May the IRS discuss this return with the preparer shown above? (see instructions)......

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

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Sign Here

Paid

Preparer

Use Only

*- Form 990

(Rev. January 2020)

Check if applicable:

Address change

Amended return

Name change

Initial return

Website: ►

TEEA0101L 01/21/20

Form 990 (2019)

X Yes

	n 990 (2019) Assistance League of Riverside,	95-2394523	Page 2
Par	tilli Statement of Program Service Accomplishments	1	
	Check if Schedule O contains a response or note to any line in this Part III		, X
1			,
	Assistance League volunteers transforming the lives of children	through communi	tv
	programs		
	*		
			+-
2	Did the organization undertake any significant program services during the year which were not listed on the pr	ior	
	Form 990 or 990-EZ?	Yes	X 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 se	ervices? Yes	X No
	If "Yes," describe these changes on Schedule O.		<u></u>
4	Describe the organization's program service accomplishments for each of its three largest program ser	vices, as measured by e	Ynerises
	Describe the organization's program service accomplishments for each of its three largest program ser Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	ns to others, the total ex	kpenses,
	and revenue, if any, for each program service reported.		
•			
4 a	a (Code:) (Expenses \$ 211,007. including grants of \$ 173,411.))
	Operation School Bell promotes student success by providing new	school clothes,	
	shoes, backpacks, school supplies, reading books, and hygiene ki	ts to homeless	and
	economically disadvantaged students, as recommended by school di	stricts. Since	1967,
	more than 50 years ago, this program has served more than 41,000		
	*		
			
46	(Code: ') (Expenses \$ 73,603. including grants of \$ 60,674.))
	College Bound encourages students to seek education beyond the s		
	Since 1975, this program has distributed SAT study guides, worth	more than \$189	,000
	to 16 local high schools in 3 school districts, provided more th		
	college visitation scholarships for local high school students,	and \$64,000 in	
	college scholarships for tuition.		

	(Code: \(\frac{1}{2}\) (Evenesses \(\frac{1}{2}\) (Code: \(\frac{1}{2}\) (Evenesses \(\frac{1}{2}\) (Code: \(\frac{1}2\)	Paulanua ¢	
40	: (Code:) (Expenses \$51,185. including grants of \$38,790.) (I		 '
	Snack Attack delivers 950 bags of nutritious food items to local		Friday_
	during the school year. The bags are given by the schools to ch	<u>ildren who are</u>	
	homeless or from low income neighborhoods to alleviate their hun	<u>ger over the we</u>	ekend.
	Since its inception in 2007, this program has distributed over	<u>285,000 snack b</u>	ags_to_
	17 elementary schools in Riverside County, California School for	the Deaf, and	an
	agency serving youths in crisis.		
			
4 d	Other program services (Describe on Schedule O.) See Schedule O		
	(Expenses \$ 65,642. including grants of \$ 6,061.) (Revenue \$)
40	Total program service expenses ► 401, 437.	· · · · · · · · · · · · · · · · · · ·	<u></u>

ABOJ D M 95-2394523 Page 3

PartIIV Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete X Schedule A...... 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . 2 Х 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..... Х Δ X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, 6 X X Х 8 X 9 X 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI..... X Х 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 Х 11 c 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 X X e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X..... f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X Х 111 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII X 12a 12 b Х Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E... 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States?...... 14a 14b X X 15 Х 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, X 18 lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Х 19 Х 20a 20b b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?..... Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and IL

For	m 990 (2019) Assistance League of Riverside, 95-2 itilV Checklist of Required Schedules (continued)	394523	F	Page
-	sale from the dance selections (continued)		Yes	l M-
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	IX, 22	X	No
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		x
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24ь		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pilor year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entit or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	tv I		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions).			
i	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		х
1	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Fait IV	28b		X
1	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conserva contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part t	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV and Part V, line 1.	34		Х
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
١	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35ь		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Note: All Form 990 filers are required to complete Schedule Q	38	х	
<u>R</u> ai	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	

treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.	· · · · · · · · · · · · · · · · · · ·	37		<u> X</u>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b a Note: All Form 990 filers are required to complete Schedule O	and 19?	38	$ \mathbf{x} $	
Partive Statements Regarding Other IRS Filings and Tax Compliance	·-···			
Check if Schedule O contains a response or note to any line in this Part V				. [
		T	Yes	
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	7			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reporta	able gaming			
(gambling) winnings to prize winners?		1 c	X	
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Form 990 (2019) Assistance League of Riverside,

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

			Yes	No
2;	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return 2 a			
1	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		'
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ı	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O	3 b		
4:	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)?	4 a		х
ł	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).			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6	a 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?	6 a		x
1	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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?	7 a	X	
ı	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Х	
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			v
	Form 8282?	7с		<u> </u>
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 e		X
	Did the organization receive any funds, directly of indirectly, to pay premiums on a personal benefit contract?	7 f		$\frac{\hat{x}}{x}$
	g If the organization, during the year, pay premiums, directly or multerly, on a personal benefit contract?	/		<u> </u>
•	as required?	7 g		<u> </u>
•	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		i
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
ı	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9ь		
10	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
ı	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			, 1
11	Section 501(c)(12) organizations. Enter			ıl
	a Gross income from members or shareholders			. 1
ı	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a is the organization licensed to issue qualified health plans in more than one state?	13a		
٠	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			oxdot
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
ì	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14 b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	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		. 000	(2010)
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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. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year . . If there are material differences in voting rights among members 1 a of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent . . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . 2 X 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?...... X 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ٠X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . 5 $\overline{\mathbf{x}}$ 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . See . Schedule. O X 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, See Sch O stockholders, or persons other than the governing body? Х 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. a The governing body? Яa x X b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10 a 10 a Did the organization have local chapters, branches, or affiliates? ... b if 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes?. X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?...... b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done . See . Schedule O X 13 13 Did the organization have a written whistleblower policy?........... X 14 Did the organization have a written document retention and destruction policy?...... 14 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? X X **b** Other officers or key employees of the organization 15_b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990 T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records Patti Braymer 3707 Sunnyside Drive Riverside CA 92506 951.682.3445 BAA Form 990 (2019) TEEA0106L 07/31/19

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Form 990 (2019)	ASSISTANCE	League	OI	Riverside.

