Return of Organization Exempt From Income Tax

LATINAS CONTRA CANCER

Doing business as NOT FOR PROFIT

Room/suite

SUITE

City or town, state or province, country, and ZIP or foreign postal code

SAN JOSE, CA 95112

Employer identification number

56-2412069

Telephone number

408-280-0811

Gross receipts:

463,081.

H(a) is this a group return

Yes

for subordinates?

No

H(b) Are all subordinates included?

Yes

If "No," attach a list. See instructions

H(c) Group exemption number

L

Website:

WWW.LATINASCONTRACANCER.ORG

Form of organization:

Corporation

Year of formation:

2004

State of legal domicile:

CA

Summary

1. Briefly describe the organization's mission or most significant activities: RAISING CANCER AWARENESS, COUNSELING, TRANSLATION & TRANSPORTATION.

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)

6

4. Number of independent voting members of the governing body (Part VI, line 1b)

6

5. Total number of individuals employed in calendar year 2021 (Part V, line 2a)

0

6. Total number of volunteers (estimate if necessary)

15

7a. Total unrelated business revenue from Part VIII, column (C), line 12

0

7b. Net unrelated business taxable income from Form 990-T, Part I, line 11

0

8. Contributions and grants (Part VIII, line 1h)

441,051.

458,945.

9. Program service revenue (Part VIII, line 2g)

430,000.

0.

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d)

63.

136.

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

0.

4,000.

12. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

441,114.

463,081.

13. Grants and similar amounts paid (Part IX, column (A), lines 1-3)

0.

0.

14. Benefits paid to or for members (Part IX, column (A), line 4)

0.

0.

15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

136,776.

263,202.

16a. Professional fundraising fees (Part IX, column (A), line 11e)

0.

0.

b. Total fundraising expenses (Part IX, column (D), line 25)

13,101.

17. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

261,371.

144,581.

18. Total expenses. Add lines 17-18 (must equal Part IX, column (A), line 25)

398,147.

407,783.

19. Revenue less expenses. Subtract line 18 from line 12

42,967.

55,298.

Part I | 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.

Signature of officer

DARCY GREEN, CEO

Type or print name and title

Preparer's name

JOSE A. PALMA

Preparer's signature

Date

Check if filed electronically

PTIN

00044633

Form's EIN

72-1557137

Phone number

(408) 998-4920

May the IRS discuss this return with the preparer shown above? See instructions

Yes

No

Form 990 (2021)
1 Briefly describe the organization’s mission:
TO CREATE AN INCLUSIVE HEALTH CARE SYSTEM THAT PROVIDES SERVICES TO
THE UNSERVED LATINO POPULATION AROUND ISSUES OF BREAST AND OTHER
CANCERS.

2 Did the organization undertake any significant program services during the year which were not listed on the
prior Form 990 or 990-EZ?  \[\square \text{Yes} \, \text{X} \, \text{No}\]
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?  \[\square \text{Yes} \, \text{X} \, \text{No}\]
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 $316,100., including grants of $\[\_\_\_\_\_] \}) (Revenue $\[\_\_\_\_\_\_] \})
INFORMATIONAL WEB SITE, EDUCATIONAL PROGRAMS, ORGANIZED WALK-A-THONS
AND COUNSELING OF CANCER PATIENTS.

4b (Code \[\_\_\_] \} Expenses $\[\_\_\_\_\_] \), including grants of $\[\_\_\_\_\_\_] \}) (Revenue $\[\_\_\_\_\_\_] \})

4c (Code \[\_\_\_] \} Expenses $\[\_\_\_\_\_\_] \), including grants of $\[\_\_\_\_\_\_] \}) (Revenue $\[\_\_\_\_\_\_] \})

4d Other program services (Describe on Schedule O.)
(Expenses $\[\_\_\_\_\_] \), including grants of $\[\_\_\_\_\_] \}) (Revenue $\[\_\_\_\_\_\_] \})

4e Total program service expenses \[\_\_\_\_\_\_] \} 316,100.,
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Note: All Form 990 filers are required to complete Schedule O.

**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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
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<td>1c</td>
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Form 990 (2021)
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.  
Yes No  
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.  
3a Did the organization have unrelated business gross income of $1,000 or more during the year?  
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.  
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)?  
b If "Yes," enter the name of the foreign country.  
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  
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?  
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  
7 Organizations that may receive deductible contributions under section 170(c).  
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?  
b If "Yes," did the organization notify the donor of the value of the goods or services provided?  
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  
d If "Yes," indicate the number of Forms 8282 filed during the year.  
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  
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?  
9 Sponsoring organizations maintaining donor advised funds.  
a Did the sponsoring organization make any taxable distributions under section 4966?  
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  
10 Section 501(c)(7) organizations. Enter:  
a Initiation fees and capital contributions included on Part VIII, line 12  
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  
11 Section 501(c)(12) organizations. Enter:  
a Gross income from members or shareholders  
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)  
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  
13 Section 501(c)(29) qualified nonprofit health insurance issuers.  
a Is the organization licensed to issue qualified health plans in more than one state?  
Note: See the instructions for additional information the organization must report on Schedule O.  
b Enter the amount of reserves the organization is required to maintain in the states in which the organization is licensed to issue qualified health plans.  
c Enter the amount of reserves on hand.  
14a Did the organization receive any payments for indoor tanning services during the tax year?  
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  
15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?  
b If "Yes," see the 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?  
b If "Yes," complete Form 4720, Schedule O.  
17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?  
If "Yes," complete Form 6069.
LATINAS CONTRA CANCER

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

If there are material changes 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.

