### EXTENDED TO NOVEMBER 16, 2020

(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

Open to Public Inspection

_		2 20 10 Calcindar year, or tax year beginning	ciidiiig		
	Check if applicabl	C Name of organization		D Employer identifi	cation number
	Addre	FISCAL ALLIANCE FOUNDATION, INC.			
	Name chang	Doing business as		81-53021	32
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r
厂	Final return	19 TOPMONT CTOPET	527	857-308-	
	termin ated			G Gross receipts \$	492,000.
Г	Amen			H(a) Is this a group re	
F	Application			for subordinates	
_	pendir			H(b) Are all subordinates in	
_	Tov. ov	empt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) c	or 527	1 ''	list. (see instructions)
		te: > HTTPS://WWW.FISCALALLIANCEFOUNDATION.O.		1 ′	
		organization: X Corporation Trust Association Other		H(c) Group exemption	M State of legal domicile; MA
	art I	Summary	L Tear	oriormation, ZOI/jr	M State of legal doffliche, PLA
		Briefly describe the organization's mission or most significant activities: FISCA	λΤ. <b>λ</b> Τ.Τ.	TANCE ECIMIN	ATION, INC.
9	1	PRIMARILY ENGAGES IN THE CONDUCT OF EDUCA			
ä					•
Governance	2	Check this box  if the organization discontinued its operations or dispos		1 1	1
ò	3			3	5
	1 '	Number of independent voting members of the governing body (Part VI, line 1b)			6
es		Total number of individuals employed in calendar year 2019 (Part V, line 2a)			
Activities &		Total number of volunteers (estimate if necessary)			10
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	ь	Net unrelated business taxable income from Form 990-T, line 39	······		0.
	_		<u> </u>	Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)	······	330,775.	492,000.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
€	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		330,775.	492,000.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	500.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		231,579.	267,264.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	b '	Total fundraising expenses (Part IX, column (D), line 25)	_		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		184,156.	213,565.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		415,735.	481,329.
		Revenue less expenses. Subtract line 18 from line 12		-84,960.	10,671.
t Assets or			Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		43,199.	39,244.
TAN P	21	Total liabilities (Part X, line 26)		41,836.	27,210.
춫		Net assets or fund balances. Subtract line 21 from line 20		1,363.	12,034.
	ırt	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedules		· -	knowledge and belief, it is
true,	correc	, and complete. Declaration of preparer (other than officer) is based on all information of whi	ch preparer l	has any knowledge.	
		Rical With			12/20
Sigr	n	Signature of officer		Date	
Her	e	BRAD WILLIAMS, TREASURER			
		Type or print name and title		<u>1 –</u>	- L proi
		Print/Type preparer's name Preparer's signature		1 # =	X PTIN
Paid	1	EDWARD TAYLOR EDWARD TAYLOR	1	1/02/20 sell-employe	
	arer	Firm's name NARDELLA & TAYLOR, LLP		Firm's EIN ▶	04-2979611
Use	Only	Firm's address 24 HARTWELL AVENUE			
	i	LEXINGTON, MA 02421		Phone no. 78	1-862-6833
Мау	the IR	S discuss this return with the preparer shown above? (see instructions)	**************		X Yes No

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

Form 990 (2019) FISCAL ALLIA
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	l
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			· · · · · · · · · · · · · · · · · · ·
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
٥	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	ļ	Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
7		7		Х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<del>'</del>		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	ا ا		Х
_	Schedule D, Part III	8_		
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?	ا ا		Х
	If "Yes," complete Schedule D, Part IV	9	-	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		i	v
	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.	L		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			77
	Part VI	11a		_ <u>X</u> _
þ	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	11b		<u> </u>
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	11c		<u> </u>
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	11d		<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		İ	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		ŀ	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	_	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
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		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
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? // "Yes," complete Schedule I. Parts I and II	21	[	<u> </u>