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

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

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

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

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

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

		(C)								
(A) Name and title	(B) Average hours per	15	both dir	ector	officer /truste		1	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) Gayle McThomas	50								.)	
President	0	Х		X			<u> </u>	0.	0.	0.
(2) Barbara Heublein	_ 18 _			.,						
President Elect	0 -	Х		X	-	<u> </u>		0.	0.	0.
(3) Lorraine Nygren Secretary	5	х		Х				0.	0.	0.
(4) Teresa Denham	6	 ^		<u> </u>			⊢	<u> </u>	0.	<u> </u>
Vice President		х		X				0.	0.	0.
(5) Judy Anderson	7	*		**					· ·	
Vice President	0	Х		Х				0.	0.	0.
(6) Margie Baillod	24									
Vice President	0	X		Х				0.	0.	0.
7) Linda Wolff	3									-
Vice President	0	Х		X				0.	0.	0.
(8) Penny Smith	11_									
Vice President	0	X		X				0.	0.	0.
(9) Lynn Fumey	19_								_	_
Treasurer	0	Х		X	_	ļ	_	0.	0.	0.
(10) Nancy Franks	14_									
Board Member	0	Х			<u> </u>			0.	0.	0.
(11) Sue Davis Board Member	$-\frac{14}{0}$	х			ļ			0.	0.	0.
(12)			\dashv		┢			0.	U.	
(13)										*******
(14)										
	L						L	<u> </u>		

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intal the section A. Onicers, Directors, Tre	istees,	ney		ibie	oye	es,	ane	a nignest Con	ipensated Emp	loyees (continued)
(A) Name and lille	Average hours per week	Offic	cer a	Po: theck	quec	than is bot or/trus	itee)	compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)					-				· · · · · · · · · · · · · · · · · · ·	
<u>(16)</u>						ļ !	_			
(17)					<u> </u>		_			
(18)					 	,	 -			
(19)										
(20)					ļ.—		-			
(21)					/					
(22)					-					
(23)										
(24)										
(25)										
1 b Subtotal							▶	0.	0. 0.	0. 0.
d Total (add lines 1b and 1c)		sted	abov		vho	recen	ved	0. more than \$100,00	0. 0 of reportable comp	0. pensation
3 Did the organization list any former officer, direc	tor, truste	e, ke	у ег	mple	уеє	, or	high	nest compensaled	employee	Yes No
on line 1a? If 'Yes,' compléte Schedule J for suc 4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	<i>h individu</i> reportabl	<i>al</i> le coi	mpe	ensa	tion	and	oth	er compensation	from	3 X
such individual	•	• •		• • •			· · ·			4 X
for services rendered to the organization? If 'Yes Section B. Independent Contractors	,' comple	te So	hea	lule	J fo	r suc	h p	erson		5 X
 Complete this table for your five highest compen compensation from the organization. Report compen 	sated inde sation for	epend the ca	dent alen	dar y	ntra year	ctors endii	tha ng v	nt received more the vith or within the or	han \$100,000 of ganization's tax yea	· · · · · · · · · · · · · · · · · · ·
(A) Name and business add	ress							(B) Description (of services	(C) Compensation
Total number of independent contractors (including by	out not limi	ted to	tho	se l	isted	l abo	ve)	who received more	than	
\$100,000 of compensation from the organization		TEEAO	108	07/3	31/19					Form 990 (2019)
were a			···	0//3	. 11 13					. 5111. 454 (2013)

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII...... (B) Related or (A) Total revenue (C) Unrelated (D) Revenue excluded from tax under sections 512-514 exempt business function revenue revenue 1 a Federated campaigns...... Grants 1 a b Membership dues. . . . 1 b 22,553 c Fundraising events 1 c 44,524 Contributions, Gifts, and Other Similar An d Related organizations... . . . 1 d e Government grants (contributions)... 1 e 23,500. f All other contributions, gifts, grants, and similar amounts not included above. . . 390,399 g Noncash contributions included in 327,514 lines 1a-1f......... h Total. Add lines 1a-1f...... 480,976 **Business Code** Service Revenue Program f All other program service revenue. . g Total. Add lines 2a-2f. Investment income (including dividends, interest, and other similar amounts) 668 668 Income from investment of tax-exempt bond proceeds. Royalties (i) Real (ii) Personal 6 a Gross rents. 6a 6b **b** Less: rental expenses c Rental income or (loss) 6c d Net rental income or (loss) (ii) Other (i) Securities 7 a Gross amount from sales of assets 7 a other than inventory b Less: cost or other basis 7b and sales expenses c Gain or (loss) ... 7с d Net gain or (loss) 8 a Gross income from fundraising events Revenue (not including \$ 44,524. of contributions reported on line 1c). 8a 96,273 Other b Less: direct expenses..... 8ъ 27,867. c Net income or (loss) from fundraising events...... 68,406 68,406 9 a Gross income from gaming activities. See Part IV, line 19 9 a 9ь **b** Less: direct expenses..... c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less. returns and allowances 10a <u>305,261</u> 10b b Less: cost of goods sold . . c Net income or (loss) from sales of inventory..... **Business Code** Miscellaneous 525. d All other revenue.... e Total. Add lines 11a-11d.... 525

Total revenue. See instructions....

