.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	4,679,239.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		4,013,233.
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses.	50	
d Other (Describe in Part XIII.)	(C.)	
e Add lines 2a through 2d	2 e	CE 200
3 Subtract line 2e from line 1	3	65,208. 4,614,031.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	With	4,014,031.
a Investment expenses not included on Form 990, Part VIII, line 7b.	1000	
b Other (Describe in Part XIII.)	-	
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	4,614,031.
Part XIII 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.

Part X - FASB ASC 740 Footnote

GOSO does not believe its financial statements include any material, uncertain tax positions. GOSO had previously filed tax returns on a calendar year-end before changing to a June fiscal year end, effective June 30, 2019. Tax filings for the periods ended December 31, 2017 and later are subject to examination by applicable taxing authorities.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

<u>Ge</u>	tting Out and Staying (06-171137	0
Pa	TOTAL STOCKE HIGH ALE HOLE	equired to comp	lete this p	oart.	- 300		
1		raised funds th	rough any	of the foll	owing activities. Check	all that apply.	
	a X Mail solicitations			е	X Solicitation of non-	government grants	
	b \overline{X} Internet and email solicitation:	s		f	X Solicitation of gove	ernment grants	
	c Phone solicitations			g	X Special fundraising	events	
	d X In-person solicitations			•			
2	a Did the organization have a written of	r oral agreemen	t with anv	individual (including officers, directo	re truetone or kov	
	employees listed in Form 990, Pai	rt VII) or entity	ın connec	tion with p	rofessional fundraising	services?	Yes X No
_	b If 'Yes,' list the 10 highest paid inc compensated at least \$5,000 by the	dividuals or ent ne organization	ities (fund	lraisers) pu	ursuant to agreements	under which the fundrai	ser is to be
() Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did have custo of cont	fundraiser ody or control ributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
	Carol Norbitt		Yes	No		column (i)	organization
1	545 East 14th Street						
	New York NY 10009	Grant Writer		X		12,960.	
						12,500.	
2							
3							
4							
5							
6							
7							
8							
9							
10							
Tota							=
3	List all states in which the organization or licensing. NY				ontributions or has been r	12,960.	registration

Sch	nedule	e G (Form 990 or 990-EZ) 2019 Getting	g Out and Stayi	ng Out, Inc.	06-17	/11370 Page 2
Pa	rt II	Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts growth and the statement of	event contribution	nswered 'Yes' on Fo s and gross income	orm 990, Part IV, I on Form 990-EZ,	ine 18, or reported lines 1 and 6b.
R E V E N			(a) Event #1 GOSO Social (event type)	(b) Event #2 Other (event type)	(c) Other events None (total number)	(d) Total events (add column (a) through column (c))
Ě N U	1	Gross receipts	69,410.	15,022.		84,432.
Ē	2	Less: Contributions	45,067.	15,022.		60,089.
	3	Gross income (line 1 minus line 2)	24,343.			24, 343.
	4	Cash prizes				
_	5	Noncash prizes				
D R E C T	6	Rent/facility costs	13,140.			13,140.
	7	Food and beverages	9,263.			9,263.
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses.	1,940.			1,940.
š	10	Direct expense summary. Add lines 4 thr				
Day	11		om line 3, column (d)	***************************************		
Га	C 111	rt IV, line 19, or re	ported more than			
REVENUE			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
	1	Gross revenue				
DIRECT S	2	Cash prizes				
	3	Noncash prizes				
C S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	Yes 8	
	7	Direct expense summary. Add lines 2 three	ough 5 in column (d)	********************		
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	n (d)		
b	Is th	er the state(s) in which the organization content organization licensed to conduct gaming o,' explain:	inducts gaming activitie g activities in each of th	s:ese states?		
10 a	Were	e any of the organization's gaming license es,' explain:			e tax year?	Yes No
BAA			TEEA3702L 08	3/19/19	Schedule G (For	m 990 or 990-EZ) 2019

Schedule G (Form 990 or 990-EZ) 2019 Getting Out and Staying Out, Inc.	06-1711370	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity administer charitable gaming?	formed to Yes	No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility		8
b An outside facility.	13b	9
14 Enter the name and address of the person who prepares the organization's gaming/special events books a	and records:	
Name •		:
Address •		
15a Does the organization have a contract with a third party from whom the organization receives gami	ing revenue?	□No
b If 'Yes,' enter the amount of gaming revenue received by the organization► \$	and the amount	
of gaming revenue retained by the third party ► \$		
c If 'Yes,' enter name and address of the third party:		
Name •		
Address •		
16 Gaming manager information:		
Name •		
Gaming manager compensation ► \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to restate gaming license?	etain the	No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations o	r spent in the	
organization's own exempt activities during the tax year ► \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also proinformation. See instructions.	2b, columns (iii) and (ivide any additional	v);

SCHEDULE I

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

1545-0047	
OMB No.	