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?

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?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization’s assets?

6 Did the organization have members or stockholders?

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?

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

8a The governing body?

8b Each committee with authority to act on behalf of the governing body?

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

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

10a Did the organization have local chapters, branches, or affiliates?

10b 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?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

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?

15a The organization's CEO, Executive Director, or top management official

15b Other officers or key employees of the organization

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?

16b 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?

Section C. Disclosure

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

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.

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.

20 State the name, address, and telephone number of the person who possesses the organization's books and records

Form 990 (2021)

102006 12-09-21

12291031 1235562 7108 2021 04021 LATINAS CONTRA CANCER 7108 7
## 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

1. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
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<td>(1) DARCIE L. GREEN</td>
<td>40.00</td>
<td>95,282</td>
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<td>(2) CARLA PEREZ</td>
<td>10.00</td>
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<td>(3) DARLENE TORRES</td>
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<td>(6) DR. ROBERT BELTRAN</td>
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<td>(7) LORI J. CONTANZO</td>
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<td>(8) RON LIND</td>
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Form 990 (2021)
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<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</th>
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<td>c Total from continuation sheets to Part VII, Section A</td>
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<td>d Total (add lines 1b and 1c)</td>
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<td>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</td>
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<td>3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If &quot;Yes,&quot; complete Schedule J for such individual</td>
<td>Yes</td>
<td>No</td>
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<td>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 &quot;Yes,&quot; complete Schedule J for such individual</td>
<td>Yes</td>
<td>No</td>
<td>4 X</td>
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<tr>
<td>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 &quot;Yes,&quot; complete Schedule J for such person</td>
<td>Yes</td>
<td>No</td>
<td>5 X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 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 |

Form 990 (2021)
## LATINAS CONTRA CANCER

### Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>Revenue excludd from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td>(A) Total revenue</td>
</tr>
<tr>
<td>1b Membership dues</td>
<td>(B) Related or exempt function revenue</td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>(C) Unrelated business revenue</td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td>80,000.</td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>378,945.</td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f</td>
<td></td>
</tr>
<tr>
<td>1h Total, Add lines 1a-1f</td>
<td>458,945.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
</tr>
<tr>
<td>2g Total, Add lines 2a-2f</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td>136. 136.</td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
</tr>
<tr>
<td>6a Gross rents</td>
<td>(i) Real</td>
</tr>
<tr>
<td>6b Less: rental expenses</td>
<td>(ii) Personal</td>
</tr>
<tr>
<td>6c Rental income or (loss)</td>
<td></td>
</tr>
<tr>
<td>6d Net rental income or (loss)</td>
<td></td>
</tr>
<tr>
<td>7a Gross amount from sales of assets other than inventory</td>
<td>(i) Securities</td>
</tr>
<tr>
<td>7b Less: cost or other basis and sales expenses</td>
<td>(ii) Other</td>
</tr>
<tr>
<td>7c Gain or (loss)</td>
<td></td>
</tr>
<tr>
<td>8a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18</td>
<td>8a</td>
</tr>
<tr>
<td>8b Less: direct expenses</td>
<td></td>
</tr>
<tr>
<td>8c Net income or (loss) from fundraising events</td>
<td></td>
</tr>
<tr>
<td>9a Gross income from gaming activities. See Part IV, line 19</td>
<td>9a</td>
</tr>
<tr>
<td>9b Less: direct expenses</td>
<td></td>
</tr>
<tr>
<td>9c Net income or (loss) from gaming activities</td>
<td></td>
</tr>
<tr>
<td>10a Gross sales of inventory, less returns and allowances</td>
<td></td>
</tr>
<tr>
<td>10b Less: cost of goods sold</td>
<td></td>
</tr>
<tr>
<td>10c Net income or (loss) from sales of inventory</td>
<td></td>
</tr>
<tr>
<td>11a RENTAL INCOME</td>
<td>531390</td>
</tr>
<tr>
<td>11b</td>
<td>4,000.</td>
</tr>
<tr>
<td>11c</td>
<td>4,000.</td>
</tr>
<tr>
<td>11d All other revenue</td>
<td></td>
</tr>
<tr>
<td>11e Total, Add lines 11a-11d</td>
<td>4,000.</td>
</tr>
<tr>
<td>12 Total revenue. See Instructions</td>
<td></td>
</tr>
<tr>
<td>12c Total revenue. See Instructions</td>
<td>463,081.</td>
</tr>
<tr>
<td>12d</td>
<td>4,136.</td>
</tr>
<tr>
<td>12e</td>
<td>0.</td>
</tr>
<tr>
<td>12f</td>
<td>0.</td>
</tr>
</tbody>
</table>

