

2019 Annual Information Return

Calendar Year 2019 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____.

Corporation/Organization name
INFORMATION TRUST EXCHANGE GOVERNING ASSOCIATION California corporation number
3988420

Additional information. See instructions.
 FEIN
81-5393558

Street address (suite or room)
P.O. BOX 367 PMB no.

City
WILLIAMSTOWN State
MA Zip code
01267

Foreign country name Foreign province/state/county Foreign postal code

- A** First Return Yes No
- B** Amended Return Yes No
- C** IRC Section 4947(a)(1) trust Yes No
- D** Final Information Return?
 - Dissolved Surrendered (Withdrawn) Merged/Reorganized
 - Enter date: (mm/dd/yyyy)
- E** Check accounting method: (1) Cash (2) Accrual (3) Other
- F** Federal return filed? (1) 990T (2) 990PF (3) Sch H (990) (4) Other 990 series
- G** Is this a group filing? See instructions Yes No
- H** Is this organization in a group exemption Yes No
 If "Yes," what is the parent's name?
- I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions. Yes No
- J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. Yes No
- K** Is the organization exempt under R&TC Section 23701g? Yes No
 If "Yes," enter the gross receipts from nonmember sources . . . \$ _____
- L** If organization is a public charity exempt under R&TC Section 23701d and meets the filing fee exception, check box.
 No filing fee is required.
- M** Is the organization a Limited Liability Company? Yes No
- N** Did the organization file Form 100 or Form 109 to report taxable income? Yes No
- O** Is the organization under audit by the IRS or has the IRS audited in a prior year? Yes No
- P** Is federal Form 1023/1024 pending? Yes No
 Date filed with IRS _____

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

Receipts and Revenues	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	61,255	00
	2 Gross dues and assessments from members and affiliates	2		00
	3 Gross contributions, gifts, grants, and similar amounts received.	3	2,000	00
	4 Total gross receipts for filing requirement test. Add line 1 through line 3.			
	This line must be completed. If the result is less than \$50,000, see General Information B . . .	4	63,255	00
	5 Cost of goods sold	5		00
	6 Cost or other basis, and sales expenses of assets sold	6		00
	7 Total costs. Add line 5 and line 6	7		00
8 Total gross income. Subtract line 7 from line 4	8	63,255	00	
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18	9	133,794	00
	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	-70,539	00
Filing Fee	11 Total payments	11		00
	12 Use tax. See General Information K	12		00
	13 Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15 Filing fee \$10 or \$25. See General Information F	15	10	00
	16 Penalties and Interest. See General Information J	16		00
	17 Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result	17	10	00

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

Signature of officer Title Date Telephone

Paid Preparer's Use Only Preparer's signature Date Check if self-employed PTIN Firm's FEIN Firm's name (or yours, if self-employed) and address Telephone

05/15/2020 P01071637 27-1294850 (413) 664-6777

SAWYER, LLC 1310 MASS MOCA WAY, NORTH ADAMS, MA 01247

May the FTB discuss this return with the preparer shown above? See instructions Yes No

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

Receipts from Other Sources	1 Gross sales or receipts from all business activities. See instructions	●	1	60,945	00
	2 Interest	●	2	310	00
	3 Dividends	●	3		00
	4 Gross rents	●	4		00
	5 Gross royalties	●	5		00
	6 Gross amount received from sale of assets (See Instructions)	●	6		00
	7 Other income. Attach schedule	●	7		00
	8 Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8	61,255	00
9 Contributions, gifts, grants, and similar amounts paid. Attach schedule	●	9		00	
10 Disbursements to or for members.	●	10		00	
11 Compensation of officers, directors, and trustees. Attach schedule	●	11	46,068	00	
12 Other salaries and wages	●	12	48,985	00	
Expenses and Disbursements	13 Interest	●	13		00
	14 Taxes	●	14		00
	15 Rents	●	15	100	00
	16 Depreciation and depletion (See instructions)	●	16		00
	17 Other Expenses and Disbursements. Attach schedule	●	17	38,641	00
	18 Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18	133,794	00

Schedule L Balance Sheet	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		78,451		● 7,912
2 Net accounts receivable				●
3 Net notes receivable				●
4 Inventories				●
5 Federal and state government obligations				●
6 Investments in other bonds				●
7 Investments in stock				●
8 Mortgage loans				●
9 Other investments. Attach schedule				●
10 a Depreciable assets				
b Less accumulated depreciation	()	()		
11 Land				●
12 Other assets. Attach schedule				●
13 Total assets		78,451		7,912
Liabilities and net worth				
14 Accounts payable				●
15 Contributions, gifts, or grants payable				●
16 Bonds and notes payable				●
17 Mortgages payable				●
18 Other liabilities. Attach schedule				
19 Capital stock or principal fund				●
20 Paid-in or capital surplus. Attach reconciliation				●
21 Retained earnings or income fund		78,451		● 7,912
22 Total liabilities and net worth		78,451		7,912

Schedule M-1 Reconciliation of income per books with income per return			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000			
1 Net income per books	●	7 Income recorded on books this year not included in this return. Attach schedule	●
2 Federal income tax	●	8 Deductions in this return not charged against book income this year. Attach schedule	●
3 Excess of capital losses over capital gains	●	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year. Attach schedule	●	10 Net income per return. Subtract line 9 from line 6	
5 Expenses recorded on books this year not deducted in this return. Attach schedule	●		
6 Total. Add line 1 through line 5			

Line 11, Part II (CA 199) - Compensation of Officers, Directors, and Trustees

46,068

	Name	Street Address	City	State	Zip Code	Title	Time Devoted	Compensation
1	Bill Densmore					Executive Director	35	46,068
2	Scott Bradner					Director and Treasurer	0	
3	Jo Ellen Green Kaiser					Director (Chair)	0	
4	William E. Buzenberg					Director	0	
5	Linda K. Miller					Director	0	
6	John Taysom					Director	0	

Line 17, Part II (CA 199) - Other Deductions

1	Pension plans, employee benefits	1	<u>0</u>
2	Legal fees	2	<u>0</u>
3	Accounting fees	3	<u>473</u>
4	Other professional fees	4	<u>5,535</u>
5	Travel, conferences, and meetings	5	<u>25,506</u>
6	Printing and publications	6	<u>0</u>
7	Special events direct expenses	7	<u>0</u>
8	Office expenses	8	<u>388</u>
9	Other expenses	9	<u>6,739</u>
10		10	
11		11	
12	Total	12	<u>38,641</u>