2019

Open to Public Inspection

2 (h) Purpose of grant or assistance Employer identification number XYes Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on 06-1711370 Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table See Part IV Enter total number of other organizations listed in the line 1 table (book, FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant (if applicable) Part I General Information on Grants and Assistance (P) EIN Getting Out and Staying Out, ------1 (a) Name and address of organization or government Name of the organization 8 8 ල € ©, 9 0 8

Schedule 1 (Form 990) (2019)

TEEA3901L 07/10/19

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

Getting Out and Staying Out, Inc. Schedule I (Form 990) (2019)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part can be duplicated if additional space is needed. 06-1711370 Part III

Page 2

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Metro	1 MetroCards, education & other needs	250	405,664.		FMV	Paid for clients' expenses
2						
æ						
4						
D.						
ဖ						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	ide the information	required in Part I,	line 2; Part III, co	lumn (b); and any oth	er additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

GOSO program staff meet with clients on a periodic basis to discuss their needs and

progress.

MetroCards are given to clients after they meet certain goals or has a GOSO related

need; job interview, court date, child care visit, starting a new job or internship

or to attend college.

Education assistance is provided in the form of stipends when the client meets

certain milestones.

Other assistance consist of providing; everyday attire, professional attire,

shelf-stable meals and basic needs. These are given on a case by case basis depending

on each client's specific need. BAA

Schedule I (Form 990) (2019)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Getting Out and Staying Out, Inc.

Employer identification number 06-1711370

Form 990, Part III, Line 4a - Program Service Accomplishments

In the 16 years since its founding, GOSO has served over 10,000 young men who have been impacted by the justice system, partnering with them to further their education, obtain meaningful employment, and achieve emotional well-being. During this time, GOSO participants have consistently maintained a recidivism rate under 15%, as compared to the national average of 67% for the same demographic. Since 2013, GOSOWorks, our employment development program, has placed over 600 participants in wage-subsidized jobs. Approximately 70% of GOSOWorks interns are hired within 6 months of completing their internship. In collaboration with the New York City Department of Education, GOSO hosts an on-site High School Equivalency program for our participants. In the FY2O academic year, 6 participants earned their high school equivalency diplomas. We also provide on-site vocational training to our participants, including OSHA 30-Hour Construction and Security Guard training. In FY2O, 75 unique participants earned 156 vocational certifications at GOSO.

SAVE

Stand Against Violence East Harlem (SAVE), the violence prevention unit embedded within Getting Out and Staying Out (GOSO), is committed to preventing gun violence and building a culture of non-violence to bring peace and economic development to East Harlem. SAVE's work is guided by the principles of Cure Violence, an evidence-based model that seeks to address community violence through a public health lens. Our catchment area includes the neighborhoods immediately surrounding the Thomas Jefferson, James W. Johnson, and Robert F. Wagner NYCHA Housing Developments. Since 2016, SAVE has performed over 400 violence interruptions. In FY2O, SAVE was tapped by the Mayor's Office of Criminal Justice to serve as Social Distancing

Employer identification number

06-1711370

Form 990, Part III, Line 4a - Program Service Accomplishments

pandemic. This helps to keep NYC's Black and brown residents safe from coronavirus while also avoiding encounters with the NYPD that could quickly escalate. Our SAVE team also distributed thousands of meals and packs of personal protective equipment to GOSO and SAVE participants, their families, and East Harlem residents during the pandemic.

GOSOWorks

GOSOWorks, our most popular program where participants are prepared to acquire employment and are placed in internships subsidized by GOSO. In FY2O, we had 69 placements in GOSOWorks internships, with an additional 31 participants placed directly in permanent employment in essential industries.

ReEntry

GOSO's Re-entry Program keeps incarcerated and detained young men connected to GOSO. Through court advocacy, we help young men avoid incarceration and lengthy sentences, keeping families and communities intact. During a participants' sentence, we communicate with them and their families, keeping them connected and easing their transition back into the community upon their release. Once back home, we provide mental health supports, educational resources, and employment training to help them avoid further incarceration. The effects of GOSO's holistic services speak for themselves: our participants have sustained recidivism rates at or below 15%, an incredible achievement considering the annual rates of 67% among young men of a similar age group nationwide.

Form 990, Part VI, Line 11b - Form 990 Review Process

Management reviews a draft of the form 990 with the audit/finance committee and provides edits to the tax preparer. After this process is performed, the

Name of the organization	Employer identification number
Getting Out and Staying Out. Inc.	06-1711370

Form 990, Part VI, Line 11b - Form 990 Review Process (continued)

audit/finance committee reviews and approves the form 990 prior to being filed with the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The organization has a board approved conflicts of interest policy. Each board member must fill out an annual declaration stating they had no conflicts or identifying the nature of their interested party transactions.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Each year, the executive committee reviews comparable compensation based on a recognized study and reviews the performance of the President & CEO and Top Management to determine if the existing compensation falls within these ranges.

After a deliberation of this matter, a new proposed compensation and benefit package is voted on. The minutes of the board of directors note the approval of the President & CEO and Top Management's compensation for the upcoming year.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Financial statements are available upon request.

Form 990, Part IX, Line 11g Other Fees For Services

		(A)Total	_	(B) Program <u>Services</u>	(C) anagement General	(D) Fund- raising
Other professional fees	Total 💲	630,786. 630,786.	\$	261,632. 261,632.	\$ 291,582. 291,582.	\$ 77,572. 77,572.