La	Checklist of Required Schedules (continued)			<b>,</b>
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	•		l
	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			1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		·	<sub>U</sub>
04-	Schedule J	23	<del>                                     </del>	X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		1	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			x
	Schedule K. If "No," go to line 25a	24a		<u>├</u> ^
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b	<del>                                     </del>	+-
·	and the second band of	24c	l	
d	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	<del>                                     </del>
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240	<del> </del>	$\vdash$
	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	200		<del> </del>
_	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		T'''	
	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	į	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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
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		i	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			.,
04	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	_		v
25.5	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		┢┸
	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?	335		
-	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?			
		38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· · · · · · · · · · · · · · · · · · ·		
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			j
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	<u> </u>	<del></del>	
	(gambling) winnings to prize winners?	1c	X oon	(0046)
2004ء	01-20-20	rorm	コゴリ (	(2019)

Par	t 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 6			
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		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	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		Х
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		Х
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
	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?	7с		X
	If "Yes," indicate the number of Forms 8282 filed during the year	<b></b> _		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<b></b>
	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
		}.		
	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders 11a			
	Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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.			
	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	]	Χ_
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16_		X
	If "Yes." complete Form 4720, Schedule O.	. 1		

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			.,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		LX.
Sec	tion 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	5			
	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.			i		
b	Enter the number of voting members included on line 1a, above, who are independent	1b	5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the					
	distribution of the state of th			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 95			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asset			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto					
_	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			<u> </u>		
J	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev					
	(This Section B requests information about policies not required by the internal new	CHUC			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such cha					
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>-</b> p.10.10		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before	e filing the form?	11a		Х
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		<b>g</b>			
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye					
-	in Schedule O how this was done	•		12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		•			
а	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 arrangem	ent wi	th 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					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ►MA					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	d 990-	T (Section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply					
	X Own website X Another's website X Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, cor	iflict o	finterest policy, and	financ	ial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's book	ks and	records 🕨			
	THE ORGANIZATION - 617-553-4115					
	18 TREMONT STREET, NO. 527, BOSTON, MA 02108					

A G 0

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

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

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

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

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

X Check this box if neither the organization	I	orga I	ınıza			iper	sate			(5)
(A)	(B)			Pos	C) ition			(D)	(E)	(F)
Name and title	Average		not c	heck	more	than o		Reportable	Reportable	Estimated
	hours per					s both x/trus		compensation	compensation from related	amount of other
	week (list any	ě						from the	organizations	compensation
	hours for	Individual trustee or director				_		organization	(W-2/1099-MISC)	from the
	related	20 20	stee		1	nsate		(W-2/1099-MISC)	(,	organization
	organizations	trust	Institutional trustee		Кеу етріоуев	Highest compensated employee		,		and related
	below	ridua	tottot	<u>ت</u>	E E	loyee	Je .			organizations
	line)	턀	ıışşı	Officer	Key	E E	Former			
(1) DANIELLE WEBB	5.00									
CHAIRMAN AND PRESIDENT		X		X			_	0.	0.	0
(2) BRAD WILLIAMS	5.00									
TREASURER		Х		X				0.	0.	0.
(3) MIKE KANE	5.00									
CLERK		Х		Х				0.	0.	0
(4) MIKE GREEN	5.00									
BOARD MEMBER		Х						0.	0.	0
(5) BRIAN BIALAS	5.00									
BOARD MEMBER		X						0.	0.	0
						L.				
· -										
<u></u>										
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		$\vdash$		$\vdash$		$\vdash$				
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		$\vdash$		$\vdash$		$\vdash$				
		$\vdash$		$\vdash$		$\vdash$				

