2019 Exempt Org. Return
prepared for:

ASSISTANCE LEAGUE OF DOWNEY
11026 DOWNEY AVENUE
DOWNEY, CA 90241

Paddock Scheck Morse, Inc.
3300 Irvine Avenue, Ste. 270
Newport Beach, CA 92660

PADDOCK
SCHECK
MORSE, INC.

Certified Public Accountants
Business Consultants

January 7, 2021

ASSISTANCE LEAGUE OF DOWNEY
11026 DOWNEY AVENUE
DOWNEY, CA 90241

Good morning Judy:

Enclosed for your review:

Form 990	2019 Return of Organization Exempt from Income Tax
Form 199	2019 California Exempt Organization Return
Form RRF-1	2020 Registration/Renewal Fee Report

Each tax return or form listed above should be filed in accordance with the enclosed filing instructions.

Thank you for selecting our firm to prepare your income tax returns. We appreciate the opportunity of working with you.

Please be sure to call us if you have any questions.

Regards,

Gerald F. Scheck, CPA

3300 Irvine Ave., Suite 270
Newport Beach, CA 92660
(949) 833-9333 Fax (949) 833-3028

2019 FEDERAL FILING INSTRUCTIONS

ASSISTANCE LEAGUE OF DOWNEY **95-2822632**

ELECTRONICALLY FILED:

FORM 990 - 2019 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX

THE ABOVE TAX RETURN WILL BE ELECTRONICALLY FILED WITH THE INTERNAL REVENUE SERVICE UPON RECEIPT OF A SIGNED FORM 8879-EO - IRS E-FILE SIGNATURE AUTHORIZATION.

PAYMENT:

NO PAYMENT IS REQUIRED.

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2019, or fiscal year beginning 6/01 , 2019, and ending 5/31 , 20 2020

► **Do not send to the IRS. Keep for your records.**
► **Go to *www.irs.gov/Form8879EO* for the latest information.**

OMB No. 1545-1878

2019

Name of exempt organization

ASSISTANCE LEAGUE OF DOWNEY

Employer identification number

95-2822632

Name and title of officer

JUDITH FAUST TREASURER

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ►	[X]	**b Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b** 124,558.
2a Form 990-EZ check here ►	[ ]	**b Total revenue,** if any (Form 990-EZ, line 9)	**2b**
3a Form 1120-POL check here ►	[ ]	**b Total tax** (Form 1120-POL, line 22)	**3b**
4a Form 990-PF check here ►	[ ]	**b Tax based on investment income** (Form 990-PF, Part VI, line 5)	**4b**
5a Form 8868 check here ►	[ ]	**b Balance Due** (Form 8868, line 3c)	**5b**

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

[X] I authorize PADDOCK SCHECK MORSE, INC. to enter my PIN 36623 as my signature

ERO firm name

Enter five numbers, but do not enter all zeros

on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ► _____ Date ► _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN 33240417436

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ► GERALD F. SCHECK, CPA Date ► _____

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

2019 CALIFORNIA FILING INSTRUCTIONS

ASSISTANCE LEAGUE OF DOWNEY **95-2822632**

ELECTRONICALLY FILED:

FORM 199 - 2019 CALIFORNIA EXEMPT ORGANIZATION ANNUAL INFORMATION RETURN WILL BE ELECTRONICALLY FILED UPON RECEIPT OF A SIGNED FORM 8453-EO.

PAYMENT:

THERE IS A BALANCE DUE OF $10.

FORM TO FILE:

FORM 3586 - PAYMENT VOUCHER FOR E-FILED RETURNS

WHERE TO FILE:

FRANCHISE TAX BOARD
P.O. BOX 942857
SACRAMENTO, CA 94257-0531

WHEN TO FILE:

AS SOON AS POSSIBLE.

2019 CALIFORNIA FILING INSTRUCTIONS

ASSISTANCE LEAGUE OF DOWNEY **95-2822632**

FORM TO FILE:

FORM RRF-1 - REGISTRATION/RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

SIGNATURE:

SIGN AND DATE FORM RRF-1.

PAYMENT:

THERE IS A FEE DUE OF $50 WHICH IS PAYABLE BY APRIL 15, 2021. ATTACH A CHECK OR MONEY ORDER FOR THE FULL AMOUNT PAYABLE TO "ATTORNEY GENERAL'S REGISTRY OF CHARITABLE TRUSTS" AND WRITE THE CALIFORNIA CHARITY REGISTRATION NUMBER ON THE PAYMENT.

WHEN TO FILE:

ON OR BEFORE APRIL 15, 2021.

WHERE TO FILE:

REGISTRY OF CHARITABLE TRUSTS
P.O. BOX 903447
SACRAMENTO, CA 94203-4470

059

Date Accepted _____ **DO NOT MAIL THIS FORM TO THE FTB**

TAXABLE YEAR **2019**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name	Identifying number
ASSISTANCE LEAGUE OF DOWNEY	95-2822632

Part I Electronic Return Information (whole dollars only)

1	Total gross receipts (Form 199, line 4)	1	368,327.
2	Total gross income (Form 199, line 8)	2	138,009.
3	Total expenses and disbursements (Form 199, Line 9)	3	275,749.

Part II Settle Your Account Electronically for Taxable Year 2019

4 ☐ Electronic funds withdrawal **4a** Amount _____ **4b** Withdrawal date (mm/dd/yyyy) _____

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____

6 Account number _____ **7** Type of account: ☐ Checking ☐ Savings

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2019 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

Sign Here ▶ _____ (Signature of officer) _____ (Date) ▶ TREASURER (Title)

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2019 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign

ERO's signature	Date	Check if also paid preparer	Check if self-employed	ERO's PTIN
▶ GERALD F. SCHECK, CPA	1/07/21	X	☐	P00017436

Firm's name (or yours if self-employed) and address ▶ PADDOCK SCHECK MORSE, INC.
3300 IRVINE AVENUE, STE. 270
NEWPORT BEACH CA

Firm's FEIN 95-2848953

ZIP code 92660

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign

Paid preparer's signature	Date	Check if self-employed	Paid preparer's PTIN
▶		☐	

Firm's name (or yours if self-employed) and address ▶ _____

Firm's FEIN _____

ZIP code _____

For Privacy Notice, get FTB 1131 ENG/SP. FTB 8453-EO 2019

PADDOCK SCHECK MORSE, INC.
3300 IRVINE AVENUE, STE. 270
NEWPORT BEACH, CA 92660
(949) 833-9333

Client 366230
January 7, 2021

ASSISTANCE LEAGUE OF DOWNEY
11026 DOWNEY AVENUE
DOWNEY, CA 90241
(562) 869-0232

FEDERAL FORMS

Form 990	2019 Return of Organization Exempt from Income Tax
Schedule A	Organization Exempt Under Section 501(c)(3)
Schedule D	Schedule D
Schedule G	Fundraising or Gaming Activities
Schedule I	Grants and Other Assistance Inside U.S.
Schedule M	Non-Cash Contributions
Schedule O	Supplemental Information
Form 4562	Depreciation and Amortization
	Depreciation Schedules
Form 8879-EO	IRS e-file Signature Authorization

CALIFORNIA FORMS

Form 199	2019 California Exempt Organization Return
Form 3885 (199)	Depreciation and Amortization - Corp.
Form 3586	3586 Electronic Filing Payment Voucher
Form 8453-EO	California e-file Return Authorization for Exempt
Form RRF-1	2020 Registration/Renewal Fee Report
	California Depreciation Schedules

FEE SUMMARY

Preparation Fee

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

	2019	2018	DIFF
REVENUE			
CONTRIBUTIONS AND GRANTS	161,897	237,123	-75,226
PROGRAM SERVICE REVENUE	13,061	14,168	-1,107
INVESTMENT INCOME	2,373	1,245	1,128
OTHER REVENUE	-52,773	-46,297	-6,476
TOTAL REVENUE	124,558	206,239	-81,681
EXPENSES			
GRANTS AND SIMILAR AMOUNTS PAID	74,416	63,220	11,196
SALARIES, OTHER COMPEN., EMP. BENEFITS	10,122	11,117	-995
OTHER EXPENSES	177,760	171,686	6,074
TOTAL EXPENSES	262,298	246,023	16,275
NET ASSETS OR FUND BALANCES			
REVENUE LESS EXPENSES	-137,740	-39,784	-97,956
TOTAL ASSETS AT END OF YEAR	1,520,302	1,637,032	-116,730
TOTAL LIABILITIES AT END OF YEAR	63,499	42,489	21,010
NET ASSETS/FUND BALANCES AT END OF YEAR	1,456,803	1,594,543	-137,740

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

	2019	2018	DIFF
REVENUE			
GROSS RECEIPTS LESS RETURNS/ALLOWANCE	147,898	192,498	-44,600
INTEREST	2,373	1,245	1,128
GROSS RENTS	15,276	13,968	1,308
OTHER INCOME	40,883	50,207	-9,324
GROSS CONTRIBUTIONS, GIFTS, & GRANTS	161,897	237,123	-75,226
COST OF GOODS SOLD	230,318	269,021	-38,703
TOTAL INCOME	138,009	226,020	-88,011
EXPENSES AND DISBURSEMENTS			
CONTRIBUTIONS, GIFTS, GRANTS	74,416	63,220	11,196
OTHER SALARIES AND WAGES	10,122	11,117	-995
RENTS	106,342	89,859	16,483
DEPRECIATION AND DEPLETION	28,676	28,004	672
OTHER DEDUCTIONS	56,193	73,604	-17,411
TOTAL DEDUCTIONS	275,749	265,804	9,945
EXCESS OF RECEIPTS OVER DISBURSEMENTS	-137,740	-39,784	-97,956
FILING FEE			
FILING FEE	10	10	0
BALANCE DUE	10	10	0

Form **990**

(Rev. January 2020)

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► 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.

