## Form **990**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047 **2019** 

Inspection

Open to Public

<u>A</u>	For t	the 2	2019 calendar y	ear, or tax year begin	ning	07-	01 , 20	19, and	d ending	0(	6-30 , <b>20</b> 20			
В	Check	if app	plicable:	C Name of organizationEle	ectronic Registra	ation Info	ormatic	n Ce	enter Inc.	D Emp	loyer identification number			
X	Addre	ss cha	ange	Doing business as							45-5389681			
	Name	chan	qe	Number and street (or P.C	), box if mail is not delivered to st	reet address)		R	oom/suite	E Telep	hone number			
	Initial i			1201 Connecticu		,			600		(202)695-3464			
			/terminated		ince, country, and ZIP or foreign	nostal code				G Gros	ss receipts			
一	Amen			Washington, DC		pootal oodo			\$ 1,220,91					
一			pending		cipal officer: Shane Haml	in			H(a) la thia a					
ш	Applic	auon	pending	Same as C above	•									
_	Tay as	t	status: X 501			(0)(1) 01	527							
<u>'</u>					(Insert no.) 4947	(a)(1) or	527				st. (see instructions)			
	Webs			ricstates.org	🗆				H(c) Grou					
	Form of	_	anization: X Cor	poration Trust Asso	ciation Other		L Year of fo	rmation:	2012 M	State of le	gal domicile: <b>DE</b>			
ГС	$\overline{}$	_		Ui4:1::										
	1				on or most significant acti									
ce		e voter												
Activities & Governance		ľ	registratio	on lists and edu	cate eligible c	itizens of	n how t	o re	egister to	vote.				
Jeri	١.	2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.												
9						•					l			
ಶ					ning body (Part VI, line 1						31			
ies				-	of the governing body (F		•				31			
<u>₹</u>	5				calendar year 2019 (Part						3			
Act	1				ecessary)						40			
•	7				Part VIII, column (C), line						0			
	_	b N	Net unrelated bu	siness taxable income	from Form 990-T, line 39			• • •		- 7b	0			
								-	Prior Year		Current Year			
•	8				1h)				90'	7,558	1,220,680			
υğ	5				2g)						0			
Revenue	10	<b>0</b> li	nvestment incor	me (Part VIII, column (A	), lines 3, 4, and 7d) • •			• • •		90	234			
å	11	1 (	Other revenue (F	Part VIII, column (A), lin	es 5, 6d, 8c, 9c, 10c, and	11e)					0			
	12	2 T	Total revenue - a	add lines 8 through 11 (r	nust equal Part VIII, colu	mn (A), line 12	)		90'	7,648	1,220,914			
	1:	3 (	Grants and simil	ar amounts paid (Part I)	K, column (A), lines 1-3)			• • •			0			
	14	4 E	Benefits paid to or for members (Part IX, column (A), line 4)								0			
s	1	5 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								2,649	413,468			
Expenses	10	6a F	Professional fun	draising fees (Part IX, c	olumn (A), line 11e) • •			$\cdot \cdot \cdot  $			0			
per	.	b T	Total fundraising	expenses (Part IX, colu	ımn (D), line 25) 🕨			0						
ŭ	17	7 (	Other expenses	(Part IX, column (A), lin	es 11a-11d, 11f-24e)			[	599	9,239	641,745			
	18	<b>8</b> T	Total expenses.	Add lines 13-17 (must	equal Part IX, column (A)	, line 25) •		[	89:	1,888	1,055,213			
	19	9 F	Revenue less ex	penses. Subtract line 1	8 from line 12 · · · ·				1!	5,760	165,701			
ō	ses								Beginning of Cur	rent Year	End of Year			
eets	ছ   20	0 T	โotal assets (Paเ	rt X, line 16)				[	92:	3,126	1,093,889			
Net Assets or	g 2	1 T	Total liabilities (P	art X, line 26)				[	129	9,105	151,896			
	_				ne 21 from line 20 · · ·				79	4,021	941,993			
Pa	art II		Signature	Block										
					n, including accompanying sche- cer) is based on all information o				f my knowledge and I	pelief, it is				
uuc	, corre	ot, an	d complete. Declara	uon or preparer (other trian on	bery is based on an imormation o	i willon preparer in	as any known	cugc.						
0:-			Shane H	Hamlin										
Sig	jn	- 1	Signature of o	officer						Da	ate			
He	re		Shane H	Hamlin, Executiv	ve Director									
			Type or print	name and title										
_	_	_	Print/Type prepare	r's name	Preparer's signature		Date	_	Check	if	PTIN			
Pa			John Mull	ins	John Mullins		02-12-	-2021	L self-en	nployed	P01429307			
	par		Firm's name	Mullins,	PC				Firm's EIN					
Us	e Oı	nly	Firm's address	7625 Wisc	consin Avenue				Phone no.					
				Bethesda	MD 20814					202-	770-6371			
May	the	IRS	discuss this retu		own above? (see instruct	ions)					· · · · X Yes No			

Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? • • • • • • • • • • • • • • • • • • •	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	•		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			l
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		v
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		Х
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more	11h		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		v
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		Х
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E- · · · · · · · · · · · · · · · · · ·	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	446		l
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV · · · · · · · · · · · · · · · · · ·	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
. •	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
20 a	· · · · · · · · · · · · · · · · · · ·	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

9) Electronic Registration Information Center Inc. Checklist of Required Schedules (continued) Part IV

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J · · · · · · · · · · · · · · · · · ·	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_ X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I · · · · · · · · · · · · · · · · · ·	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part	21		X
20	IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
_	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
С	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			
	conservation 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 I · · · · · · · · ·	31		_ X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II · · · · · · · · · · · · · · · · · ·	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
05-	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	2Eh		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
30	related organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			X
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part .V		<u></u>	Ш
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	i

19) Electronic Registration Information Center Inc.

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? • • • • • • • • • • • • • • • • • • •	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? • • • • • • • • • • • • • • • • • • •	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor? • • • • • • • • • • • • • • • • • • •	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? • • • • • • • • • • • • • • • • • • •	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? • • • •	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • • • • • • • • • • • • •	7h		х
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		Х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a		Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • • • • • • • • • • • • •			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year • • • • • • • • • • • • • • • • • • •			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C 1/1a		140		77
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		X
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O · · · · · · · · · · · · · · · · · ·	140		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		v
	If "Yes," see instructions and file Form 4720, Schedule N.	10		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? • • • • • • • • • • • • • • • • • • •	16		v
10	If "Yes," complete Form 4720, Schedule O.	10		Х
	ii 155, complete i offit 7120, conodulo C.			

Part VI

9) Electronic Registration Information Center Inc. 45-5389681 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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year · · · · · · · · · · 1a 31			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent · · · · · · · · · · 1b 31			
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		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body? • • • • • • • • • • • • • • • • • • •	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? • •	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? • • •	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Oregon			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	The Organization (202)695-3464, 1201 Connecticut Ave NW, Suite 600, Washington, DC	2003	6	

For	m 99	90 C	201	9)

Electronic Registration Information Center Inc.

45-5389681

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

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

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

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

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

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

Official and post in the distribution and the distr	1				(C)	,				
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average	,				han one		Reportable	(E) Reportable	(F) Estimated amount
name and the	hours					s both a /trustee		compensation	compensation	of other
	per week							from the	from related	compensation
	(list any	or In		Q	Ž	요 표	Ę	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and
	hours for related	divid dire	stitu	Officer	ву ег	nplo	Former	(W-2/1099-WIGC)	(11 2, 1000 111100)	related organizations
	organizations	Individual trustee or director	Institutional trustee	·	Key employee	st co yee	7			
	below	ruste	trus		yee	mpe				
	dotted line)	Эе	stee			Highest compensated employee				
						ed				
(1) Judd Choate	1.00									
Director		Х						0	0	0
(2) Stuart Holmes	1.00									
Director		Х						0	0	0
(3) Steve Sandvoss	1.00									
Director		х						0	0	0
(4) Jonathan Marks	1.00									
Director		х						0	0	0
(5) Donald Kersey II	1.00									
Secretary		х		Х				0	0	0
(6) Rob Rock	1.00									
Chair		х		х				0	0	0
(7) Alice Miller	1.00									
Director		х						0	0	0
(8) Wayne Thorley	1.00									
Immediate Past Chair		х		Х				0	0	0
(9) Janlne Petty	1.00									
Treasurer		х		х				0	0	0
(10)Sherri Hadskey	1.00									
Director		х						0	0	0
(11)Justin Lee	1.00									
Director		х						0	0	0
(12)Chrissy Peters	1.00									
Director		х						0	0	0
(13)Gail Fenumiai	1.00									
Director		х						0	0	0
(14)Clay Helms	1.00									
Director		Х						0	0	0

For	m 99	90 C	201	9)

Electronic Registration Information Center Inc.