	(A) Name and title	(B) Average hours per week	box	not c unle:	Pos heck ss pe	more	than of s both or/trus	n an	(D) Reportable compensation from	(E) Reportable compensatio from related	ก		(F) stimate nount other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	s	fr org an	pensa om th anizat d relat	e ion ed
								_						
	Subtotal							<u> </u>	0.		0.			0.
	Total from continuation sheets to Part VII Total (add lines 1b and 1c)							<b>&gt;</b>	0.		0.			0.
2	Total number of individuals (including but no							o re		000 of reportable				-
	compensation from the organization								<del></del>				Yes	0 No
3	Did the organization list any former officer,	director, truste	e, k	ey e	mpl	oyee	e, or	higi	hest compensated empl	loyee on			163	140
	line 1a? If "Yes," complete Schedule J for se											3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150											4		х
5	Did any person listed on line 1a receive or a													
Carr	rendered to the organization? If "Yes." com	plete Schedule	J fc	or su	ch c	ers	on .	, , ,				5		Х
Sec 1	tion B. Independent Contractors  Complete this table for your five highest cor	mpensated ind	epei	nder	ıt co	ntra	ctor	s th	at received more than \$	100,000 of comp	ensat	ion fro		
	the organization. Report compensation for t													
	(A) Name and business	address	NC	NE	:				(B) Description of s	ervices	С	Ompei		n
	*													
								$\perp$						
2	Total number of independent contractors (ir	-	t lin	nited	to t	hos:		ted .	above) who received mo	ore than				
	\$100,000 of compensation from the organiz	allon		_						I.	-	Form !	990 <i>/</i>	20101

		Chack if Schoolule O contains a recognose or	note to any line	o in this Dart VIII			<del></del>
		Check if Schedule O contains a response or r	tote to any line	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
					12.701.017.701.00		sections 512 - 514
र्घ द	1	l a Federated campaigns1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues 1b					· •
o,∄		c Fundraising events 1c					
# J		d Related organizations 1d					
S, I		e Government grants (contributions) 1e					
P.S.		f All other contributions, gifts, grants, and		:			
2 4		similar amounts not included above 1f 4	92,000.				
투급		g Noncash contributions included in lines 1a-1f 1g \$					
<u>8</u>		h Total. Add lines 1a-1f		492,000.			
		B	usiness Code				
8	2	! a					
E S		b					
Š		c					
<u>Far</u>		d	<del></del>		-		
Program Service Bevenue		e					
۱ ۳		f All other program service revenue	<del></del>			. —-	
-		g Total. Add lines 2a-2f					
	3	,					
	4	other similar amounts) Income from investment of tax-exempt bond proc				· · · · · · · · · · · · · · · · · · ·	
	4 5						
	3	,	(ii) Personal				
	6	a Gross rents 6a	<del>(1) (111-11-11-11-11-11-11-11-11-11-11-11-11</del>				
	•	b Less: rental expenses 6b					
		c Rental income or (loss) 6c					ĺ
		d Net rental income or (loss)	<b></b>				
		a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
		b Less: cost or other basis					
nue		and sales expenses7b					
ě		c Gain or (loss)7c					
Other Reve		d Net gain or (loss)	<b></b>				
ь	8	a Gross income from fundraising events (not					ļ
ŏ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		b Less: direct expenses8b	<del>-</del>				
	_	` '	·······				
	9		-				
		Part IV, line 19 9a b Less: direct expenses 9b					
		- N-A:					
	10	a Gross sales of inventory, less returns					
		and allowances 10a			:		
		b Less: cost of goods sold 10b				ì	
		c Net income or (loss) from sales of inventory	<b></b>				
		В	usiness Code				
Miscellaneous Bevenue	11 :	a Ĺ_					
ane Pour	I	b					
Sel	•	c					
Mis	į	d All other revenue	<del></del>				
		e Total. Add lines 11a-11d		492,000.	0.	0.	0.
932009	12			474,000 s	0.	U • ]	Form <b>990</b> (2019)