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 6/01 , 2019, and ending 5/31 , 2020

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C
ASSISTANCE LEAGUE OF DOWNEY
11026 DOWNEY AVENUE
DOWNEY, CA 90241

D Employer identification number
95-2822632

E Telephone number
(562) 869-0232

G Gross receipts $ 368,327.

F Name and address of principal officer:
SAME AS C ABOVE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ► DOWNEY.ASSISTANCELEAGUE.ORG

H(c) Group exemption number ►

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ►

L Year of formation: 1953

M State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: ASSISTANCE LEAGUE OF DOWNEY, ESTABLISHED IN 1953, IS A NON-PROFIT ORGANIZATION OF VOLUNTEERS WHO, IN ADDITION TO THEIR FUND-RAISING EFFORTS, PROVIDE FOR AND ADMINSTER VITAL, QUALITY SERVICES FOR PEOPLE IN NEED IN THE DOWNEY AREA.

2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	6
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	6
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	8
6	Total number of volunteers (estimate if necessary)	6	106
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0.

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	237,123.	161,897.
9	Program service revenue (Part VIII, line 2g)	14,168.	13,061.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,245.	2,373.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-46,297.	-52,773.
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	206,239.	124,558.

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	63,220.	74,416.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,117.	10,122.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ► 35,770.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	171,686.	177,760.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	246,023.	262,298.
19	Revenue less expenses. Subtract line 18 from line 12	-39,784.	-137,740.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	1,637,032.	1,520,302.
21	Total liabilities (Part X, line 26)	42,489.	63,499.
22	Net assets or fund balances. Subtract line 21 from line 20	1,594,543.	1,456,803.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date

▶ JUDITH FAUST — TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
GERALD F. SCHECK, CPA	GERALD F. SCHECK, CPA	1/07/21		P00017436

Firm's name ► PADDOCK SCHECK MORSE, INC.
Firm's address ► 3300 IRVINE AVENUE, STE. 270
NEWPORT BEACH, CA 92660

Firm's EIN ► 95-2848953
Phone no. (949) 833-9333

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

ASSISTANCE LEAGUE OF DOWNEY, ESTABLISHED IN 1953, IS A NON-PROFIT ORGANIZATION OF VOLUNTEERS WHO, IN ADDITION TO THEIR FUND-RAISING EFFORTS, PROVIDE FOR AND ADMINSTER VITAL, QUALITY SERVICES FOR PEOPLE IN NEED IN THE DOWNEY AREA.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 86,542. including grants of $) (Revenue $ 13,061.)

H.O.M.E. - THIS PROGRAM IS DESIGNED TO PROVIDE TEMPORARY LOW COST HOUSING FOR FAMILIES OF PATIENTS OR OUT-PATIENTS COMING FROM OUTSIDE THE AREA WHO ARE RECEIVING TREATMENT AT RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER. H.O.M.E. IS A TEN UNIT FACILITY WHICH IS OWNED AND OPERATED BY THE ASSISTANCE LEAGUE OF DOWNEY AND IS ADJACENT TO RANCHO LOS AMIGOS MEDICAL CENTER. 110 INDIVIDUALS WERE PROVIDED LODGING.

4b (Code:) (Expenses $ 39,615. including grants of $ 37,808.) (Revenue $)

OPERATION SCHOOL BELL - THIS PROGRAM PROVIDES CLOTHING AND PERSONAL HYGIENE PRODUCTS TO CHILDREN IN EXTREME NEED, THOSE WHO ARE STRUGGLING TO REMAIN IN SCHOOL AND ARE FACING PROBLEMS BECAUSE THEIR FAMILIES CANNOT AFFORD CLOTHES. SERVED MORE THAN 378 CHILDREN.

4c (Code:) (Expenses $ 20,000. including grants of $ 20,000.) (Revenue $)

SCHOLARSHIPS - THE STUDENT VOLUNTEER SCHOLARSHIP PROGRAM PROVIDES SCHOLARSHIPS RANGING FROM $1,000 TO $1,500 TO GRADUATING SENIORS IN THE DOWNEY UNIFIED SCHOOL DISTRICT HIGH SCHOOL DISTRICT WHO HAVE DEMONSTRATED OUTSTANDING VOLUNTEERISM DURING THEIR SCHOOL YEARS. - 16 RECIPIENTS

4d Other program services (Describe on Schedule O.) SEE SCHEDULE O

(Expenses $ 27,482. including grants of $ 15,333.) (Revenue $)

4e Total program service expenses ► 173,639.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If 'Yes,' complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If 'Yes,' complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If 'Yes,' complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If 'Yes,' complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If 'Yes,' complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI*	11 a	X	
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII*	11 b		X
c	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VIII*	11 c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX*	11 d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*	11 e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If 'Yes,' complete Schedule D, Part X*	11 f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI and XII*	12a		X
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*	12 b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E*	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I* (see instructions)	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H*	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If 'Yes,' complete Schedule I, Parts I and III*	22	X	
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
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If 'Yes,' complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete Schedule L, Part I*	25b		X
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		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If 'Yes,' complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If 'Yes,' complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If Yes,' complete Schedule L, Part IV*	28c		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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II*	32		X
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		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a 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		X
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		X
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	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	8		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	

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

			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** 8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	**2b**	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**		X
b	If 'Yes,' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation on Schedule O*	**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**		X
b	If 'Yes,' enter the name of the foreign country ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	**6a**		X
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).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**		X
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**		X
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year **12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state?	**13a**		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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 **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		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? If 'Yes,' see instructions and file Form 4720, Schedule N.	**15**		X
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**		X

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 X

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	6		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	6		
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			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4			X
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? SEE SCHEDULE O 6		X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? SEE SCHEDULE O 7a		X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? SEE SCH O 7b		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body? 8a		X	
b	Each committee with authority to act on behalf of the governing body? 8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If 'Yes,' provide the names and addresses on Schedule O* 9			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	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			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a		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* 12a		X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b		X	
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		X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official 15a			X
b	Other officers or key employees of the organization 15b			X
	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

17 List the states with which a copy of this Form 990 is required to be filed ► CA

18 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 ☒ Upon request ☐ Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 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 ► JUDITH FAUST 11026 DOWNEY AVENUE DOWNEY CA 90241-3711 (562) 869-0232

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.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CONNIE WETZSTEIN 2ND VP	4 0	X		X				0.	0.	0.
(2) ANN HUTCHINSON 1ST VP	4 0	X		X				0.	0.	0.
(3) THERESA FORD 3RD VP	4 0	X		X				0.	0.	0.
(4) JUDITH FAUST TREASURER	8 0	X		X				0.	0.	0.
(5) VIRGINIA RIVAS SECRETARY	4 0	X		X				0.	0.	0.
(6) DONNA LINDLEY PRESIDENT	4 0	X		X				0.	0.	0.
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organiza - tions below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Subtotal ►								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ►								0.	0.	0.
d Total (add lines 1b and 1c) ►								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ► 0

		Yes	No
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*	3		X
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 such individual*	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ► 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	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b	1,740.			
	c Fundraising events	1c	16,065.			
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	144,092.			
	g Noncash contributions included in lines 1a-1f	1g	137,652.			
	h **Total.** Add lines 1a-1f		161,897.			
Program Service Revenue		Business Code				
	2a FEES - HOME	721000	13,061.	13,061.		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f		13,061.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,373.			2,373.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross rents 6a	15,276.				
	b Less: rental expenses 6b					
	c Rental income or (loss) 6c	15,276.				
	d Net rental income or (loss)		15,276.			15,276.
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory 7a					
	b Less: cost or other basis and sales expenses 7b					
	c Gain or (loss) 7c					
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including $ 16,065. of contributions reported on line 1c). See Part IV, line 18 8a	27,085.				
	b Less: direct expenses 8b	13,451.				
	c Net income or (loss) from fundraising events		13,634.			13,634.
	9a Gross income from gaming activities. See Part IV, line 19 9a					
	b Less: direct expenses 9b					
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances 10a	147,898.				
	b Less: cost of goods sold 10b	230,318.				
	c Net income or (loss) from sales of inventory		-82,420.			-82,420.
Miscellaneous Revenue		Business Code				
	11a OTHER REVENUE		737.			737.
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d		737.			
	12 **Total revenue.** See instructions		124,558.	13,061.	0.	-50,400.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	35,333.	35,333.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	39,083.	39,083.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
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	10,122.	8,854.	757.	511.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	11,000.	2,464.	5,092.	3,444.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion				
13 Office expenses	8,366.	6,231.	1,274.	861.
14 Information technology				
15 Royalties				
16 Occupancy	106,342.	42,187.	38,269.	25,886.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,112.		1,260.	852.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	28,676.	28,676.		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MISCELLANEOUS	13,092.	8,905.	2,498.	1,689.
b POSTAGE AND SHIPPING	3,649.		2,177.	1,472.
c PROGRAM SUPPLIES	1,906.	1,906.		
d FOOD & ENTERTAINMENT	1,161.		693.	468.
e All other expenses	1,456.		869.	587.
25 **Total functional expenses.** Add lines 1 through 24e	262,298.	173,639.	52,889.	35,770.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash — non-interest-bearing	156,190.	1	49,574.
	2	Savings and temporary cash investments	376,052.	2	382,675.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	58,500.	8	48,254.
	9	Prepaid expenses and deferred charges	5,442.	9	6,961.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 2,292,805.			
	b	Less: accumulated depreciation — 10b: 1,259,967.	1,040,848.	10c	1,032,838.
	11	Investments — publicly traded securities		11	
	12	Investments — other securities. See Part IV, line 11		12	
	13	Investments — program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	1,637,032.	16	1,520,302.
Liabilities	17	Accounts payable and accrued expenses	42,489.	17	63,499.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	42,489.	26	63,499.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ► [X] and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	1,594,543.	27	1,456,803.
	28	Net assets with donor restrictions		28	
		Organizations that do not follow FASB ASC 958, check here ► [ ] and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	1,594,543.	32	1,456,803.
	33	Total liabilities and net assets/fund balances	1,637,032.	33	1,520,302.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	124,558.
2	Total expenses (must equal Part IX, column (A), line 25)	2	262,298.
3	Revenue less expenses. Subtract line 2 from line 1	3	-137,740.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,594,543.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,456,803.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	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?	3a		X
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	3b		