550,575

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX..... (A) Total expenses (B) (C) (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and Fundráising general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 48,632 48,632 Grants and other assistance to domestic individuals See Part IV, line 22...... 230,304 230,304 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members..... Compensation of current officers, directors, trustees, and key employees . . . 0. 0 0. 0 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). 0 0 0 0. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)..... 9 Other employee benefits..... 10 Payroll taxes..... 11 Fees for services (nonemployees): a Management. **b** Legal c Accounting. . . . 8.000 8,000 d Lobbying e Professional fundraising services. See Part IV, line 17. f Investment management fees. g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) . . . 708 473. 1,237 56. 13 Office expenses. ... Information technology.'. Royalties 16 Occupancy... ... 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials. 10,998 4,400 3,849 2,749. Conferences, conventions, and meetings. 20 Interest.. 10,520 10,520. Payments to affiliates . . 3,086. 42,437. 22 Depreciation, depletion, and amortization. . 77,158 31,635 3,219. 1,484 10,183. 5,480 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.) 49,600 49,600 a Program supplies 13,363. b Utilities_____ 972 24,297 9,962 759 18,981 7.782 10,440. c Repairs and maintenance 9,290. d <u>Supplies</u> 18,655 8,746. 619 21,459. 30,192 4,423. 4,310. 103,665. 538,757. 25 Total functional expenses. Add lines 1 through 24e 401,437. 33,655 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720) ...

Part X | Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X..... (A) Beginning of year (B) End of year 74,352 1 93,687. Savings and temporary cash investments 462,239 2 449,424. 3 700. 3 4,333. Accounts receivable, net 4 6,583. 3,914. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)....... 6 7 Inventories for sale or use 8 Assets 138,705 126,883. Prepaid expenses and deferred charges 9 11,641. 10,960. 2,654,531 1,835,980 10 c 808,147. 1,846,384. 11 11 Investments – publicly traded securities Investments - other securities. See Part IV, line 11... 12 13 Investments - program-related. See Part IV, line 11. 13 14 14 15 2,530,200. 16 2,535,585. Accounts payable and accrued expenses . . . 23,960 17 18,576. Grants payable 18 19,401. 19 Deferred revenue. 19 20,450 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons....... 22 23 24 Unsecured notes and loans payable to unrelated third parties 24 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 Ω . 25 Total liabilities. Add lines 17 through 25..... 37,977. 44,410 26 26 Organizations that follow FASB ASC 958, check here or Fund Balances and complete lines 27, 28, 32, and 33. 2,465,256 2,481,774. 27 Net assets without donor restrictions 28 20,534 15,834. Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds. 29 **Net Assets** 30 30 31 31 32 Total net assets or fund balances. 2,485,790. 32 2,497,608. Total liabilities and net assets/fund balances 2,530,200. 2,535,585.

		95-239452	23	Pag	ge 12
P.a	rtiXI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				[
1	Total revenue (must equal Part VIII, column (A), line 12)		5.5	50,5	75.
2	Total expenses (must equal Part IX, column (A), line 25).			38,7	
3	Revenue less expenses. Subtract line 2 from line 1	3		1,8	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,48		
5	Net unrealized gains (losses) on investments	5		<u>, .</u>	
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,49	7,6	08.
Ra	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. X
				Yes	No
7	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
	in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev	newed on a			
	separate basis, consolidated basis, or both:	nemed on d		- 4	
	Separate basis Consolidated basis Both consolidated and separate basis				
	b Were the organization's financial statements audited by an independent accountant?		2 b	x	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se	parate			
	basis, consolidated basis, or both:	•			
	X Separate basis Consolidated basis Both consolidated and separate basis			1	
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	iudit,	2 c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. See Schedule O				
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing				

TEEA0112L 01/21/20

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Form 990 (2019)

BAA

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Assistance League of Riverside,

Employer identification number

OMB No. 1545-0047

2019

Opento Rublic

Inspection

California 95-2394523 Partil 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). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a landagrant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

X An organization that normally receives. (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts of 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 addition 509(a)(2). (Complete Part III.) 10 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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 III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g Provide the following information about the supported organization(s). (vi) Amount of other (i) Name of supported organization (ii) EIN (III) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed support (see instructions) support (see instructions) in your governing document? Yes No (A) (B) (C) (D) (E)

Sche	edule A (Form 990 or 990 EZ) 201	9 Assistan	ce League	of Riverside	е,	95-239	4523	Page 2
Par	tell Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) ar	nd 170(b)(1	YAY	vi)
	(Complete only if you checked organization fails to qualify	l the box on line 5.	7. or 8 of Part I or	r if the organization	failed to qualify ur	nder Part III. If	the	. ,
Sec	tion A. Public Support	211201 1110 10010 110	nod below, pieds	- Complete Fait ii	···			
	endar year (or fiscal year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019		(f) Total
1							+	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.	,		1			1	
3	The value of services or facilities furnished by a governmental unit to the organization without charge		J					
4	Total. Add lines 1 through 3						\neg	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line that exceeds 2% of the amount shown on line 11, column (f)	\						
6	Public support. Subtract line 5 from line 4	<u>``.</u>					_	·
Sec	tion B. Total Support			· _I	, · · · · · · · · · · · · · · · · ·	,		
	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019		(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).							
11	Total support. Add lines 7 through 10	,						
12	Gross receipts from related activ	ities, etc. (see ins	structions)		V		12	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, tl	nird, fourth, or fifth t	ax xoar as a socti	on 501(c)(3)		▶ []
Sec	tion C. Computation of Pu	blic Support P	ercentage					
	Public support percentage for 20 Public support percentage from	-	• • •		1	_	14 15	%
	33-1/3% support test – 2019. If the and stop here. The organization	he organization di	d not check the	box on line 13, an	d line 14 is 33-17	ے St. or more, o		
b	33-1/3% support test—2018. If the and stop here. The organization	ie organization did	d not check a box	k on line 13 or 16a	a, and line 15 is 3	13-1/3 ¹ % or mo	ore, ch	neck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts a	and circumstance	s' tost, check this	hox and stop he	re. Explaiñ in	`Part \	VI how
b	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	est—2018. If the or meets the 'facts-a d-circumstances' i	rganization did no and-circumstance test. The organiz	ot check a box on es' test, check this ation qualifies as	line 13, 16a, 16b box and stop he	, or 17a, and re. Explain in	line 1	5 is 10% VI how the