10411105 742892 1897.01

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### Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons	e or note to any line in t	his Part IX(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		500		
	and domestic governments. See Part IV, line 21	500.	500.		
2	Grants and other assistance to domestic	į			
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified	]			
	persons (as defined under section 4958(f)(1)) and	[	1		
	persons described in section 4958(c)(3)(B)	020 546	150 256	40 635	20 725
7	Other salaries and wages	230,746.	159,376.	40,635.	30,735
8	Pension plan accruals and contributions (include	"	r F00	1 400	1 001
	section 401(k) and 403(b) employer contributions)	7,963.	5,500.	1,402.	1,061 1,239
9	Other employee benefits	9,300.	6,423.	1,638.	1,239 2,565
0	Payroll taxes	19,255.	13,299.	3,391.	2,565
1	Fees for services (nonemployees):				
	Management	26 501	26 501		
	Legal	36,521.	36,521.	20.242	
	Accounting	29,343.		29,343.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				<del></del>
g	Other. (If line 11g amount exceeds 10% of line 25,	6 005	2.450	2 770	705
	column (A) amount, list line 11g expenses on Sch 0.)	6,925.	3,450.	2,770.	705
12	Advertising and promotion	5,000.	4,000.	500.	500
13	Office expenses	9,798.	6,994.	2,309.	495
4	Information technology	6,645.	1,449.	3,799.	1,397
15	Royalties	42 165	20 020	7,577.	5,568
6	Occupancy	42,165.	29,020.	1,311.	5,500
17	Travel				
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	41,150.	13,103.	1,492.	26,555
9	Conferences, conventions, and meetings	#1,100·	13,103.	1,474.	20,333
20	Interest				
21	Payments to affiliates  Depreciation, depletion, and amortization				
2	1	1,410.	441.	885.	84
23 24	Other expenses. Itemize expenses not covered	T, TIV •	441.		04
.**	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 0.)  RESEARCH & POLLING	20,000.	20,000.	<del></del>	
a	PUBLICATIONS & MAILINGS	14,203.	3,377.	1,406.	9,420
ь	BANK FEES	280.	3,3116	280.	3,420
d	FILING FRES	125.		125.	
-	All other expenses	1230			
е :5	Total functional expenses. Add lines 1 through 24e	481,329.	303,453.	97,552.	80,324
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.			1	
	Check here if following SOP 98-2 (ASC 958-720)				

932010 01-20-20

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Form 990 (2019)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 33,284. 22,416. 1 Cash - non-interest-bearing Savings and temporary cash investments 2 2 5,960. 5,000. 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 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 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 0. 15,208. 7 Notes and loans receivable, net 8 Inventories for sale or use 8 0. 575. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation \_\_\_\_\_\_\_10b 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 43,199. 39,244. Total assets. Add lines 1 through 15 (must equal line 33) 16 16 27,210. 41,836. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 23 Secured mortgages and notes payable to unrelated third parties 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 41.836. 27,210. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🗓 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 1,363. 12,034. 27 27 Net assets without donor restrictions Net assets with donor restrictions 0. 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 31 31 1,363. 12,034. 32 Total net assets or fund balances 32 39,244. 43.199. Total liabilities and net assets/fund balances

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?

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?