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.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization	Employer identification number
ASSISTANCE LEAGUE OF DOWNEY	95-2822632

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).**

7 ☐ 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.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☒ 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 June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ 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.

a ☐ **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.**

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.**

d ☐ **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.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, 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).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(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.)

Section A. Public Support

Calendar 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.')						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
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)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2018 Schedule A, Part II, line 14 15 %

16a **33-1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box 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 ► ☐

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ► ☐

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ► ☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar 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.')	244,669.	198,186.	242,193.	202,183.	145,832.	1,033,063.
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	18,776.	72,710.	67,021.	54,422.	56,211.	269,140.
3 Gross receipts from activities that are not an unrelated trade or business under section 513	176,827.	174,556.	193,322.	220,634.	15,276.	780,615.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 **Total.** Add lines 1 through 5	440,272.	445,452.	502,536.	477,239.	217,319.	2,082,818.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 **Public support.** (Subtract line 7c from line 6.)						2,082,818.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6	440,272.	445,452.	502,536.	477,239.	217,319.	2,082,818.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,585.	1,192.	1,134.	1,245.	2,373.	7,529.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	1,585.	1,192.	1,134.	1,245.	2,373.	7,529.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI		1,214.	467.	903.	737.	3,321.
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	441,857.	447,858.	504,137.	479,387.	220,429.	2,093,668.

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	99.48 %
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	99.61 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2019** (line 10c, column (f), divided by line 13, column (f))	17	0.36 %
18	Investment income percentage from **2018** Schedule A, Part III, line 17	18	0.27 %

19a **33-1/3% support tests—2019.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒

b **33-1/3% support tests—2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check 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		
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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If 'Yes,' answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If 'Yes,' describe in* ***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		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? *If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If 'Yes,' describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If 'Yes,' explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	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		
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		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If 'Yes,' provide detail in* ***Part VI****.*	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in* ***Part VI****.*	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If 'Yes,' provide detail in* ***Part VI****.*	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If 'Yes,' answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**	
b	A family member of a person described in (a) above?	**11b**	
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**	

Section B. Type I Supporting Organizations

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

Section 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**	

Section 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**	

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions).***

- **a** ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*
- **c** ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a government entity (see instructions).*

		Yes	No
2	Activities Test. ***Answer (a) and (b) below.***		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If 'Yes,' then in* ***Part VI identify those supported 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**	
b	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.***		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	**3a**	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If 'Yes,' describe in* ***Part VI*** *the role played by the organization in this regard.*	**3b**	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A — Adjusted Net Income

			(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	8		

Section B — Minimum Asset Amount

			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

Section C — Distributable Amount

				Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D — Distributions		**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval 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 organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2019 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E — Distribution Allocations (see instructions)		**(i) Excess Distributions**	**(ii) Underdistributions Pre-2019**	**(iii) Distributable Amount for 2019**
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. 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.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

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

PART III, LINE 12 - OTHER INCOME

NATURE AND SOURCE	2019	2018	2017	2016	2015
OTHER REVENUE	$ 737.	$ 903.	$ 467.	$ 1,214.	
TOTAL	$ 737.	$ 903.	$ 467.	$ 1,214.	$ 0.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

ASSISTANCE LEAGUE OF DOWNEY

Employer identification number

95-2822632

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
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 donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

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)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
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 historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

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, handling 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 conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ►$

(ii) Assets included in Form 990, Part X ►$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ►$

b Assets included in Form 990, Part X ►$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange program
- e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a 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					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ► _____ %
- b Permanent endowment ► _____ %
- c Term endowment ► _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations	3a(i)		
(ii) Related organizations	3a(ii)		
b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		603,348.		603,348.
b Buildings		1,209,746.	937,001.	272,745.
c Leasehold improvements		409,750.	264,565.	145,185.
d Equipment		52,173.	44,325.	7,848.
e Other		17,788.	14,076.	3,712.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ►				1,032,838.

Part VII Investments — Other Securities. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 12.)* ►		

Part VIII Investments — Program Related. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 13.)* ►		

Part IX Other Assets. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 15.)* ►	

Part X Other Liabilities.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 25.)* ►	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . . . . . SEE PART XIII. [X]

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. N/A
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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines **2a** through **2d**		2e	
3	Subtract line **2e** from line **1**		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines **4a** and **4b**		4c	
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines **2a** through **2d**		2e	
3	Subtract line **2e** from line **1**		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines **4a** and **4b**		4c	
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*		5	

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

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA PROVIDE ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN ORGANIZATION IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN. MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AND BELIEVES THAT ALL OF THE POSITIONS TAKEN BY THE CHAPTER IN ITS FEDERAL AND STATE EXEMPT ORGANIZATION TAX RETURNS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION.

Part XIII Supplemental Information *(continued)*

PART X - FASB ASC 740 FOOTNOTE (CONTINUED)

THE CHAPTER'S FEDERAL RETURNS ARE SUBJECT TO EXAMINATION BY FEDERAL TAXING AUTHORITIES, GENERALLY FOR THREE YEARS AFTER THEY ARE FILED AND THE CHAPTER'S STATE RETURNS ARE SUBJECT TO EXAMINATION BY THE STATE TAXING AUTHORITIES, GENERALLY FOR FOUR YEARS AFTER THEY ARE FILED.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2019

Open to Public Inspection

Name of the organization
ASSISTANCE LEAGUE OF DOWNEY

Employer identification number
95-2822632

Part I **Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a [X] Mail solicitations
- b [ ] Internet and email solicitations
- c [ ] Phone solicitations
- d [X] In-person solicitations
- e [ ] Solicitation of non-government grants
- f [ ] Solicitation of government grants
- g [X] Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ..... [ ] Yes [X] No

b If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total ►							0.

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

Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 CHRISTMAS BRUN (event type)	(b) Event #2 IRIDESCENT BAL (event type)	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1 Gross receipts	28,785.	13,765.		42,550.
	2 Less: Contributions	6,120.	9,945.		16,065.
	3 Gross income (line 1 minus line 2)	22,665.	3,820.		26,485.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	6,452.	5,941.		12,393.
	8 Entertainment	100.			100.
	9 Other direct expenses	885.	73.		958.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ►				13,451.
	11 Net income summary. Subtract line 10 from line 3, column (d) ►				13,034.

Part III Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
REVENUE	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ☐ No %	☐ Yes ☐ No %	☐ Yes ☐ No %	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ►				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ►				

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If 'No,' explain:

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If 'Yes,' explain:

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 formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ 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 retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

ASSISTANCE LEAGUE OF DOWNEY

Employer identification number

95-2822632

Part I General Information on Grants and Assistance

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? ☐ **Yes** ☒ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered 'Yes' on 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CHILDREN'S DENTAL HEALTH CLIN 2801 ATLANTIC AVENUE LONG BEACH, CA 90801	95-2111154		14,000.	0.			DENTAL CARE
(2) DOWNEY HIGH SCHOOL 11040 BROOKSHIRE AVE DOWNEY, CA 90241	95-6006586		10,000.	0.			SCHOLARSHIPS
(3) WARREN HIGH SCHOOL 8141 DE PALMA ST DOWNEY, CA 90241	95-6006586		10,000.	0.			SCHOLARSHIPS
(4)							
(5)							
(6)							
(7)							
(8)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ► 2

3 Enter total number of other organizations listed in the line 1 table ► 1

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

	(a) Type of grant or assistance	(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	CLOTHING, SHOES, BACKPACKS	300		37,808.	PURCHASE PRICE	CLOTHING, SHOES, BACKPACKS
2	HYGIENE KITS	300		1,275.	PURCHASE PRICE	HYGIENE KITS
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ► **Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.**
- ► **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