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

Partill 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.)

	tion A. Public Support						
	dar year (or fiscal year beginning in) >	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any 'unusual grants.')	F10 470	475 400	507 000	470 060	400 076	0 475 110
2	Gross receipts from admissions,	512,479.	475,482.	527,920.	478,262.	480,976.	2,475,119.
-	merchandise sold or services						
	performed, or facilities furnished in any activity that is						
	related to the organization's						
_	tax-exempt purpose	303,927.	368,753.	445,577.	474,700.	401,534.	1,994,491.
3	Gross receipts from activities that are not an unrelated trade		İ				
	or business under section 513						0.
4	Tax revenues levied for the	<u> </u>			7		<u></u>
	organization's benefit and either paid to or expended on					ļ	
	its behalf		ļ			Ì	0.
5	The value of services or					· · · · · · · · · · · · · · · · · · ·	
	facilities furnished by a governmental unit to the						
	organization without charge						0.
	Total. Add lines 1 through 5	816,406.	844,235.	973,497.	952,962.	882,510.	4,469,610.
7a	Amounts included on lines 1, 2, and 3 received from			•			
	disqualified persons	0.	1,760.	3,495.	2,760.	1,650.	9,665.
b	Amounts included on lines 2		2,,00.	37433.	27700.	1,000.	
	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or						
	1% of the amount on line 13			_			_
	for the year	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	0.	1,760.	3,495.	2,760.	1,650.	9,665.
8	Public support. (Subtract line 7c from line 6.).						4,459,945.
Sec	tion B. Total Support		L				
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	816,406.	844,235.	973,497.	952,962.	882,510.	4,469,610.
_	Gross income from interest, dividends,	010, 400.	044,233.	313,431.	332, 302.	002,510.	4,405,010.
	payments received on securities loans,			ļ			
	rents, royalties, and income from	864.	817.	739.	779.	668.	3,867.
	similar sources					000.1	3,001.
b	similar sources Unrelated business taxable						
b	Unrelated business taxable income (less section 511						
b	Unrelated business taxable income (less section 511 taxes) from businesses	001.					0.
	Unrelated business taxable income (less section 511	864.	817.	739.	779.	668.	<u>0.</u> 3,867.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b			739.	779.	668.	
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b			739.	779.	668.	
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b			739.	779.	668.	
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b			739.	779.	668.	3,867.
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b			739.	779.		3,867.
11 12	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b			739.	779.	668. 525.	3,867.
11 12	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	864.	817.			525.	3,867. 0. 525.
11 12 13	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	864. 817,270.	817. 845,052.	974,236.	953,741.	525. 883,703.	3,867. 0. 525. 4,474,002.
11 12 13 14	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	817,270. is for the organiza	845, 052.	974,236.	953,741. r fifth tax year as	525. 883,703.	3,867. 0. 525. 4,474,002.
11 12 13 14 Sec	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	817,270. is for the organiza stop here blic Support P	845, 052.	974,236. d, third, fourth, o	953,741. r fifth lax year as	525. 883,703. a section 501(c)(3,867. 0. 525. 4,474,002. 3)
11 12 13 14 Sec 15	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	817,270. is for the organiza stop here blic Support P	845, 052. stion's first, second recentage (f), divided by limited to the second recent and the second recent recent and the second recent re	974,236. d, third, fourth, o	953,741. r fifth lax year as	525. 883, 703. a section 501(c)(3,867. 0. 525. 4,474,002. 3) ► □ 99.69 %
11 12 13 14 Sec 15 16	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	817,270. is for the organiza stop here. blic Support P 19 (line 8, column 2018 Schedule A,	845, 052. ation's first, second recentage of (f), divided by line Part III, line 15	974,236. d, third, fourth, o	953,741. r fifth lax year as	525. 883,703. a section 501(c)(3,867. 0. 525. 4,474,002. 3)
11 12 13 14 Sec 15 16	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b	817,270. is for the organiza stop here blic Support P 119 (line 8, column 2018 Schedule A, estment Incon	845, 052. Ition's first, second ercentage (f), divided by lin Part III, line 15 ne Percentage	974, 236. d, third, fourth, on the 13, column (f)	953,741. r fifth tax year as	525. 883,703. a section 501(c)(c)	3,867. 0. 525. 4,474,002. 3) 99.69 % 99.71 %
11 12 13 14 Sec 15 16 Sec 17	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b	817,270. is for the organizatop here blic Support Polip (line 8, column 2018 Schedule A, estment Incon or 2019 (line 10c,	845,052. stion's first, second ercentage n (f), divided by lin Part III, line 15 ne Percentage column (f), divide	974, 236. d, third, fourth, o 	953, 741. r fifth tax year as	525. 883,703. a section 501(c)(c) 	3,867. 0. 525. 4,474,002. 3) 99.69 % 99.71 % 0.09 %
11 12 13 14 Sec 15 16 Sec 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b	817,270. is for the organizatop here. blic Support Polig (line 8, column 2018 Schedule A, restment Incomor 2019 (line 10c, rom 2018 Schedul	845,052. ation's first, second ercentage of (f), divided by lin Part III, line 15 ne Percentage column (f), divide e A, Part III, line	974,236. d, third, fourth, o	953,741. r fifth tax year as	525. 883,703. a section 501(c)(: 	3,867. 0. 525. 4,474,002. 3. 99.69 % 99.71 % 0.09 % 0.11 %
11 12 13 14 Sec 15 16 Sec 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b	817,270. is for the organizatop here blic Support P 119 (line 8, column 2018 Schedule A, estment Incon or 2019 (line 10c, rom 2018 Schedul the organization d	845, 052. stion's first, second ercentage of (f), divided by lin Part III, line 15 ne Percentage column (f), divide e A, Part III, line ind not check the b	974, 236. d, third, fourth, o	953,741. r fifth tax year as	525. 883,703. a section 501(c)(c) 	3,867. 0. 525. 4,474,002. 3) 99.69 % 99.71 % 0.09 % 0.11 % d ine 17
11 12 13 14 Sec 15 16 Sec 17 18 19a	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b	817,270. is for the organizatop here. blic Support P 19 (line 8, column 2018 Schedule A, estment Incon or 2019 (line 10c, rom 2018 Schedul the organization de this box and stop	845, 052. stion's first, second ercentage n (f), divided by lin Part III, line 15 ne Percentage column (f), divide e A, Part III, line id not check the be here. The organi	974, 236. d, third, fourth, one 13, column (f) d by line 13, column ox on line 14, and sation qualifies a	953,741. r fifth tax year as	525. 883,703. a section 501(c)(3,867. 0. 525. 4,474,002. 3) 99.69 % 99.71 % 0.09 % 0.11 % d line 17 X
11 12 13 14 Sec 15 16 Sec 17 18 19a b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b	817,270. is for the organizatop here blic Support P 19 (line 8, column 2018 Schedule A, estment Incomor 2019 (line 10c, rom 2018 Schedul the organization de this box and stop the organization de the	845, 052. stion's first, second ercentage (f), divided by lin Part III, line 15 ne Percentage column (f), divide e A, Part III, line id not check the be here. The organis d not check a box and stop here. The	974, 236. d, third, fourth, or the 13, column (f) d by line 13, column to con line 14, and cation qualifies a	953, 741. r fifth tax year as	525. 883,703. a section 501(c)(3,867. 0. 525. 4,474,002. 3) 99.69 % 99.71 % 0.09 % 0.11 % d line 17 1 ► X 1/3%, and nization. ► □