45-5389681

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

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

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

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

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

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

Officer this box if ficting the organization for any feet					(C)	,				
					sition			_		
(A)	(B)	(do r	not che			han one		(D)	(E)	(F)
Name and title	Average hours					s both a		Reportable compensation	Reportable compensation	Estimated amount of other
	per week	ΟΠΙΟ	er and	a a aii	rector	/trustee	)	from the	from related	compensation
	(list any		_		_	е т	Т	organization	organizations	from the
	hours for	ndiv dir	nstit	Officer	(ey	ligh:	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	related	dual	tion	뾱	empl	est c oyee	er			
	organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				
	dotted line)	tee	ıste			ensa				
	·		U			ated				
(1) Jordan Fuchs	1.00									
Director		х						0	0	0
(2) Steve Trout	1.00									
Director		х						0	0	0
(3) Linda Lamone	1.00									
Director		х						0	0	0
(4) David Maeda	1.00									
Director		х						0	0	0
(5) Kendra Lane	1.00									
Director		х						0	0	0
(6) Mandy Vigil	1.00									
Director		х						0	0	0
(7) Mandi Grandjean	1.00									
Director		х						0	0	0
(8) Marci Andino	1.00									
Director		х						0	0	0
(9) Chris Piper	1.00									
Director		х						0	0	0
(10)Will Senning	1.00									
Director		х						0	0	0
(11)Meagan Wolfe	1.00									
Vice Chair		х		х				0	0	0
(12)Ted Bromley	1.00									
Director		х	Ш					0	0	0
(13)Anthony Albence	1.00									
Director		х						0	0	0
(14)Maria Matthews	1.00									
Director		х						0	0	0

Part VII Section A. Officers, Directo	rs, Trustees, Key Em	ployees	s, and	d Hig	ghes	st Con	nper	nsated Employees	(continued)			
·				(	(C)			-				
(A)	(B)			Pos	sition			(D)	(E)		(F)	
Name and title	Average	,				han one s both a		Reportable	Reportable	Esti	nated an	nount
Name and the	hours					r/trustee		compensation	compensation		of other	
	per week							from the	from related	Co	mpensa	tion
	(list any	or In	- <u>"</u>	ᄋၞ	Ke	en Hi	6-J	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org	from the anization	and
	hours for related	direc	i iii	Officer	y en	ghes	Former	,	,	relate	ed organi	zations
	organization	s tor tal tr	onal		Key employee	t cor						
	below	or director	nstitutional trustee		/ee	nper						
	dotted line)	Ф	lee			Highest compensated employee						
(15)Heidi_Burhans	1.0	00										
Director		X						0	C	)		0
(16)Jared_Dearing	1.0	00										
Director		X						0	0	)		0
(17)Jonathan Brater	1.0	- 1						_	_			_
Director	1 /	X		Н				0	C	)		0
(18)Keith Ingram Director		x P						0	C	,		0
(19)Shane Hamlin	40.0							Ū				
Executive Director		٦		x				114,487	c	,		0
(20)Ericka Haas								•				
Systems Engineer & Technical	Liaiso					х		109,937	C	)	23,8	378
(21)		_										
(22)		-										
(23)												
(20)		-										
(24)		_										
				Ш								
(25)		-										
1b Subtotal							_					
c Total from continuation sheets to F	Part VII Section A											
d Total (add lines 1b and 1c)	,							224,424	C		23,8	
2 Total number of individuals (including										<u>' l</u>	23,0	370
reportable compensation from the org				,				,,				2
											Yes	No
3 Did the organization list any former or	fficer, director, trustee,	key em	ploye	ee, o	r hig	ghest c	comp	ensated				
employee on line 1a? If "Yes," comple										- 3		х
4 For any individual listed on line 1a, is	•	•					•					
organization and related organizations	-											
individual										. 4		Х
5 Did any person listed on line 1a receiv	•			•		•	_			_		
for services rendered to the organizat  Section B. Independent Contractor		Scnea	uie J	tor s	ucn	perso	n			. 5		Х
1 Complete this table for your five higher		endent	conti	racto	re th	nat rec	evie	d more than \$100	000 of			
compensation from the organization.										ar		
compensation from the organization.	(A)	01 110 0	aloni	aai y	<del>ou.</del>	Orianię		(B)		(C)		
Name and I	ousiness address							Description of service	es	Comper		
Alpine Consulting, PO Box 598	8, Carol Strea	n, IL	60:	197			ΙT	Services			322,2	239
							$\vdash$					
2 Total number of independent contract	ors (includina but not l	imited to	thos	se lis	ted	above	) wh	0				
received more than \$100,000 of comp	,				-		,		1			