Name of the organization

ASSISTANCE LEAGUE OF DOWNEY

Employer identification number

95-2822632

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art — Works of art				
2	Art — Historical treasures				
3	Art — Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		137,652.	MARKET VALUE
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities — Publicly traded				
10	Securities — Closely held stock				
11	Securities — Partnership, LLC, or trust interests				
12	Securities — Miscellaneous				
13	Qualified conservation contribution — Historic structures				
14	Qualified conservation contribution — Other				
15	Real estate — Residential				
16	Real estate — Commercial				
17	Real estate — Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (_____)				
26	Other ► (_____)				
27	Other ► (_____)				
28	Other ► ( )				

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If 'Yes,' describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If 'Yes,' describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
► Attach to Form 990 or 990-EZ.
► Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

ASSISTANCE LEAGUE OF DOWNEY

Employer identification number

95-2822632

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

DENTAL PROGRAM - PROVIDES LOW-COST DENTAL CARE TO CHILDREN IN GRADES K-12 IN THE DOWNEY UNIFIED SCHOOL DISTRICT WHO ARE IDENTIFIED BY AN ANNUAL ELEMENTARY SCHOOL SCREENING OR BY THE REFERRAL OF THE SCHOOL NURSE. THESE ARE CHILDREN WHO DO NOT QUALIFY FOR MEDICAL AID NOR ARE THEY COVERED BY PRIVATE INSURANCE. TOTAL SERVED - 75

OTHER PROGRAM SERVICES

CHRISTMAS DISTRIBUTION - PROVIDES HOLIDAY GIFTS TO THE NEEDY IN THE DOWNEY COMMUNITY. GIFTS ARE PURCHASED AND WRAPPED FOR PEOPLE OF ALL AGES AND DISTRIBUTED TO A VARIETY OF FACILITIES INCLUDING HEALTH CARE, HOMELESS AND BATTERED WOMEN SHELTERS PLUS DISADVANTAGED CHILDREN. 539 RECIPIENTS.

GLAMOUR GOWNS - THIS IS AN ASSISTEENS PROGRAM THAT PROVIDES HELP WITH APPROPRIATE ATTIRE FOR SCHOOL ACTIVITIES SUCH AS HOMECOMING, PROM AND OTHER FORMAL OCCASIONS. THE INDIVIDUALS ARE PROVIDED WITH A COMPLETE OUTFIT INCLUDING JEWELRY AND SHOES IF NEEDED. THIS GIVES MANY YOUNG PEOPLE AN OPPORTUNITY TO PARTICIPATE IN AN IMPORTANT SOCIAL PART OF HIGH SCHOOL. 50 INDIVIDUALS WERE SERVED.

STORYTIME FESTIVAL

FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

THE CORPORATION HAS MEMBERS WHO ARE CALLED VOTING MEMBERS AND MAY ALSO HAVE NON VOTING MEMBERS.

Name of the organization: ASSISTANCE LEAGUE OF DOWNEY

Employer identification number: 95-2822632

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

ANNUALLY, THE VOTING MEMBERS ELECT A NOMINATION COMMITTEE WHICH PRESENTS A SLATE OF NOMINEES FOR OFFICES ON THE BOARD. A MONTH BEFORE THE ELECTION THE SLATE OF NOMINEES IS PRESENTED TO THE MEMBERSHIP. THERE IS A PETITION PROCESS FOR AN ADDITIONAL NOMINEE FOR AN OFFICE ON THE BOARD. THE ELECTION IS BY VOICE VOTE, EXCEPT WHEN A NOMINATING PETITION HAS BEEN RECEIVED, IN WHICH EVENT THE CONTESTED OFFICE IS BY BALLOT.

FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS

THE DECISIONS OF THE BOARD ARE PRESENTED BY MOTION TO THE MEMBERS AT GENERAL MEETINGS. THE MOTIONS ARE VOTED ON BY VOTING MEMBERS.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

A COMPLETE COPY OF THE DRAFT OF THE FORM 990 IS PRESENTED BY THE TREASURER TO THE ENTIRE BOARD AT A REGULAR BOARD MEETING. AMPLE TIME IS ALLOWED FOR EXAMINATION OF THE DOCUMENT AND FOR ANY QUESTIONS OR COMMENTS BY THE BOARD MEMBERS. A VOTE IS THEN TAKEN TO ACCEPT THE 990 AS PRESENTED. THE TREASURER THEN NOTIFIES THE CPA'S OFFICE THAT THEY MAY ELECTRONICALLY FILE THE DOCUMENT.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

AT THE ANNUAL BOARD RETREAT, THE POLICIES ARE REVIEWED.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE FORMS 1023, 990, ARTICLES OF INCORPORATION, BYLAWS, POLICIES, AND FINANCIAL STATEMENTS AND OTHER ORIGINATING DOCUMENTS AND FINANCIAL INFORMATION ARE AVAILABLE UPON REQUEST DURING REGULAR BUSINESS AT THE ADDRESS OF RECORDS.

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

► Attach to your tax return.

► Go to *www.irs.gov/Form4562* for instructions and the latest information.

OMB No. 1545-0172

2019

Attachment Sequence No. **179**

Name(s) shown on return

ASSISTANCE LEAGUE OF DOWNEY

Identifying number

95-2822632

Business or activity to which this form relates

FORM 990/990-PF

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instrs	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12 ►	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	34,830.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ► ☐		

Section B — Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs		S/L	
h	Residential rental property			27.5 yrs	MM	S/L	
				27.5 yrs	MM	S/L	
i	Nonresidential real property			39 yrs	MM	S/L	
					MM	S/L	

Section C — Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs		S/L	
c	30-year			30 yrs	MM	S/L	
d	40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	34,830.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 990/990-PF																
BUILDINGS																
1	BUILDING-HOME	11/20/97		729,011							729,011	447,823	S/L	35		20,829
2	PATIO	8/05/99		1,200							1,200	675	S/L	35		34
70	BEAM	8/13/14		11,689							11,689	1,614	S/L	35		334
71	ATRIUM ENCLOSURE	8/15/14		1,790							1,790	247	S/L	35		51
	TOTAL BUILDINGS			743,690		0	0	0	0	0	743,690	450,359				21,248
CH HOUSE - BUILD IMP																
3	FRENCH DOORS	6/08/88		5,546							5,546	5,546	S/L	15		0
4	FIRE ALARM	4/24/89	2/07/20	920							920	920	S/L	15		0
5	ROOFING REPAIRS	1/25/97		1,575							1,575	1,575	S/L	15		0
6	DOORS	7/26/05		7,171							7,171	6,612	S/L	15		478
58	ROOF	2/09/08		15,630							15,630	11,809	S/L	15		1,042
60	FRONT/BACK BALCONY	3/16/09		91,220							91,220	26,494	S/L	35		2,606
61	TRELLIS PATIO COVER	2/11/09		6,300							6,300	4,340	S/L	15		420
62	PATIO COVER	3/16/09		24,309							24,309	7,066	S/L	35		695
65	CARRIAGE HOUSE BATHROOM	9/09/13		10,328							10,328	1,696	S/L	35		295
74	SIDE GATE	3/07/17		1,360							1,360	205	S/L	15		91
77	SHED ROOF	12/01/19		5,500							5,500		S/L	35		79
78	FIRE AND SECURITY ALARM	2/07/20		21,320							21,320		S/L	15		474
	TOTAL CH HOUSE - BUILD IMP			191,179		0	0	0	0	0	191,179	66,263				6,180

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
CHAPTER HOUSE																
7	BLDG. 7749 FLORENCE	10/09/86		380,000							380,000	379,486	S/L	31.6		0
	TOTAL CHAPTER HOUSE			380,000		0	0	0	0	0	380,000	379,486				0
FURNITURE AND FIXTURES																
8	RCA TV - 1 - HOME	11/20/97	6/01/19	324							324	324	S/L	7		0
9	WASHER/DRYER - HOME	11/20/97	6/01/19	1,485							1,485	1,485	S/L	7		0
10	VENDING SOAP DISP - HOME	11/20/97	6/01/19	387							387	387	S/L	7		0
11	VACUUM - SANIT 12 - HOME	11/20/97		257							257	257	S/L	7		0
12	QUEEN SOFA - 2 - HOME	11/20/97		893							893	893	S/L	7		0
13	TREES/FLORALS - HOME	12/08/97		635							635	635	S/L	7		0
14	CREDENZA - 10 - HOME	12/10/97		2,722							2,722	2,722	S/L	7		0
15	HYDE PARK BENCH - 2 - HOM	4/10/98		1,152							1,152	1,152	S/L	7		0
16	COPIER - HOME	2/19/98		430							430	430	S/L	7		0
17	PATIO TABLE	8/12/99		938							938	938	S/L	7		0
63	TUFF SHED	8/19/10		3,076							3,076	1,794	S/L	15		205
64	CONCRETE SLAB	8/26/10		2,475							2,475	1,444	S/L	15		165
69	ALARM	7/30/13		2,418							2,418	2,013	S/L	7		345
73	REFRIGERATORS-7	7/23/16		1,542							1,542	624	S/L	7		220
76	OUTDOOR LIGHTING	1/25/19		1,250							1,250	60	S/L	7		179
	TOTAL FURNITURE AND FIXTURE			19,984		0	0	0	0	0	19,984	15,158				1,114
IMPROVEMENTS																