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 Organizatio	upporting Organizatio	ns
---------------------------------------	-----------------------	----

	· · · · · · · · · · · · · · · · · · ·		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		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
	• •	- 3a		ļ
	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(s)(2)? If 'Yes,' describe in Fart VI when and how the organization made the determination.	3b		
				-
•	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3c		
4	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		<u>_</u>
1	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.	نا4		<u> </u>
•	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.			
	all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the	ļ	,	
	organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
ı	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 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of			
	the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).]
ρ	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,'			
٠	complete Part I of Schedule L. (Form 990 or 990-EZ).	8		
9:	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI.			
		9a		
ŧ	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		
(Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.	9c		l
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding			
	certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
t	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	***************************************	

rai	(1) Supporting Organizations (Continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a]
ı	A family member of a person described in (a) above?	11b		
	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		
	tion B. Type I Supporting Organizations	لتننا		
	Non-21-19po t-dapporting organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at			
	all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sac	tion E. Type III Functionally Integrated Supporting Organizations	لــــــــا		
360	tion E. Type in Functionally integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	nstruc	tıons).	
2	Activities Test. Answer (a) and (b) below.	ļ	Yes	No
i	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		
ı	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the			
	organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
í	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>			
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its			
BAA	supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b	20 ==	2010
	TECANACE ATION SCHOOL A / CAPM 99/	, or w	フロ・ヒノ	LZU 14

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain in st complete Sections A	Part VI). See through E.
Sec	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		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8_		
Sec	tion 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):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			2
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
_1	Cash deemed hold for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7_		
8	Minimum Asset Amount (add line 7 to line 6)	8		,
Sec	tion C – Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	* •]
2	Enter 85% of line 1.	2		,
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
_4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5	·	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	· · · · · · · · · · · · · · · · · · ·	
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated		
BAA			Schedule A (F	orm 990 or 990-EZ) 2019