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

X

2c

3a

# 0/12/202

0

#### 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

**Employer identification number** Name of the organization 81-5302132 FISCAL ALLIANCE FOUNDATION, INC. 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). | X | An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. \_\_\_\_ 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. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations \_\_\_\_\_ Provide the following information about the supported organization(s) (iv) is the organization listed (iii) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported (ii) EIN in your governing documen (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not	,					
	include any "unusual grants.")			239,900.	330,775.	492,000.	1062675.
2	Tax revenues levied for the organ-						
_	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities			·			
Ū	furnished by a governmental unit to						
	the organization without charge						
A	Total. Add lines 1 through 3			239,900.	330,775.	492,000.	1062675.
5	The portion of total contributions						
Ū	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,						
						•	553,668.
_	***************************************						509,007.
	Public support. Subtract line 5 from line 4.			<u></u>			303,007.
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	(a) 2013	10) 2010	239,900.	330,775.	492,000.	1062675.
	Gross income from interest,			233,300.	3307.730	132,000.	10020731
0	·						
	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			1			
	or loss from the sale of capital						
	assets (Explain in Part VI.)						1062675.
	Total support. Add lines 7 through 10					40	1002075.
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for				-		<b>▶</b> [X]
Sec	organization, check this box and stop etion C. Computation of Public	c Support Per	centage				
	Public support percentage for 2019 (li			column (fl)		14	%
	Public support percentage from 2018					15	<del></del>
	33 1/3% support test - 2019. If the o				.,,		
100	stop here. The organization qualifies a						
h	33 1/3% support test - 2018. If the o		~	***************************************			
_	and stop here. The organization quali						
172	10% -facts-and-circumstances test						
17.4	and if the organization meets the "fact						
	·						. —
L	meets the "facts-and-circumstances" t	=			=		
D	10% -facts-and-circumstances test more, and if the organization meets th	_					
	organization meets the "facts-and-circ						
10	<del>-</del>		-				<b>-</b>
18	Private foundation. If the organization	i dia not check a t	JOX OF HITE 13, 16	a, 100, 178, 01 170		dule A (Form 990	

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.)

Chleindar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) To 1 Giffs, grants, contributions, and membership feer received, (Do not include any "unusual grants.")  2 Gross neclipits from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax exempt purpose  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues levied for the organization's tax exempt purpose  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues levied for the organization's breaff and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization's breaff and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge 6  6 Total. Add lines 1 through 5  7 A A mounts included on lines 1, 2, and 3 received from disqualified persons but any organization and the services of the organization of first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))  17 Institute of the organization of Investment Income Percentage  18 Institute organization of Investment Inco	Section A. Public Support	Jw, please comp	piete Fait II.j					
Giffs grants, contributions, and membership fees received. (Do not include any runused grants.)  2 Gross receipts from admissions, merchandres sold of services performed, or facilities furnished in any activity that is related to the organization's tax-exempl purpose of gross receipts from activities that are not an unrelated trade or brusiness under section 513  4 Tax revenues leved for the organization is the shalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total Add lines if and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total Add lines if through 5 5  7a Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts shoulded on lines 1, 2, and 3 received from disqualified persons by Amounts shoulded on lines 1, 2, and 3 received from disqualified persons by Amounts shoulded on lines 1, 2, and 3 received from disqualified persons by Amounts shoulded on lines 1, 2, and 3 received from disqualified persons by Amounts from the shoulded on lines 1, 2, and 3 received from disqualified persons by Amounts from the shoulded on lines 1, 2, and 3 received from disqualified persons by Amounts from lines 6 10 and 10 to 8 years of the law of the la	· · · · · · · · · · · · · · · · · · ·	(a) 2015	(b) 2016	(c) 2017	(d) 2018		e) 2019	(f) Total
memborship fees received. (Do not include any "urususal grants")  2 Gross receipts from admissions, merchandles sold or services per many activity that is related to the organization's tax exempt purpose of gross receipts from activities that are not an unveilated trade or business under section 513  1 Tax revenues level for the organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities from similar to the organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge is considered from disqualified persons. A farmount is founded on lines 1, 2, and 3 received from disqualified persons. A farmount is founded on lines 1, 2, and 3 received from disqualified persons that exceed they aware of 6000 or the organization. A farmount is founded on lines 1, 2, and 3 received from the hardsqualified persons that exceed they aware of 6000 or the organization. A farmount is founded on lines 1, 2, and 3 received from the hard squalified persons that exceed they aware of 6000 or the organization. A farmount is founded on lines 1, 2, and 3 received from the hardsqualified persons that exceed they aware of 6000 or the organization. A farmount is founded on lines 1, 2, and 1, 3, and 1,	· · · · · · · · · · · · · · · · · · ·	(4) 40.0	19,000					
include any *unusual grants.*)  Circas receipts from admissions, promote or facilities furnished in any activity that is related to the organization's trace-purp purpose  Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax reversues leved for the organization's trace-purpose in the program and the property of the program attain's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge is 1 Total. Add lines 1 through 5.  74 A mounts included on lines 1; 2, and 3 received from disqualified persons  b ments recited on lines 1; 2, and 3 received from disqualified persons  b ments recited on lines 1; 2, and 3 received from disqualified persons be received by a governmental unit to the organization without charge is 2. Add lines 7 and 7 to 4. Add lines 1 to the harm of the persons of the control of the service of the control of the persons of the persons of the control of the persons of the control of the persons of the control of the persons of the persons of the persons of the control of the persons of the control of the persons of the persons of the control of the persons of the control of the persons of the control of the persons of the person	- I							
2. Gross receipts from admissions, merchandres sold or services per formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose of Gross receipts from admissions that are not an unrelated trade or business under section 513.  1. Tax revenues leved for the organization's benefit and either paid to or expended on its behalf or expended on lise behalf.  5. The value of services or facilities furnished by a governmental unit to the organization without charge.  6. Total. Add lines 1 through 5.  7. a Amounts included on lines 1. 2, and 3 received from disqualified persons by Amounts included on lines 1. 2, and 3 received from disqualified persons between the services of the services o	*							
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Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	20 Private foundation. If the organization	did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructio	ns	