Form 990 (2019)
Part VIII

	Check if Schedule O contains a response or n	ote to any line in thi	s Part VIII			
			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a     Federated campaigns     1a       b     Membership dues     1b       c     Fundraising events     1c       d     Related organizations     1d       e     Government grants (contributions)     1e       f     All other contributions, gifts, grants, and similar amounts not included above     1f       g     Noncash contributions included in lines 1a-1f     1g       h     Total. Add lines 1a-1f	Business Code	1,220,680			sections 512-514
Program Service Revenue	c d e All other program service revenue					
	Investment income (including dividends, interest, other similar amounts)     Income from investment of tax-exempt bond proc     Royalties	eeds	234			234
	6a Gross rents · · · · · · 6a  b Less: rental expenses · · 6b  c Rental income or (loss)  d Net rental income or (loss) · · · · · · · ·	(ii) Personal				
Revenue	7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses	(ii) Other				
Other Re	d Net gain or (loss)					
	c Net income or (loss) from fundraising events  9a Gross income from gaming activities, See Part IV, line 19 9a b Less: direct expenses 9b					
	10a Gross sales of inventory, less returns and allowances					
Miscellanous Revenue	11a b c d All other revenue	Business Code				
-	12 Total revenue. See instructions		1,220,914	0	0	234

# Form 990 (2019) Electronic Registration Information Center Inc. 45-5389681 Part IX Statement of Functional Expenses

	organizations must complete a	- II I A II - 4 I			
ection surrer at and surrer at	organizations must complete :	ali collimne Ali otner ol	raanizations milist con	INIETE COILIMN LA I	

	Check if Schedule O contains a response or note to a	any line in this Part IX			
Do n	not include amounts reported on lines 6b, 7b,	(A) Total expenses	<b>(B)</b> Program service	(C) Management and	<b>(D)</b> Fundraising
8b, 9	9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	114,487	108,374	6,113	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	208,368	197,242	11,126	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	19,172	18,148	1,024	
9	Other employee benefits	46,292	43,821	2,471	
10	Payroll taxes	25,149	23,806	1,343	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	29,720	26,550	3,170	
С	Accounting	21,062	18,816	2,246	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.) · ·	3,355	2,997	358	
12	Advertising and promotion				
13	Office expenses	14,853	7,530	7,323	
14	Information technology	422,020	377,012	45,008	
15	Royalties				
16	Occupancy · · · · · · · · · · · · · · · L				
17	Travel	26,717	21,087	5,630	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	12,707	1,550	11,157	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,251	12,930	1,321	
23	Insurance	9,453	8,540	913	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Software license	87 <b>,</b> 607	87,607		
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e · ·	1,055,213	956,010	99,203	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here				
	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)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	334,838	1	642,133
	2	Savings and temporary cash investments	300,119	2	300,354
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	110,150	4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	143,597	9	104,513
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D · · · · · · · 10a 99,401			
	b	Less: accumulated depreciation	34,422	10c	46,889
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	923,126	16	1,093,889
	17	Accounts payable and accrued expenses	3,777	17	43,261
	18	Grants payable		18	
	19	Deferred revenue	125,328	19	108,635
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
ij		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	129,105	26	151,896
"		Organizations that follow FASB ASC 958, check here			
čě		and complete lines 27, 28, 32, and 33.			
alar	27	Net assets without donor restrictions	794,021	27	941,993
Ä	28	Net assets with donor restrictions		28	
ü		Organizations that do not follow FASB ASC 958, check here			
Ē		and complete lines 29 through 33.			
ts o	29	Capital stock or trust principal, or current funds		29	
se	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	<b>804 00</b> 5	31	044 000
Ne	32	Total lich lities and not see to find belance	794,021	32	941,993
	33	Total liabilities and net assets/fund balances	923,126	33	1,093,889