ran		apporting Organiza	dons (continued)	
Section	on D — Distributions			Current Year
1 A	lmounts paid to supported organizations to accomplish exempt pu	rposes		
	amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organizations	,	
3 A	Administrative expenses paid to accomplish exempt purposes of su	apported organizations		
4 /	Amounts paid to acquire exempt-use assets			
5 (Qualified set-aside amounts (prior IRS approval required)			
6 (Other distributions (describe in Part VI). See instructions.			
7 1	otal annual distributions. Add lines 1 through 6			
	distributions to attentive supported organizations to which the organization Part VI). See instructions.	on is responsive (provide	details	
9 C	Distributable amount for 2019 from Section C, line 6			
10 L	ine 8 amount divided by line 9 amount			
Section	on 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			
С	Inderdistributions, if any, for years prior to 2019 (reasonable ause required — explain in Part VI). See instructions.			
3 E	excess distributions carryover, if any, to 2019	1		
a F	rom 2014			
b F	rom 2015			
C F	rom 2016		1	1
d F	rom 2017			
e F	rom 2018			
f T	otal of lines 3a through e			
g A	Applied to underdistributions of prior years			
h A	Applied to 2019 distributable amount			
iC	Carryover from 2014 not applied (see instructions)			
j F	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
	Distributions for 2019 from Section D, ne 7. \$			
a A	applied to underdistributions of prior years			
bρ	opplied to 2019 distributable amount	1		
c F	Remainder. Subtract lines 4a and 4b from 4.			
S	temaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than ero, explain in Part VI. See instructions.			
fi	Remaining underdistributions for 2019. Subtract lines 3h and 4b rom line 1. For result greater than zero, explain in Part VI. See instructions.			
7 E	excess distributions carryover to 2020. Add lines 31 and 4c.			
	reakdown of line 7:		,	-C-45
	xcess from 2015		<u></u>	
	xcess from 2016			<u> </u>
	excess from 2017			
	excess from 2018			
		<u> </u>		
e E	xcess from 2019	<u> </u>	<u> </u>	<u> </u>

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Schedule A (Form 990 or 990-EZ) 2019

(Form 990 or 990-EZ) 2019	Assistance	League of	Riverside.	95-2394523	Page
Part IV, Section D, lines 2 and	tion. Provide the e 4b, 4c, 5a, 6, 9a, 9b, d 3; Part IV, Section	explanations requ 9c, 11a, 11b, an E. lines 1c, 2a,	ured by Part II, Ind and 11c; Part IV, Se 2b. 3a. and 3b: Pa	ne 10; Part II, line 17a or 17b;Part III, line 12 ection B, lines 1 and 2; Part IV, Section C, lin art V, line 1; Part V, Section B, line 1e; Part V this part for any additional information.	; Part IV

Part III, Line 12 - Othe	r Income	,				•				
Nature and Source	<u> </u>	2	019	2	018	 2017	<u> </u>	2016		2015
Other	mata 1	\$	<u>525.</u>			 			, , , , , , , , , , , , , , , , , , , 	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 2019

Open (o Public inspection /

Name of the organization Assistance League of Riverside,

Employer identification number

	California			95-2394523
Pa	Organizations Maintaining Dono Complete if the organization ansy	r Advised Funds or Other vered 'Yes' on Form 990 F	Similar Funds or Actart IV. line 6	counts.
	- Complete in the Organization and	(a) Donor advised fund		Funds and other accounts
1	Total number at end of year	(1) 20113. 2011302 131.	(3)	TOTAL CONTRACTOR CONTR
2	Aggregate value of contributions to (during year) .			· · · · · · · · · · · · · · · · · · ·
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and don are the organization's property, subject to the	or advisors in writing that the assorganization's exclusive legal cor	ets held in donor advise	d funds
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit	rs, and donor advisors in writing t	hat grant funds can be u for any other purpose co	ised only
Pa	Conservation Easements. Complete if the organization answ	wered 'Yes' on Form 990, F	art IV, line 7.	
1				
	Preservation of land for public use (for examp	ole, recreation or education)	Preservation of a his	torically important land area
	Protection of natural habitat		Preservation of a cer	tified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization h last day of the tax year	eld a qualified conservation contrib	ution in the form of a conse	ervation easement on the
				Held at the End of the Tax Year
	a Total number of conservation easements		2a	
	b Total acreage restricted by conservation easer	ments	2b	
	c Number of conservation easements on a certif	hed historic structure included in	(a) 2 c	
	d Number of conservation easements included in structure listed in the National Register.	n (c) acquired after 7/25/06, and		
3	Number of conservation easements modified, tran tax year ►	sferred, released, extinguished, or t	erminated by the organizal	ion during the
4	Number of states where property subject to conse	rvation easement is located >		
5	Does the organization have a written policy regard enforcement of the conservation easemen			
6	Staff and volunteer hours devoted to monitoring, in	nspecting, handling of violations, ar	d enforcing conservation e	asements during the year
7	Amount of expenses incurred in monitoring, insper-	cting, handling of violations, and en	forcing conservation easer	nents during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requi	rements of section 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization repinclude, if applicable, the text of the footnote to conservation easements.	orts conservation easements in it of the organization's financial state.	s revenue and expense : ements that describes th	statement and balance sheet, and se organization's accounting for
P.a	Organizations Maintaining Collective Complete if the organization answers	ctions of Art, Historical Trowered 'Yes' on Form 990, F	easures, or Other Si Part IV, line 8.	milar Assets.
1	a If the organization elected, as permitted under historical treasures, or other similar assets hel Part XIII the text of the footnote to its financia	ld for public exhibition, education	, or rescarch in furtheran	nd balance sheet works of art, ce of public scrvicc, provide in
	b If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	FASB ASC 958, to report in its r public exhibition, education, or res	evenue statement and basearch in furtherance of pu	alance sheet works of art, blic service, provide the
	(i) Revenue included on Form 990, Part VIII,	line 1		►\$
2	If the organization received or held works of art, hamounts required to be reported under FASB	istorical treasures, or other similar a ASC 958 relating to these items:	essets for financial gain, pr	ovide the following
	a Revenue included on Form 990, Part VIII, line			►\$
	b Assets included in Form 990, Part X			▶\$

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

Part VII Land. Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		277,000.	الإنائن بريات	277,000.
b Buildings		673,522.	281,196.	392,326.
c Leasehold improvements		1,636,385.	480,521.	1,155,864.
d Equipment	[39,049.	25,309.	13,740.
e Olher		28,575.	21,121.	7,454.
Total. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X, co	olumn (B), line 10c.)		1,846,384.

b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?....