Form 990 (2021)
<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>95,282</td>
<td>68,628</td>
<td>18,027</td>
<td>8,627</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>125,311</td>
<td>103,595</td>
<td>20,632</td>
<td>1,084</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>24,237</td>
<td>18,173</td>
<td>6,064</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>18,372</td>
<td>14,643</td>
<td>2,988</td>
<td>741</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Legal</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Accounting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)</td>
<td>1,804</td>
<td>1,804</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>2,771</td>
<td>2,771</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>17,490</td>
<td>16,151</td>
<td></td>
<td>1,339</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>1,248</td>
<td>496</td>
<td></td>
<td>752</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a PATIENT ADVOCATE</td>
<td>24,943</td>
<td>24,943</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b PARKING/MILEAGE REIMBURSEMENT</td>
<td>17,600</td>
<td>17,600</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c GRANT WRITING</td>
<td>17,555</td>
<td>17,555</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d ACCOUNTING</td>
<td>14,575</td>
<td>14,575</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e All other expenses</td>
<td>39,035</td>
<td>25,906</td>
<td>11,819</td>
<td>1,310</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>407,783</td>
<td>316,100</td>
<td>78,582</td>
<td>13,101</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Check if Schedule O contains a response or note to any line in this Part IX.
<table>
<thead>
<tr>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cash - non-interest-bearing</td>
<td>125,993</td>
<td>275,498</td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>4 Accounts receivable, net</td>
<td>15,000</td>
<td>155,224</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>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)</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>7 Notes and loans receivable, net</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>8 Inventories for sale or use</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>9 Prepaid expenses and deferred charges</td>
<td>1,000</td>
<td>4,176</td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>29,844</td>
<td>7,543</td>
</tr>
<tr>
<td>10b Less: accumulated depreciation</td>
<td>23,607</td>
<td>6,237</td>
</tr>
<tr>
<td>11 Investments - publicly traded securities</td>
<td></td>
<td>11</td>
</tr>
<tr>
<td>12 Investments - other securities. See Part IV, line 11</td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13 Investments - program-related. See Part IV, line 11</td>
<td></td>
<td>13</td>
</tr>
<tr>
<td>14 Intangible assets</td>
<td></td>
<td>14</td>
</tr>
<tr>
<td>15 Other assets. See Part IV, line 11</td>
<td>1,850</td>
<td>1,850</td>
</tr>
<tr>
<td>16 Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>151,386</td>
<td>442,985</td>
</tr>
<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>26,332</td>
<td>155</td>
</tr>
<tr>
<td>18 Grants payable</td>
<td></td>
<td>260,627</td>
</tr>
<tr>
<td>19 Deferred revenue</td>
<td></td>
<td>19</td>
</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td></td>
<td>20</td>
</tr>
<tr>
<td>21 Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td>21</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>22</td>
</tr>
<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td>23</td>
</tr>
<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td>24</td>
</tr>
<tr>
<td>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</td>
<td>0</td>
<td>1,851</td>
</tr>
<tr>
<td>26 Total liabilities. Add lines 17 through 25</td>
<td>26,332</td>
<td>262,633</td>
</tr>
</tbody>
</table>

**Liabilities**

**Organizations that follow FASB ASC 958, check here ▶ [X]**

**Organizations that do not follow FASB ASC 958, check here ▶ [ ]**

<table>
<thead>
<tr>
<th>Net Assets or Fund Balances</th>
<th>(A)</th>
<th>(B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>27 Net assets without donor restrictions</td>
<td></td>
<td>27</td>
</tr>
<tr>
<td>28 Net assets with donor restrictions</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>29 Capital stock or trust principal, or current funds</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>30 Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>31 Retained earnings, endowment, accumulated income, or other funds</td>
<td>125,054</td>
<td>180,352</td>
</tr>
<tr>
<td>32 Total net assets or fund balances</td>
<td>125,054</td>
<td>180,352</td>
</tr>
<tr>
<td>33 Total liabilities and net assets/fund balances</td>
<td>151,386</td>
<td>442,985</td>
</tr>
</tbody>
</table>

Form 990 (2021)
### Part XI: Reconciliation of Net Assets

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>463,081.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>407,783.</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>55,298.</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>125,054.</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>180,352.</td>
</tr>
</tbody>
</table>

### Part XII: Financial Statements and Reporting

1. Accounting method used to prepare the Form 990:  
   - [ ] Cash  
   - [X] Accrual  
   - [ ] Other  

   If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.  

2a. Were the organization's financial statements compiled or reviewed by an independent accountant?  
   - [ ] Yes  
   - [X] No  

   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

2b. Were the organization's financial statements audited by an independent accountant?  
   - [ ] Yes  
   - [X] No  

   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

2c. 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?  
   - [ ] Yes  
   - [X] No

3b. 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.