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
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CU	uon A. Ali 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		
D	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	3b		
_	organization made the determination.  Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	- 30		
٠	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	j	
<b>4</b> 2	Was any supported organization not organized in the United States ("foreign supported organization")? If			
7.4	"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		
С	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		ŀ	
	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? # "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN		ŀ	
	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		
þ	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		
	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		Ì	
	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		l	
	Part VI.	6	$\neg \neg$	
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			1
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	İ	
В	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	İ		
	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		<del></del>
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		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	9c		
Пα	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.  Was the organization subject to the excess business holdings rules of section 4943 because of section	<del>- 5</del> 0	<del>-  </del>	
Jd	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		J
ь	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		

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Pa	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	ļ	<u> </u>	
	below, the governing body of a supported organization?	11a	ļ	
b	A family member of a person described in (a) above?	11b	<b>↓</b>	
	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	L	
Sec	tion B. Type I Supporting Organizations		,	
		<u></u>	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	ŀ		
	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	1		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	<u> </u>		ш
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		I	
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	1		
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	<u> </u>		
Sec	tion D. All Type III Supporting Organizations		V	N-
_	Did the second tile and the second of the second of any principal in the least day of the Sittle month of the		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	<u> </u>		
^	organization's governing documents in effect on the date of notification, to the extent not previously provided?	<u> </u>		
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	2		
2	the organization maintained a close and continuous working relationship with the supported organization(s).  Purposes of the relationship described in (2) did the organization's supported organizations have a	-		
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	1		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	т з		
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. Complète line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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	<u></u>		
	activities but for the organization's involvement.	2b	L]	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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		

Sche	edule A (Form 990 or 990 EZ) 2019 FISCAL ALLIANCE FOUNDA	rion, i	NC.	8 <u>1-5302132 Page 6</u>
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ing trust on N	ov. 20, 1970 (explain in	Part VI). See instructions. Al
	other Type III non-functionally integrated supporting organizations must of	complete Sec	tions A through E.	<u></u>
Sect	tion 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		<u> </u>
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		<u> </u>
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		<u></u>
7	Other expenses (see instructions)	7	., ,	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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):			
а	Average monthly value of securities	1a		
<u>b</u>	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
<u>d</u>	Total (add lines 1a, 1b, and 1c)	1d		
е	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		ļ
_7_	Recoveries of prior-year distributions	7		<u>-</u>
_8_	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion 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	<u> </u>	
_3_	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		ļ
_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-functional	ally integrated	Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions).