Form		5-5389681		Pa	ge <b>1</b> 2
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. x
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,2	220,	914
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,0	)55,	213
3	Revenue less expenses. Subtract line 2 from line 1	3	1	L65,	701
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7	794,	021
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		17,	729
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	9	941,	993
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗌
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash X Accrual Other	_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	_			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3a		х
b	of "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				

Form **990** (2019)

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

EEA

## **SCHEDULE A**

## **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.

2019

OMB No. 1545-0047

Open to Public

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Inspection

Name	Name of the organization Employer identification number								
	lectronic Registration Information Center Inc. 45-5389681								
	rt I	Reason for Public Charity					) See instructions	S	
The	ne organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)								
1	닏	A church, convention of churches, or				I)(A)(i).			
2	님	A school described in section 170(b)		•					
3	님	A hospital or a cooperative hospital so	•						
4	Ш	A medical research organization oper	ated in conjunction	with a hospital described	d in <b>sectio</b>	n 170(b)(1	)(A)(iii). Enter the		
_	П	hospital's name, city, and state:							
5	Ш	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
c	П	section 170(b)(1)(A)(iv). (Complete F	*	it described in <b>eastlen 1</b>	70/b\/4\/A	\\\.			
6 7	X	A federal, state, or local government of An organization that normally receive	-				m the general public		
'	A	•	•		verriinenta	i unit or no	ili tile general public		
8	П	described in <b>section 170(b)(1)(A)(vi).</b> (Complete Part II.)  A community trust described in <b>section 170(b)(1)(A)(vi)</b> . (Complete Part II.)							
9	Ħ	An agricultural research organization		` ' '	ited in coni	iunction wit	h a land-grant college		
•	Ч	or university or a non-land-grant colle					•		
		university:	go o. ag.roana.o (o			,,			
10	П	An organization that normally receive	s: (1) more than 33	3 1/3% of its support from	contributi	ons, memb	ership fees, and gross		
	_	receipts from activities related to its e							
		support from gross investment incom	e and unrelated bu	siness taxable income (l	ess section	າ 511 tax) f	rom businesses		
		acquired by the organization after Jur	ne 30, 1975. See <b>se</b>	ection 509(a)(2). (Compl	ete Part III	.)			
11		An organization organized and operate	ted exclusively to te	est for public safety. See	section 50	09(a)(4).			
12		An organization organized and opera	ted exclusively for	the benefit of, to perform	the function	ons of, or to	carry out the purpose	S	
		of one or more publicly supported org	anizations describe	ed in <b>section 509(a)(1)</b> o	r section (	509(a)(2). S	See <b>section 509(a)(3)</b> .		
		Check the box in lines 12a through 12	2d that describes th	ne type of supporting org	anization a	and comple	te lines 12e, 12f, and 1	2g.	
	а	Type I. A supporting organization	operated, supervis	sed, or controlled by its s	upported o	rganizatior	n(s), typically by giving		
		the supported organization(s) the	power to regularly	appoint or elect a major	ity of the di	irectors or	trustees of the		
		supporting organization. You must	st complete Part I	V, Sections A and B.					
	b	☐ Type II. A supporting organization	•			•	. ,		
		control or management of the sup		·	rsons that	control or	manage the supported		
		organization(s). You must comp							
	С	☐ Type III functionally integrated.		•					
		its supported organization(s) (see	•	•					
	d	Type III non-functionally integra		•				•	
		that is not functionally integrated.	-				nt and an attentiveness	3	
		requirement (see instructions). Yo	-				T		
	е	Check this box if the organization				saiypei,	Type II, Type III		
	f	functionally integrated, or Type III  Enter the number of supported organ	•						
	g	Provide the following information abo							
		i) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of	
	,	y Hame of Supported organization	(11) 2.114	(described on lines 1-10	` '	r governing	support (see	other support (see	
				above (see instructions))	docum	ent?	instructions)	instructions)	
					Yes	No			
(A)									
/B)									
(B)	2)								
(C)									
(D)									
(E)									
Tota									
1016	11								