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Schedule D (Form 990) 2019

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain

(11)

PartiXII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements. 550.575. 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d ... 2 e 3 Subtract line 2e from line 1, 550,575. 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)..... 550,575. PartiXIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 538,757. 2 Amounts included on line 1 but not on Form 990. Part IX, line 25: b Prior year adjustments. 2 c d Other (Describe in Part XIII.) 2e 3 Subtract line 2e from line 1 3 538.757. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4a b Other (Describe in Part XIII.)...... 40 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 538,757. PartiXIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

Part X - FASB ASC 740 Footnote

The Chapter has applied the provisions of Financial Accounting Standard Board's Accounting Standards Codification (ASC) 740-10, Accounting for Uncertainty in Income Taxes. Under ASC 740-10, nonpublic enterprises, including nonprofit organizations, are required to record a tax liability when substantial uncertainties exist as to whether certain income is exempt from federal, state and local income tax. As of May 31, 2020, the Chapter had no substantial uncertain income tax positions.

Schedule D (Form 990) 2019

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

2019
Open to Rubits
Inspection

Name of the organization Assistance League of Riverside, Employer Identification number California 95-2394523 Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Solicitation of non-government grants Internet and email solicitations Solicitation of government grants C Phone solicitations Special fundraising events In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key b If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (iv) Gross receipts from activity (i) Name and address of individual (or retained by) fundraiser listed in (ii) Activity (or retained by) have custody or control of contributions? or entity (fundraiser) organization column (i) Yes No 1 2 3 5 6 8 9 10 0. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Sche	dule	G (Form 990 or 990-EZ) 2019 Assista	nce League of	Riverside,	95-23	94523 Page 2
Par	HIII	Fundraising Events. Complete if more than \$15,000 of fundraising	the organization ar event contributions	swered 'Yes' on Fo	orm 990, Part IV, li	ne 18, or reported
R	.	List events with gross receipts gre	cater than \$5,000. (a) Event #1 Spring event (event type)	(b) Event #2 Annual giving (event type)	(c) Other events None (total number)	(d) Total events (add column (a) through column (c))
そのと しょうしゅん	1	Gross receipts	97,008.	41,394.		138,402.
Ĕ	2	Less: Contributions	3,130.	41,394.		44,524.
	3	Gross income (line 1 minus line 2)	93,878.			93,878.
	4	Cash prizes				<u> </u>
D	5	Noncash prizes				
D-RECT	6	Rent/facility costs	23,086.		····	23,086.
	7	Food and beverages				
MAPAZWEA	8	Entertainment				
SE	9	Other direct expenses	4,355.	426.		4,781.
3		Direct expense summary. Add lines 4 three Net income summary. Subtract line 10 from				27,867. 66,011.
Par	_	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Yes			
#CZ#<		\$10,000 0111 01111 330 EE, WIG 00.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
E	1	Gross revenue				
	2	Cash prizes				
DIRECT	3	Noncash prizes	·		<u></u>	
C S T E	4	Rent/facility costs	· 			,
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes%	Yes%	
	7	Direct expense summary. Add lines 2 three	ough 5 in column (d)			
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	ın (d)		
9	Ent	er the state(s) in which the organization co	nducts gaming activitie	es:		
		ne organization licensed to conduct gaming lo,' explain:	activities in each of th	nese states?		. Yes No

b If 'Yes,' explain:

JULIE	dule G (FORM 330 OF 330-EZ) 20	19 ASSISTANCE LE	ague of Riverside,	95-	2394523	Page 3
11	Does the organization conduct g	jaming activities with no	nmembers?		Yes	No
12	Is the organization a grantor, bene administer charitable gaming?	ficiary or trustee of a trust	t, or a member of a partnership or othe	er entity formed to	Yes	No
	Indicate the percentage of gaming				,	
a	The organization's facility				13a	, %
					13b	8
14	Enter the name and address of the	person who prepares the	organization's gaming/special events	books and records:	 	
,	Name ►					
	Address >					
15 a	Does the organization have a co	intract with a third party	from whom the organization receive	es gaming revenue?	····· Tyes	No
•	of gaming revenue retained by t	he third party > \$, 110 organization			
c	If 'Yes,' enter name and address	s of the third party:			-	
	Name ►	`				
	Address					1
16	Gaming manager information:					
	Name >					
	Gaming manager compensation	<i>></i> \$				
	Description of services provided	•				
	Director/officer	Employee	Independent contracto		i	\
17	Mandatory distributions:		о .			
	•	state law to make charital	ole distributions from the gaming proce	eds to retain the		
	state gaming license?					No
t			be distributed to other exempt organiz	zations or spent in the		
D.S	organization's own exempt activ			All line Ob colum	and (w) and (
Par	and Part III, lines 9, information. See inst	9b, 10b, 15b, 15c, 1	explanations required by Par 6, and 17b, as applicable. A	lso provide any a	additional	v),
			•			
						•
					•	
DA.					/Forms 000 == 000) E7\ 2010
BAA			TEEA3703L 08/19/19	Schedule G	(Form 990 or 99	J-E4) 2019

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SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

	2019
_	

OMB No 1545-0047

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

Employer identification nun 95-2394523

% |X Yes Assistance League of Riverside, Partill General Information on Grants and Assistance