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
18	BLOCK WALL	4/25/88		3,500							3,500	3,500	S/L	15		0
19	ASPHALT DRIVEWAY	4/27/88		5,000							5,000	5,000	S/L	15		0
20	IMPROVEMENTS	4/27/88		20,574							20,574	20,574	S/L	15		0
21	LANDSCAPING	5/12/88		14,750							14,750	14,750	S/L	15		0
22	IMPROVEMENTS	4/25/88		1,212							1,212	1,212	S/L	15		0
23	STUCCO BLOCK WALLS	6/26/88		1,550							1,550	1,550	S/L	15		0
24	IRON GATE	7/26/88		6,834							6,834	6,834	S/L	15		0
25	ASPHALT PAVEMENT	6/09/88		25,875							25,875	25,875	S/L	15		0
26	CHAIN LINK FENCE	6/14/88		898							898	898	S/L	15		0
27	SPRINKLERS	6/04/89		800							800	800	S/L	15		0
28	PARKING LOT IMPROVEMENTS	6/08/88		1,440							1,440	1,440	S/L	15		0
29	BRICK WORK	9/13/89		3,145							3,145	3,145	S/L	15		0
30	SPRINKLER SYSTEM	10/28/89		6,900							6,900	6,900	S/L	15		0
31	CONCRETE WALL	7/10/90		2,995							2,995	2,995	S/L	15		0
32	PAVING	4/07/92		1,500							1,500	1,500	S/L	15		0
33	PIPES/OUTDOOR PLUMBING	11/17/94		2,813							2,813	2,813	S/L	15		0
34	GRADE/SEAL PARKING LOT	4/28/95		1,490							1,490	1,490	S/L	15		0
35	DRIVEWAY	2/13/97		6,722							6,722	6,722	S/L	15		0
72	CABINETS-HOME	7/15/16		2,005							2,005	391	S/L	15		134
	TOTAL IMPROVEMENTS			110,003		0	0	0	0	0	110,003	108,389				134
LAND																
56	LAND	10/09/86		65,348							65,348					0
	TOTAL LAND			65,348		0	0	0	0	0	65,348	0				0

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	LAND - CHAPTER HOUSE															
36	LAND	10/09/86		538,000							538,000					0
	TOTAL LAND - CHAPTER HOUSE			538,000		0	0	0	0	0	538,000	0				0
	MACHINERY AND EQUIPMENT															
37	BENCH	7/08/87		612							612	612	S/L	7		0
38	FIRE ALARM	5/27/88		9,291							9,291	9,291	S/L	7		0
39	LIGHT FIXTURES	3/10/88		2,115							2,115	2,115	S/L	7		0
40	FURNITURE	4/21/88		229							229	229	S/L	7		0
41	SPRINKLERS	5/18/88		800							800	799	S/L	7		0
42	DONATED DESK	5/31/89		250							250	250	S/L	7		0
43	DONATED DESK	5/31/89		250							250	250	S/L	7		0
44	DRYER	6/28/90		302							302	302	S/L	7		0
45	VARIOUS - TS	12/27/93		936							936	936	S/L	7		0
46	HALL TABLE	6/17/93		566							566	566	S/L	7		0
47	DISHWASHER	1/18/94		412							412	412	S/L	7		0
48	LIGHT FIXTURES	5/19/94		180							180	180	S/L	7		0
	TOTAL MACHINERY AND EQUIPME			15,943		0	0	0	0	0	15,943	15,942				0
	THRIFT SHOP															
49	BLDG. - 11026 DOWNEY AVE	4/01/80		86,056							86,056	85,908	S/L	20		0
50	BUILDING IMPROVEMENTS	4/25/88		4,406							4,406	4,341	S/L	31.6		0
51	BUILDING IMPROVEMENTS	5/12/88		480							480	466	S/L	31.6		0
52	BUILDING IMPROVEMENTS	1/31/92		35,011							35,011	30,394	S/L	31.6		1,108
53	DUCTWORK/PLATFORMS-7749	3/10/98		3,750							3,750	3,750	S/L	15		0

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
54	NEW ROOF - 7749	3/17/98		9,970							9,970	9,970	S/L	15		0
55	FACADE IMPROVEMENT	5/31/01		29,304							29,304	29,304	S/L	15		0
68	THRIFT SHOP REMODEL	4/14/14		26,567							26,567	4,345	S/L	31.6		841
	TOTAL THRIFT SHOP			195,544		0	0	0	0	0	195,544	168,478				1,949
	TS - FURN AND EQUIP															
57	TUFF SHED	3/11/08		1,991							1,991	1,991	S/L	7		0
59	GAS/ELECTRIC UNITS - 2	10/14/08		9,000							9,000	6,400	S/L	15		600
66	FIXTURES-VICTORY DISPLAY	4/10/14		7,780							7,780	5,740	S/L	7		1,111
67	CARPET	3/08/14		11,059							11,059	8,295	S/L	7		1,580
75	AIR CONDITIONER - TS	7/08/17		6,400							6,400	1,752	S/L	7		914
	TOTAL TS - FURN AND EQUIP			36,230		0	0	0	0	0	36,230	24,178				4,205
	TOTAL DEPRECIATION			2,295,921		0	0	0	0	0	2,295,921	1,228,253				34,830
	GRAND TOTAL DEPRECIATION			2,295,921		0	0	0	0	0	2,295,921	1,228,253				34,830
	DEPRECIATION ASSETS SOLD			3,116		0	0	0	0	0	3,116	3,116				0
	DEPR REMAINING ASSETS			2,292,805		0	0	0	0	0	2,292,805	1,225,137				34,830

Voucher at bottom of page.

DO NOT MAIL A PAPER COPY OF THE CORPORATE OR EXEMPT ORGANIZATION TAX RETURN WITH THE PAYMENT VOUCHER.

If the amount of payment is zero, do not mail this voucher.

WHERE TO FILE: Using black or blue ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number, FEIN, CA SOS file number and "2019 FTB 3586" on the check or money order. Detach voucher below. Enclose, but **do not** staple, payment with voucher and mail to:

FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE: **Corporations – File and Pay by the 15th day of the 4th month following the close of the taxable year.**

S corporations – File and Pay by the 15th day of the 3rd month following the close of the taxable year.

Exempt organizations – File and Pay by the 15th day of the 5th month following the close of the taxable year.

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

ONLINE SERVICES: Corporations can make payments online using Web Pay for Businesses. Corporations can make an immediate payment or schedule payments up to a year in advance. Go to **ftb.ca.gov/pay** for more information.

DETACH HERE IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER DETACH HERE

CAUTION: You may be required to pay electronically, see instructions.

TAXABLE YEAR **2019**

Payment Voucher for Corporations and Exempt Organizations e-filed Returns

CALIFORNIA FORM **3586 (e-file)**

0666925 ASSI 95-2822632 000000000000 19 FORM 3
TYB 06-01-19 TYE 05-31-20
ASSISTANCE LEAGUE OF DOWNEY
JUDITH FAUST
11026 DOWNEY AVENUE
DOWNEY CA 90241

(562) 869-0232

AMOUNT OF PAYMENT 10.

TAXABLE YEAR **2019**

California Exempt Organization Annual Information Return

FORM **199**

Calendar Year 2019 or fiscal year beginning (mm/dd/yyyy) 6/01/2019 , and ending (mm/dd/yyyy) 5/31/2020 .

Corporation/Organization name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925
Additional information. See instructions.	FEIN 95-2822632
Street address (suite or room)	PMB no.
11026 DOWNEY AVENUE	
City / State / Zip code	
DOWNEY / CA / 90241	
Foreign country name / Foreign province/state/county / Foreign postal code	

A First Return . . . . . ☐ Yes ☒ No

B Amended Return . . . . . ● ☐ Yes ☒ No

C IRC Section 4947(a)(1) trust . . . . . ☐ Yes ☒ No

D Final Information Return?
● ☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized
Enter date: (mm/dd/yyyy) ● _____

E Check accounting method:
1 ☐ Cash 2 ☒ Accrual 3 ☐ Other

F Federal return filed? 1 ● ☐ 990T 2 ● ☐ 990-PF 3 ● ☐ Sch H (990)
4 ☐ Other 990 series

G Is this a group filing? See instructions . . . . . ● ☐ Yes ☒ No

H Is this organization in a group exemption . . . . . ☐ Yes ☒ No
If "Yes," what is the parent's name?