990 or 990-EZ) 2019 Electronic Registration Information Center Inc. 45-5389681 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u> </u>	Ction A. Fublic Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	871,914	729,991	803,840	907,558	1,220,680	4,533,983
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	871,914	729,991	803,840	907,558	1,220,680	4,533,983
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						4,533,983
Se	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	<b>(f)</b> Total
7	Amounts from line 4	871,914	729,991	803,840	907,558	1,220,680	4,533,983
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from						
	similar sources			29	90	234	353
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						4,534,336
12	Gross receipts from related activities, etc. (s	ee instructions	)			12	
13	First five years. If the Form 990 is for the or	rganization's fir	st, second, thi	rd, fourth, or fif	th tax year as	a section 501(d	c)(3)
	organization, check this box and stop here						▶ 🗌
Se	ction C. Computation of Public Suppo	rt Percentag	е				
	Public support percentage for 2019 (line 6, o	` '	•	` ' '		14	99.99 %
	Public support percentage from 2018 Sched					15	100.00 %
16a	33 1/3% support test - 2019. If the organiza						
	box and <b>stop here</b> . The organization qualified						_
k	33 1/3% support test - 2018. If the organiza						
	this box and <b>stop here.</b> The organization qu	-	• • •	-			_
17a	10%-facts-and-circumstances test - 2019.	-					
	10% or more, and if the organization meets					•	
	Part VI how the organization meets the "fact			-	-		
	organization						_
k	10%-facts-and-circumstances test - 2018.	•					line
	15 is 10% or more, and if the organization m					•	
	Explain in Part VI how the organization mee				-	•	·
	supported organization						_
18	Private foundation. If the organization did r	not check a box	on line 13, 16	6a, 16b, 17a, o	r 17b, check th	is box and see	
	instructions	<u> </u>	<u>.</u>	<u>.</u>	<u>.</u>		▶ □

45-5389681

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

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

Sec	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 -						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
-	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	ction B. Total Support		1		1		
	endar year (or fiscal year beginning in)▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
D	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
_	acquired after June 30, 1975 Add lines 10a and 10b						
	Net income from unrelated business						
11							
	activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
14	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,		<del> </del>				
15	and 12.)						
14	First five years. If the Form 990 is for the or	rganization's fi	rst second thi	rd fourth or fi	l fth tax vear as	a section 501(	c)(3)
	organization, check this box and <b>stop here</b>	-			-		
Sec	ction C. Computation of Public Suppo						
	Public support percentage for 2019 (line 8, c			column (f)) .		15	%
	Public support percentage from 2018 Sched					16	%
_	ction D. Computation of Investment In					1 .0	
	Investment income percentage for 2019 (line			ine 13, columr	n (f))	17	%
	Investment income percentage from 2018 S		•			18	<del></del>
	33 1/3% support tests - 2019. If the organiz						
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2018. If the organiz	•	-	-			_
-	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did r	-	_	-	-	•	- =

Part IV

### **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

## Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- 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.
- 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
  - 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.
  - 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.
- 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.
  - 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.)

		Yes	No
	1		
	ı		
	2		
	3a		
	3b		
)			
	3с		
	4a		
	4b		
	7.0		
	4c		
	10		
	5a		
	<b>5</b> 1.		
	5b 5c		
	6		
	7		
	,		
	8		
	9a		
	O.L.		
	9b		
	9с		
	10a		
	10b		
A (Fo	rm 990	or 990-E	EZ) 2019

Pai	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
<u>c</u>	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. tion B. Type I Supporting Organizations	11c		
Sec	tion B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		162	INO
	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 <b>Part VI</b> 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		1	
	Want a majority of the appropriational dispetance of twisters during the tay year also a majority of the dispetance		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 <b>Part VI</b> 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			
	Alta saffa a garage and a		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 <b>Part VI</b> the role the organization's	3		
<u>Sac</u>	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	etruc	tions	.)
a	The organization satisfied the Activities Test. Complete <b>line 2</b> below.	sa ao	uons	<i>)</i> ·
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	see ii	ารtruc	tions
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> 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. <i>Answer (a) and (b) below.</i>	20		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	rt v   Type III Non-Functionally integrated 509(a)(3) Supporting Org	ganız	ations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying			,
	instructions. All other Type III non-functionally integrated supporting organize	zations	must complete Section	ns A through E.
Sac	(B) Current Year			
	tion A - Adjusted Net Income		(A) Prior 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			
СО	llection of gross income or for management, conservation, or			
ma	aintenance 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			
ins	structions 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			
	actors (explain in detail in <b>Part VI</b> ):			
	Acquisition indebtedness applicable to non-exempt-use assets	2		
	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	+++		
	e instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
<del>-</del> 6	Multiply line 5 by .035.	6		
<del>-</del> 7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	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			
en	nergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ated Type III supporting	g organization (see
	instructions).	-		•