Partill Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Polytechnic High School 5450 Victoria Avenue							College visitation
			5,625.	0			scholarships
(2)					-		
(3)							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			•				
(4)							
(5)							
		ļ	4				
(9)	•	REC	REC				
		AI EIVI					
<u>0</u>		PR 2	#				
		7 ENT	55				
(8)		ΤY	•				
		DEI	17				
2 Enter total number of section 501(c)(3) and government organiz	3) and government or	rganizations listed	in the line 1 table				0
3 Enter total number of other organizations listed in the line 1 table.	ions listed in the line	1 table					1
BAA For Paperwork Reduction Act Notice, see the Instructions for	e, see the Instruction	s for Form 990.		TEEA3901L 07/10/19	61/01/20	Schedul	Schedule I (Form 990) (2019)

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TEEA3902. 07/10/19

Schedule I (Form 990) (2019) Assistance League of Riverside,	eague of Rivers	side,		0,	95-2394523 Page 2	ge 2
Partill Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	Domestic Individu ace is needed.	ials. Complete if th	ie organization ans	wered 'Yes' on Form	990, Part IV, line 22. Part III	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
1 New School Clothing	1,676		177,036. Cost	Cost	New school clothing	
2 Weekend Snack Bags	1,500		38,790. Cost	Cost	Weekend snacks for children	1
3 SAT Books	950		14,478. Cost	Cost	New SAT Books	ŀ
4						
ζ						
9			-			ļ
7						
Partily Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	ide the information	required in Part I,	line 2; Part III, co	umn (b); and any other	r additional information.]

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

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

OMB No 1545-0047

2019

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Department of the Treasury Internal Revenue Service Go to www

Name of the organization Assistance League of Riverside,
California

Employer identification number

95-2394523

Part Types of Property											
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	(d) od of dete contribution	rmini on an	ng nounts			
1	Art - Works of art										
2	Art - Historical treasures				· · · · · ·	- -					
3	Art - Fractional interests										
4	Books and publications		······································		 						
5	Clothing and household goods	Х	``_ : 	319,334.	FMV						
6	Cars and other vehicles		*	013/001.							
7	Boats and planes			ļ -							
8	Intellectual property										
9	Securities - Publicly traded					•					
10	Securities - Closely held stock					· · · · · · · · · · · · · · · · · · ·					
11	Securities - Partnership, LLC, or trust interests		 		· · · · · · · · · · · · · · · · · · ·						
12	Securities - Miscellaneous		······································								
13	Qualified conservation contribution — Historic structures		· · · · · · · · · · · · · · · · · · ·								
14	Qualified conservation contribution — Other										
15	Real estate - Residential		'·			112-					
16	Real estate - Commercial			C		#55					
17	Real estate - Other					<u> </u>					
18	Collectibles				V D (
19	Food inventory				AP'	27	1				
20	Drugs and medical supplies			Dr	*OF						
21	Taxidermy		· · · · · · · · · · · · · · · · · · ·	1	CEIVED	ENTIT	ורו ע	DT			
22	Historical artifacts		• •				ו טו	<u> </u>			
23	Scientific specimens										
24	Archeological artifacts										
25	Other ► (Pqm supplies)	Х		7,380.	EM7/						
26	Other Other	X		800.							
27	Other ().			000.	1 174						
28	Other (***								
29	Number of Forms 8283 received by the organization d										
	organization completed Form 8283, Part IV, Done	e Acknowled	gement		29						
						Ye	s	No			
30a	30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that										
it must hold for at least three years from the date of the initial contribution, and which isn't required to be used											
	for exempt purposes for the entire holding period?				[30 a		<u>X</u>			
	b If 'Yes,' describe the arrangement in Part II.										
31	ns? [31		X							
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?						32 a		x			
b	If 'Yes,' describe in Part II.				Ì						
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.											
	<u> </u>					<u> </u>		<u></u>			

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

Schedule M (Form 990) 2019

Page 2

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

SCHEDULE O (Form 990 or 990-EZ)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization Assistance League of Riverside, California

Employer Identification number 95-2394523

Form 990, Part III, Line 4d - Other Program Services Description

Hearts and Hands provides cultural, educational, and social opportunities to children and youth by collaborating with schools and other nonprofit groups. Hearts and Hands has the flexibility to work with other organizations to identify and respond to specific needs, and to increase community awareness of our organization and its other programs.

Bear Pals began in 1988 and distributes new teddy bears and Fun Kits to area hospitals, Riverside County Police and Sheriff's Department, and the Juvenile Court system to provide comfort and quiet play activities to children who are patients or victims in traumatic situations. More than 43,000 teddy bears have been distributed since the beginning of this program.

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Other includes the following:

Teen Support provides assistance to teens in need, including those who are aging out of foster care and entering college. Since its inception in 2013, this program has provided more than \$94,000 in goods, services, and scholarships.

Children's Outreach supports social and educational development of economically disadvantaged and special needs children through tuition scholarships, supplies, and activities provided through The Carolyn E. Wylie Center for Children, Youth & Families.

Adopt-a-Family provides economically disadvantaged families with food, decorations, and gifts during the holiday season.

Employer identification number 95–2394523

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

The membership is composed of voting and nonvoting members. Membership as a voting or nonvoting member is open to all individuals, without discrimination, as long as they comply with the responsibilities of members.

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

The Organization's members elect the board members at the annual election meeting.

Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders

Voting members elect the governing board of directors. In addition, the membership approves the budget and any other matters relating to time and money.

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

This form 990 was reviewed and accepted by the Board of Directors prior to filing.

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

The Board of Directors review the Conflict of Interest Policy on a regular basis and members acknwledge receipt of the policy on an annual basis.

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

Our annual report, which include summaries of our financial position and activities, is made available on our website. Governing documents, policies and financial statements are made available upon request.

Form 990, Part XII, Line 2 - Change of Oversight or Selection Process

The Treasurer and Finance Committee oversee the audit, which is reviewed and accepted by the Board of Directors.