I Did the organization have any changes to its guidelines not reported to the FTB? See instructions . . . . . ● ☐ Yes ☒ No

J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions . . . . . ● ☐ Yes ☒ No

K Is the organization exempt under R&TC Section 23701g? . . . ● ☐ Yes ☒ No
If "Yes," enter the gross receipts from nonmember sources . . . . . $

L If organization is a public charity exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required . . . . . ● ☐

M Is the organization a Limited Liability Company? . . . . . ● ☐ Yes ☒ No

N Did the organization file Form 100 or Form 109 to report taxable income? . . . . . ● ☐ Yes ☒ No

O Is the organization under audit by the IRS or has the IRS audited in a prior year? . . . . . ● ☐ Yes ☒ No

P Is federal Form 1023/1024 pending? . . . . . ☐ Yes ☒ No
Date filed with IRS _____

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8 . . . ●		1	206,430.
	2	Gross dues and assessments from members and affiliates . . . ●		2	
	3	Gross contributions, gifts, grants, and similar amounts received . . . ●		3	161,897.
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. **This line must be completed.** If the result is less than $50,000, see General Information B . . ●		4	368,327.
	5	Cost of goods sold . . . ●	5 230,318.		
	6	Cost or other basis, and sales expenses of assets sold . . . ●	6		
	7	Total costs. Add line 5 and line 6 . . .		7	230,318.
	8	Total gross income. Subtract line 7 from line 4 . . . ●		8	138,009.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18 . . . ●		9	275,749.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 . . . ●		10	-137,740.
Filing Fee	11	Total payments . . . ●		11	
	12	Use tax. See General Information K . . . ●		12	
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11 . . . ●		13	
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12 . . . ●		14	
	15	Filing fee $10 or $25. See General Information F . . .		15	10.
	16	Penalties and Interest. See General Information J . . .		16	
	17	**Balance due.** Add line 12, line 15, and line 16. Then subtract line 11 from the result . . . ◉		17	10.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer ▶ | Title: TREASURER | Date: | ● Telephone: (562) 869-0232

Paid Preparer's Use Only

Preparer's signature ▶ GERALD F. SCHECK, CPA | Date: 1/07/21 | Check if self-employed ▶ ☐ | ● PTIN: P00017436

Firm's name (or yours, if self-employed) and address ▶ PADDOCK SCHECK MORSE, INC.
3300 IRVINE AVENUE, STE. 270
NEWPORT BEACH, CA 92660

● Firm's FEIN: 95-2848953

● Telephone: (949) 833-9333

May the FTB discuss this return with the preparer shown above? See instructions . . . ● ☒ Yes ☐ No

Part II **Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts – complete Part II or furnish substitute information.**

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	1	147,898.
	2	Interest	2	2,373.
	3	Dividends	3	
	4	Gross rents	4	15,276.
	5	Gross royalties	5	
	6	Gross amount received from sale of assets (See Instructions)	6	
	7	Other income. Attach schedule SEE STATEMENT 1	7	40,883.
	8	**Total** gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Page 1, Part I, line 1	8	206,430.
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule SEE STATEMENT 2	9	74,416.
	10	Disbursements to or for members	10	
	11	Compensation of officers, directors, and trustees. Attach schedule SEE STMT 3	11	0.
	12	Other salaries and wages	12	10,122.
	13	Interest	13	
	14	Taxes	14	
	15	Rents	15	106,342.
	16	Depreciation and depletion (See instructions)	16	28,676.
	17	Other Expenses and Disbursements. Attach schedule SEE STATEMENT 4	17	56,193.
	18	**Total** expenses and disbursements. Add line 9 through line 17. Enter here and on Page 1, Part I, line 9	18	275,749.

Schedule L Balance Sheet

Assets		Beginning of taxable year (a)	Beginning of taxable year (b)	End of taxable year (c)	End of taxable year (d)
1	Cash		532,242.		432,249.
2	Net accounts receivable				
3	Net notes receivable				
4	Inventories		58,500.		48,254.
5	Federal and state government obligations				
6	Investments in other bonds				
7	Investments in stock				
8	Mortgage loans				
9	Other investments. Attach schedule				
10a	Depreciable assets	1,665,753.		1,689,457.	
b	Less accumulated depreciation	1,228,253.	437,500.	1,259,967.	429,490.
11	Land		603,348.		603,348.
12	Other assets. Attach schedule STM 5		5,442.		6,961.
13	**Total assets**		1,637,032.		1,520,302.
Liabilities and net worth					
14	Accounts payable		42,489.		63,499.
15	Contributions, gifts, or grants payable				
16	Bonds and notes payable				
17	Mortgages payable				
18	Other liabilities. Attach schedule				
19	Capital stock or principal fund		1,594,543.		1,456,803.
20	Paid-in or capital surplus. Attach reconciliation				
21	Retained earnings or income fund				
22	**Total liabilities and net worth**		1,637,032.		1,520,302.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000

1	Net income per books	-137,740.	7	Income recorded on books this year not included in this return. Attach schedule	
2	Federal income tax		8	Deductions in this return not charged against book income this year. Attach schedule	
3	Excess of capital losses over capital gains				
4	Income not recorded on books this year. Attach schedule				
5	Expenses recorded on books this year not deducted in this return. Attach schedule		9	Total. Add line 7 and line 8	
6	Total. Add line 1 through line 5	-137,740.	10	Net income per return. Subtract line 9 from line 6	-137,740.

TAXABLE YEAR

2019

Corporation Depreciation and Amortization

CALIFORNIA FORM

3885

Attach to Form 100 or Form 100W. FORM 199

Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
BUILDING-HOME	11/20/1997	729,011.	447,823.	S/L	35	20,829.	
PATIO	8/05/1999	1,200.	675.	S/L	35	34.	
FRENCH DOORS	6/08/1988	5,546.	5,546.	S/L	15		
FIRE ALARM	4/24/1989	920.	920.	S/L	15		
ROOFING REPAIRS	1/25/1997	1,575.	1,575.	S/L	15		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15	34,830.	

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22	

TAXABLE YEAR

2019

CALIFORNIA FORM

3885

Corporation Depreciation and Amortization

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Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

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1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
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4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property (elected IRC Section 179 cost)	7	

8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
DOORS	7/26/2005	7,171.	6,612.	S/L	15	478.	
BLDG. 7749 FLOR	10/09/1986	380,000.	379,486.	S/L	32		
RCA TV - 1 - HO	11/20/1997	324.	324.	S/L	7		
WASHER/DRYER -	11/20/1997	1,485.	1,485.	S/L	7		
VENDING SOAP DI	11/20/1997	387.	387.	S/L	7		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22	

TAXABLE YEAR **2019**

CALIFORNIA FORM **3885**

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W. FORM 199

Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
VACUUM - SANIT	11/20/1997	257.	257.	S/L	7		
QUEEN SOFA - 2	11/20/1997	893.	893.	S/L	7		
TREES/FLORALS -	12/08/1997	635.	635.	S/L	7		
CREDENZA - 10 -	12/10/1997	2,722.	2,722.	S/L	7		
HYDE PARK BENCH	4/10/1998	1,152.	1,152.	S/L	7		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22	

TAXABLE YEAR

2019

CALIFORNIA FORM

3885

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W. FORM 199

Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
COPIER - HOME	2/19/1998	430.	430.	S/L	7		
PATIO TABLE	8/12/1999	938.	938.	S/L	7		
BLOCK WALL	4/25/1988	3,500.	3,500.	S/L	15		
ASPHALT DRIVEWA	4/27/1988	5,000.	5,000.	S/L	15		
IMPROVEMENTS	4/27/1988	20,574.	20,574.	S/L	15		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
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TAXABLE YEAR

2019

CALIFORNIA FORM

3885

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W. FORM 199

Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
LANDSCAPING	5/12/1988	14,750.	14,750.	S/L	15		
IMPROVEMENTS	4/25/1988	1,212.	1,212.	S/L	15		
STUCCO BLOCK WA	6/26/1988	1,550.	1,550.	S/L	15		
IRON GATE	7/26/1988	6,834.	6,834.	S/L	15		
ASPHALT PAVEMEN	6/09/1988	25,875.	25,875.	S/L	15		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
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TAXABLE YEAR **2019**

CALIFORNIA FORM **3885**

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W. FORM 199

Corporation name: ASSISTANCE LEAGUE OF DOWNEY

California corporation number: 0666925

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
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Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
CHAIN LINK FENC	6/14/1988	898.	898.	S/L	15		
SPRINKLERS	6/04/1989	800.	800.	S/L	15		
PARKING LOT IMP	6/08/1988	1,440.	1,440.	S/L	15		
BRICK WORK	9/13/1989	3,145.	3,145.	S/L	15		
SPRINKLER SYSTE	10/28/1989	6,900.	6,900.	S/L	15		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22	

TAXABLE YEAR

2019

CALIFORNIA FORM

3885

Corporation Depreciation and Amortization

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Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

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8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
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Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

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CONCRETE WALL	7/10/1990	2,995.	2,995.	S/L	15		
PAVING	4/07/1992	1,500.	1,500.	S/L	15		
PIPES/OUTDOOR P	11/17/1994	2,813.	2,813.	S/L	15		
GRADE/SEAL PARK	4/28/1995	1,490.	1,490.	S/L	15		
DRIVEWAY	2/13/1997	6,722.	6,722.	S/L	15		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22	

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Corporation Depreciation and Amortization

CALIFORNIA FORM

3885

Attach to Form 100 or Form 100W. FORM 199

Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
LAND	10/09/1986	538,000.			0		
BENCH	7/08/1987	612.	612.	S/L	7		
FIRE ALARM	5/27/1988	9,291.	9,291.	S/L	7		
LIGHT FIXTURES	3/10/1988	2,115.	2,115.	S/L	7		
FURNITURE	4/21/1988	229.	229.	S/L	7		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
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Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

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Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
SPRINKLERS	5/18/1988	800.	799.	S/L	7		
DONATED DESK	5/31/1989	250.	250.	S/L	7		
DONATED DESK	5/31/1989	250.	250.	S/L	7		
DRYER	6/28/1990	302.	302.	S/L	7		
VARIOUS - TS	12/27/1993	936.	936.	S/L	7		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
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Corporation Depreciation and Amortization

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Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
HALL TABLE	6/17/1993	566.	566.	S/L	7		
DISHWASHER	1/18/1994	412.	412.	S/L	7		
LIGHT FIXTURES	5/19/1994	180.	180.	S/L	7		
BLDG. - 11026 D	4/01/1980	86,056.	85,908.	S/L	20		
BUILDING IMPROV	4/25/1988	4,406.	4,341.	S/L	32		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
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Part IV Amortization

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Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
BUILDING IMPROV	5/12/1988	480.	466.	S/L	32		
BUILDING IMPROV	1/31/1992	35,011.	30,394.	S/L	32	1,108.	
DUCTWORK/PLATFO	3/10/1998	3,750.	3,750.	S/L	15		
NEW ROOF - 7749	3/17/1998	9,970.	9,970.	S/L	15		
FACADE IMPROVEM	5/31/2001	29,304.	29,304.	S/L	15		

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
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Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

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14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
LAND	10/09/1986	65,348.			0		
TUFF SHED	3/11/2008	1,991.	1,991.	S/L	7		
ROOF	2/09/2008	15,630.	11,809.	S/L	15	1,042.	
GAS/ELECTRIC UN	10/14/2008	9,000.	6,400.	S/L	15	600.	
FRONT/BACK BALC	3/16/2009	91,220.	26,494.	S/L	35	2,606.	