hedule A (Form 990 or 990-EZ) 2019 FISCAL ALLI Part V Type III Non-Functionally Integrated 5		-1	1-5302132 Pag
	ogana) Supporting Orga	inizations (continued)	
ection D - Distributions			Current Year
1 Amounts paid to supported organizations to accomplish			
2 Amounts paid to perform activity that directly furthers ex	empt purposes of supported		
organizations, in excess of income from activity			<u></u>
Administrative expenses paid to accomplish exempt purposes	ooses of supported organization:	<u> </u>	
Amounts paid to acquire exempt-use assets	.,,		
5 Qualified set aside amounts (prior IRS approval required)		<u></u>	
6 Other distributions (describe in Part VI). See instructions	<u>.                                    </u>		
Total annual distributions. Add lines 1 through 6.			
3 Distributions to attentive supported organizations to which	Distributions to attentive supported organizations to which the organization is responsive		
(provide details in Part VI). See instructions.			
Distributable amount for 2019 from Section C, line 6			
Line 8 amount divided by line 9 amount		<u> </u>	
ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reason-	.		
able cause required- explain in Part VI). See instructions.			
Excess distributions carryover, if any, to 2019			
a From 2014			
<b>b</b> From 2015			
c From 2016			
<b>d</b> 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.			
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.			
Remaining underdistributions for years prior to 2019, if			
any. Subtract lines 3g and 4a from line 2. For result great	er		
than zero, explain in Part VI. See instructions.			
Remaining underdistributions for 2019. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
Excess distributions carryover to 2020. Add lines 3j			
and 4c.			

Schedule A (Form 990 or 990-EZ) 2019

Breakdown of line 7:
Excess from 2015
Excess from 2016
Excess from 2017
Excess from 2018
Excess from 2019

5

/12/2021

## SCHEDULE O (Form 990 or 990-EZ)

A G O

5

SCHEDULE 0 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.

2019
Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

FISCAL ALLIANCE FOUNDATION, INC.

 $\begin{array}{c} \text{Employer identification number} \\ 81 - 5302132 \end{array}$ 

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
INCREASE PUBLIC AWARENESS ABOUT THE PUBLIC BENEFITS TO BE DERIVED FROM
GREATER FISCAL RESPONSIBILITY, TRANSPARENCY, AND ACCOUNTABILITY IN
GOVERNMENT. THE ORGANIZATION WILL ALSO ENGAGE IN TARGETED PROVISION OF
LEGAL ASSISTANCE WHICH SERVES TO DEFEND HUMAN AND CIVIL RIGHTS OF THE
PUBLIC AT LARGE AND OF PRIVATE CITIZENS SECURED BY LAW WHEN ABRIDGED BY
THE ABSENCE OF A FISCALLY RESPONSIBLE, TRANSPARENT, AND ACCOUNTABLE
GOVERNMENT. ALL ACTIVITIES OF THE ORGANIZATION WILL BE FUNDED OUT OF
CONTRIBUTIONS FROM THE GENERAL PUBLIC AND GRANTS FROM OTHER
ORGANIZATIONS AND FOUNDATIONS.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 IS REVIEWED AND APPROVED BY THE CHAIR/PRESIDENT AND TREASURER
OF THE BOARD OF DIRECTORS PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
FISCAL ALLIANCE FOUNDATION MONITORS AND ENFORCES ITS BOARD'S CONFLICT OF
INTEREST POLICY BY HAVING EACH OF ITS OFFICERS AND DIRECTORS SIGN A
STATEMENT ON AN ANNUAL BASIS AFFIRMING THAT THE OFFICER AND DIRECTOR HAS
RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAS READ AND
UNDERSTANDS THE POLICY, AGREES TO COMPLY WITH THE POLICY, AND UNDERSTANDS
THAT THE ORGANIZATION MUST, IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION,
ENGAGE PRIMARILY IN ACTIVITIES THAT ACCOMPLISH ONE OR MORE OF ITS
TAX-EXEMPT PURPOSES.

FORM 990, PART VI, SECTION C, LINE 19:

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

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

932211 09-06-19