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
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Part IV Amortization

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TRELLIS PATIO C	2/11/2009	6,300.	4,340.	S/L	15	420.	
PATIO COVER	3/16/2009	24,309.	7,066.	S/L	35	695.	
TUFF SHED	8/19/2010	3,076.	1,794.	S/L	15	205.	
CONCRETE SLAB	8/26/2010	2,475.	1,444.	S/L	15	165.	
CARRIAGE HOUSE	9/09/2013	10,328.	1,696.	S/L	35	295.	

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FIXTURES-VICTOR	4/10/2014	7,780.	5,740.	S/L	7	1,111.	
CARPET	3/08/2014	11,059.	8,295.	S/L	7	1,580.	
THRIFT SHOP REM	4/14/2014	26,567.	4,345.	S/L	32	841.	
ALARM	7/30/2013	2,418.	2,013.	S/L	7	345.	
BEAM	8/13/2014	11,689.	1,614.	S/L	35	334.	

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15	

Part III Summary

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20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22	

TAXABLE YEAR

2019

CALIFORNIA FORM

3885

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W. FORM 199

Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
ATRIUM ENCLOSUR	8/15/2014	1,790.	247.	S/L	35	51.	
CABINETS-HOME	7/15/2016	2,005.	391.	S/L	15	134.	
REFRIGERATORS-7	7/23/2016	1,542.	624.	S/L	7	220.	
SIDE GATE	3/07/2017	1,360.	205.	S/L	15	91.	
AIR CONDITIONER	7/08/2017	6,400.	1,752.	S/L	7	914.	

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15		

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22	

TAXABLE YEAR

2019

Corporation Depreciation and Amortization

CALIFORNIA FORM

3885

Attach to Form 100 or Form 100W. FORM 199

Corporation name	California corporation number
ASSISTANCE LEAGUE OF DOWNEY	0666925

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
OUTDOOR LIGHTIN	1/25/2019	1,250.	60.	S/L	7	179.	
SHED ROOF	12/01/2019	5,500.		S/L	35	79.	
FIRE AND SECURI	2/07/2020	21,320.		S/L	15	474.	

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15	

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instr)	(f) Period or percentage	(g) Amortization for this year

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22	

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

STATEMENT 1
FORM 199, PART II, LINE 7
OTHER INCOME

INCOME FROM SPECIAL EVENTS	$	27,085.
OTHER REVENUE		737.
PROGRAM SERVICE REVENUE		13,061.
TOTAL	$	40,883.

STATEMENT 2
FORM 199, PART II, LINE 9
CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY:	CLOTHING, SHOES, BACKPACKS	
DESCRIPTION OF PROPERTY:	CLOTHING, SHOES, BACKPACKS	
METHOD USED TO DETERMINE BV:	PURCHASE PRICE	
FAIR MARKET VALUE:		37,808.
CLASS OF ACTIVITY:	HYGIENE KITS	
DESCRIPTION OF PROPERTY:	HYGIENE KITS	
METHOD USED TO DETERMINE BV:	PURCHASE PRICE	
FAIR MARKET VALUE:		1,275.
DONEE'S NAME:	CHILDREN'S DENTAL HEALTH CLIN	
DONEE'S STREET ADDRESS:	2801 ATLANTIC AVENUE	
DONEE'S CITY, STATE, ZIP:	LONG BEACH, CA 90801	
AMOUNT GIVEN:		14,000.
DONEE'S NAME:	DOWNEY HIGH SCHOOL	
DONEE'S STREET ADDRESS:	11040 BROOKSHIRE AVE	
DONEE'S CITY, STATE, ZIP:	DOWNEY, CA 90241	
AMOUNT GIVEN:		10,000.
DONEE'S NAME:	WARREN HIGH SCHOOL	
DONEE'S STREET ADDRESS:	8141 DE PALMA ST	
DONEE'S CITY, STATE, ZIP:	DOWNEY, CA 90241	
AMOUNT GIVEN:		10,000.
DONEE'S NAME:	CHRISTMAS DISTRIBUTION	
DONEE'S STREET ADDRESS:	9300 TELEGRAPH, RD	
DONEE'S CITY, STATE, ZIP:	DOWNEY, CA 90240	
FAIR MARKET VALUE:		1,333.
TOTAL		$ 74,416.

STATEMENT 3
FORM 199, PART II, LINE 11
COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

CURRENT OFFICERS:

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	TOTAL COMPEN-SATION	CONTRI-BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
CONNIE WETZSTEIN 10603 HALEDON AVE DOWNEY, CA 90241	2ND VP 4.00	$ 0.	$ 0.	$ 0.
ANN HUTCHINSON 9661 GAINFORD STREET DOWNEY, CA 90240	1ST VP 4.00	0.	0.	0.
THERESA FORD 7810 E SIXTH ST DOWNEY, CA 90241	3RD VP 4.00	0.	0.	0.
JUDITH FAUST 16222 WAYFARER LANE HUNTINGTON BEACH, CA 92646	TREASURER 8.00	0.	0.	0.
VIRGINIA RIVAS 7845 FIFTH STREET DOWNEY, CA 90241	SECRETARY 4.00	0.	0.	0.
DONNA LINDLEY 8301 MEADOWLARK LANE LA PALMA, CA 90623	PRESIDENT 4.00	0.	0.	0.
	TOTAL	$ 0.	$ 0.	$ 0.

STATEMENT 4
FORM 199, PART II, LINE 17
OTHER EXPENSES

ACCOUNTING FEES	$ 11,000.
CONFERENCES, CONVENTIONS, AND MEETINGS	2,112.
FOOD & ENTERTAINMENT	1,161.
MISCELLANEOUS	13,092.
NATIONAL DUES	1,141.
OFFICE EXPENSES	8,366.
POSTAGE AND SHIPPING	3,649.
PROGRAM SUPPLIES	1,906.
PUBLIC RELATIONS/ADVERTISING	315.
SPECIAL EVENT EXPENSES	13,451.
TOTAL	$ 56,193.

STATEMENT 5
FORM 199, SCHEDULE L, LINE 12
OTHER ASSETS

PREPAID EXPENSES AND DEFERRED CHARGES	6,961.
TOTAL	$ 6,961.

STATE OF CALIFORNIA
RRF-1
(Rev. 09/2017)
IN

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
(916) 210-6400

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
(916) 210-6400

WEBSITE ADDRESS:
www.ag.ca.gov/charities/

DEPARTMENT OF JUSTICE

(For Registry Use Only)

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-306, 309, 311, and 312

Failure to submit this report annually no later than four months and fifteen after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of $800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

ASSISTANCE LEAGUE OF DOWNEY
Name of Organization

List all DBAs and names the organization uses or has used

11026 DOWNEY AVENUE
Address (Number and Street)

DOWNEY, CA 90241
City or Town, State and ZIP Code

(562) 869-0232
Telephone Number

E-mail Address

Check if:
- ☐ Change of address
- ☐ Amended report

State Charity Registration Number CT110837

Corporation or Organization No. 0666925

Federal Employer ID No. 95-2822632

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)
Make Check Payable to Department of Justice

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than $25,000	0	Between $100,001 and $250,000	$50	Between $1,000,001 and $10 million	$150
Between $25,000 and $100,000	$25	Between $250,001 and $1 million	$75	Between $10,000,001 and $50 million	$225
				Greater than $50 million	$300

PART A – ACTIVITIES

For your most recent full accounting period (beginning 6/01/19 **ending** 5/31/20 **) list:**

Gross Annual Revenue $ 124,558. **Noncash Contributions** $ 137,652. **Total Assets** $ 1,520,302.

Program Expenses $ 173,639. **Total Expenses** $ 275,749.

PART B – STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1 During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?	☐	☒
2 During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?	☐	☒
3 During this reporting period, were any organization funds used to pay any penalty, fine or judgment?	☐	☒
4 During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?	☐	☒
5 During this reporting period, did the organization receive any governmental funding?	☐	☒
6 During this reporting period, did the organization hold a raffle for charitable purposes? SEE STATEMENT 1	☒	☐
7 Does the organization conduct a vehicle donation program?	☐	☒
8 Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?	☐	☒
9 At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?	☐	☒

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.

Signature of Authorized Agent	Printed Name	Title	Date
	JUDITH FAUST	TREASURER	

STATEMENT 1
FORM RRF-1, PART B, LINE 6
NUMBER AND DATES OF RAFFLES

ONE RAFFLE WAS HELD - NOVEMBER 24, 2019

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 199																
BUILDINGS																
1	BUILDING-HOME	11/20/97		729,011							729,011	447,823	S/L	35		20,829
2	PATIO	8/05/99		1,200							1,200	675	S/L	35		34
70	BEAM	8/13/14		11,689							11,689	1,614	S/L	35		334
71	ATRIUM ENCLOSURE	8/15/14		1,790							1,790	247	S/L	35		51
	TOTAL BUILDINGS			743,690		0	0	0	0	0	743,690	450,359				21,248
CH HOUSE - BUILD IMP																
3	FRENCH DOORS	6/08/88		5,546							5,546	5,546	S/L	15		0
4	FIRE ALARM	4/24/89	2/07/20	920							920	920	S/L	15		0
5	ROOFING REPAIRS	1/25/97		1,575							1,575	1,575	S/L	15		0
6	DOORS	7/26/05		7,171							7,171	6,612	S/L	15		478
58	ROOF	2/09/08		15,630							15,630	11,809	S/L	15		1,042
60	FRONT/BACK BALCONY	3/16/09		91,220							91,220	26,494	S/L	35		2,606
61	TRELLIS PATIO COVER	2/11/09		6,300							6,300	4,340	S/L	15		420
62	PATIO COVER	3/16/09		24,309							24,309	7,066	S/L	35		695
65	CARRIAGE HOUSE BATHROOM	9/09/13		10,328							10,328	1,696	S/L	35		295
74	SIDE GATE	3/07/17		1,360							1,360	205	S/L	15		91
77	SHED ROOF	12/01/19		5,500							5,500		S/L	35		79
78	FIRE AND SECURITY ALARM	2/07/20		21,320							21,320		S/L	15		474
	TOTAL CH HOUSE - BUILD IMP			191,179		0	0	0	0	0	191,179	66,263				6,180

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
CHAPTER HOUSE																
7	BLDG. 7749 FLORENCE	10/09/86		380,000							380,000	379,486	S/L	31.6		0
	TOTAL CHAPTER HOUSE			380,000		0	0	0	0	0	380,000	379,486				0
FURNITURE AND FIXTURES																
8	RCA TV - 1 - HOME	11/20/97	6/01/19	324							324	324	S/L	7		0
9	WASHER/DRYER - HOME	11/20/97	6/01/19	1,485							1,485	1,485	S/L	7		0
10	VENDING SOAP DISP - HOME	11/20/97	6/01/19	387							387	387	S/L	7		0
11	VACUUM - SANIT 12 - HOME	11/20/97		257							257	257	S/L	7		0
12	QUEEN SOFA - 2 - HOME	11/20/97		893							893	893	S/L	7		0
13	TREES/FLORALS - HOME	12/08/97		635							635	635	S/L	7		0
14	CREDENZA - 10 - HOME	12/10/97		2,722							2,722	2,722	S/L	7		0
15	HYDE PARK BENCH - 2 - HOM	4/10/98		1,152							1,152	1,152	S/L	7		0
16	COPIER - HOME	2/19/98		430							430	430	S/L	7		0
17	PATIO TABLE	8/12/99		938							938	938	S/L	7		0
63	TUFF SHED	8/19/10		3,076							3,076	1,794	S/L	15		205
64	CONCRETE SLAB	8/26/10		2,475							2,475	1,444	S/L	15		165
69	ALARM	7/30/13		2,418							2,418	2,013	S/L	7		345
73	REFRIGERATORS-7	7/23/16		1,542							1,542	624	S/L	7		220
76	OUTDOOR LIGHTING	1/25/19		1,250							1,250	60	S/L	7		179
	TOTAL FURNITURE AND FIXTURE			19,984		0	0	0	0	0	19,984	15,158				1,114
IMPROVEMENTS																

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
18	BLOCK WALL	4/25/88		3,500							3,500	3,500	S/L	15		0
19	ASPHALT DRIVEWAY	4/27/88		5,000							5,000	5,000	S/L	15		0
20	IMPROVEMENTS	4/27/88		20,574							20,574	20,574	S/L	15		0
21	LANDSCAPING	5/12/88		14,750							14,750	14,750	S/L	15		0
22	IMPROVEMENTS	4/25/88		1,212							1,212	1,212	S/L	15		0
23	STUCCO BLOCK WALLS	6/26/88		1,550							1,550	1,550	S/L	15		0
24	IRON GATE	7/26/88		6,834							6,834	6,834	S/L	15		0
25	ASPHALT PAVEMENT	6/09/88		25,875							25,875	25,875	S/L	15		0
26	CHAIN LINK FENCE	6/14/88		898							898	898	S/L	15		0
27	SPRINKLERS	6/04/89		800							800	800	S/L	15		0
28	PARKING LOT IMPROVEMENTS	6/08/88		1,440							1,440	1,440	S/L	15		0
29	BRICK WORK	9/13/89		3,145							3,145	3,145	S/L	15		0
30	SPRINKLER SYSTEM	10/28/89		6,900							6,900	6,900	S/L	15		0
31	CONCRETE WALL	7/10/90		2,995							2,995	2,995	S/L	15		0
32	PAVING	4/07/92		1,500							1,500	1,500	S/L	15		0
33	PIPES/OUTDOOR PLUMBING	11/17/94		2,813							2,813	2,813	S/L	15		0
34	GRADE/SEAL PARKING LOT	4/28/95		1,490							1,490	1,490	S/L	15		0
35	DRIVEWAY	2/13/97		6,722							6,722	6,722	S/L	15		0
72	CABINETS-HOME	7/15/16		2,005							2,005	391	S/L	15		134
	TOTAL IMPROVEMENTS			110,003		0	0	0	0	0	110,003	108,389				134
	LAND															
56	LAND	10/09/86		65,348							65,348					0
	TOTAL LAND			65,348		0	0	0	0	0	65,348	0				0

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	LAND - CHAPTER HOUSE															
36	LAND	10/09/86		538,000							538,000					0
	TOTAL LAND - CHAPTER HOUSE			538,000		0	0	0	0	0	538,000	0				0
	MACHINERY AND EQUIPMENT															
37	BENCH	7/08/87		612							612	612	S/L	7		0
38	FIRE ALARM	5/27/88		9,291							9,291	9,291	S/L	7		0
39	LIGHT FIXTURES	3/10/88		2,115							2,115	2,115	S/L	7		0
40	FURNITURE	4/21/88		229							229	229	S/L	7		0
41	SPRINKLERS	5/18/88		800							800	799	S/L	7		0
42	DONATED DESK	5/31/89		250							250	250	S/L	7		0
43	DONATED DESK	5/31/89		250							250	250	S/L	7		0
44	DRYER	6/28/90		302							302	302	S/L	7		0
45	VARIOUS - TS	12/27/93		936							936	936	S/L	7		0
46	HALL TABLE	6/17/93		566							566	566	S/L	7		0
47	DISHWASHER	1/18/94		412							412	412	S/L	7		0
48	LIGHT FIXTURES	5/19/94		180							180	180	S/L	7		0
	TOTAL MACHINERY AND EQUIPME			15,943		0	0	0	0	0	15,943	15,942				0
	THRIFT SHOP															
49	BLDG. - 11026 DOWNEY AVE	4/01/80		86,056							86,056	85,908	S/L	20		0
50	BUILDING IMPROVEMENTS	4/25/88		4,406							4,406	4,341	S/L	31.6		0
51	BUILDING IMPROVEMENTS	5/12/88		480							480	466	S/L	31.6		0
52	BUILDING IMPROVEMENTS	1/31/92		35,011							35,011	30,394	S/L	31.6		1,108
53	DUCTWORK/PLATFORMS-7749	3/10/98		3,750							3,750	3,750	S/L	15		0

ASSISTANCE LEAGUE OF DOWNEY 95-2822632

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
54	NEW ROOF - 7749	3/17/98		9,970							9,970	9,970	S/L	15		0
55	FACADE IMPROVEMENT	5/31/01		29,304							29,304	29,304	S/L	15		0
68	THRIFT SHOP REMODEL	4/14/14		26,567							26,567	4,345	S/L	31.6		841
	TOTAL THRIFT SHOP			195,544		0	0	0	0	0	195,544	168,478				1,949
	TS - FURN AND EQUIP															
57	TUFF SHED	3/11/08		1,991							1,991	1,991	S/L	7		0
59	GAS/ELECTRIC UNITS - 2	10/14/08		9,000							9,000	6,400	S/L	15		600
66	FIXTURES-VICTORY DISPLAY	4/10/14		7,780							7,780	5,740	S/L	7		1,111
67	CARPET	3/08/14		11,059							11,059	8,295	S/L	7		1,580
75	AIR CONDITIONER - TS	7/08/17		6,400							6,400	1,752	S/L	7		914
	TOTAL TS - FURN AND EQUIP			36,230		0	0	0	0	0	36,230	24,178				4,205
	TOTAL DEPRECIATION			2,295,921		0	0	0	0	0	2,295,921	1,228,253				34,830
	GRAND TOTAL DEPRECIATION			2,295,921		0	0	0	0	0	2,295,921	1,228,253				34,830
	DEPRECIATION ASSETS SOLD			3,116		0	0	0	0	0	3,116	3,116				0
	DEPR REMAINING ASSETS			2,292,805		0	0	0	0	0	2,292,805	1,225,137				34,830