EEA Schedule A (Form 990 or 990-EZ) 2019

Sched	t V Type III Non-Functionally Integrated 509(a)(3			<b>9681</b> Page
_	etion D - Distributions	of Supporting Organi	zations (commaca)	Current Year
1	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported		
_	organizations, in excess of income from activity			
_3_	Administrative expenses paid to accomplish exempt purpose	s of supported organiza	tions	
	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is respon	sive	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	1		
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
	Excess distributions carryover, if any, to 2019			
	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i_	Carryover from 2014 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI</b> . See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
а	Excess from 2015			

**b** Excess from 2016 c Excess from 2017 d Excess from 2018

e Excess from 2019

. . . .

. . . .

lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

## **SCHEDULE D** (Form 990)

Department of the Treasury

## **Supplemental Financial Statements**

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

Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization

OMB No. 1545-0047

2019

Open to Public Inspection

Name	of the organization	Employer identification number		
Ele	ctronic Registration Information Center	Inc.	45-5389681	
Pa	rt I Organizations Maintaining Donor Advised F	unds or Other Similar Funds or Acc	counts.	
	Complete if the organization answered "Yes" or	Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) Funds and other accounts	
1	Total number at end of year			
2	Aggregate value of contributions to (during year) • • • • •			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advised		
	funds are the organization's property, subject to the organizati	=		
6	Did the organization inform all grantees, donors, and donor ad	_	<del></del> -	
	only for charitable purposes and not for the benefit of the done			
	conferring impermissible private benefit?			
Pa	rt II Conservation Easements.			
	Complete if the organization answered "Yes" o	n Form 990. Part IV. line 7.		
1	Purpose(s) of conservation easements held by the organization			
•	Preservation of land for public use (e.g., recreation or edu		of a historically important land area	
	Protection of natural habitat		of a certified historic structure	
	Preservation of open space	- Treservation	or a corumou motorio su dotare	
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form of a	conservation	
-	easement on the last day of the tax year.			
а	· · · · · · · · · · · · · · · · · · ·		Held at the End of the Tax Year  - 2a	
b	Total Halling C. C. College Fallon Caroling III			
C	Number of conservation easements on a certified historic stru			
d	Number of conservation easements on a certified historic stild Number of conservation easements included in (c) acquired a		20	
u	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele		•	
3	tax year	eased, extilliguished, or terminated by the or	ganization during the	
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the peri			
3	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
0	Stall and volunteer flours devoted to morntoning, inspecting, in	andling of violations, and emorcing conserv	ation easements during the year	
7	Amount of expanses incurred in monitoring inspecting handli	ing of violations, and enforcing concernation	a accomente during the year	
7	Amount of expenses incurred in monitoring, inspecting, handless \$	ing of violations, and emorcing conservation	reasements during the year	
8	Does each conservation easement reported on line 2(d) abov	a satisfy the requirements of section 170(h)	(4)(P)(i)	
0	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
9	-	•		
	balance sheet, and include, if applicable, the text of the footno	ne to the organization's illiancial statements	s that describes the	
Pa	organization's accounting for conservation easements.  rt III   Organizations Maintaining Collections	of Art Historical Treasures or	Other Similar Assets	
ı u	Complete if the organization answered "Yes"		Other Olimai Assets.	
4-			balance about wayle	
ıa	If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for pub			
			erance or public	
<b>L</b>	service, provide, in Part XIII the text of the footnote to its finan		and about works of	
b	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	ance of public service,	
	provide the following amounts relating to these items:		<b>.</b> •	
	(i) Revenue included on Form 990, Part VIII, line 1			
_	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical trea	_	ain, provide the	
	following amounts required to be reported under FASB ASC 9	•	<b>.</b>	
a	Revenue included on Form 990, Part VIII, line 1			
h	Assets included in Form 990 Part X		<b>&gt;</b> \$	

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection literies (check all that apply):  a   Public exhibition   d   Laan or exchange programs   b   Scholary research   e   Other   c   Preservation for future generations   c   Preservation for future generations   c   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  Suring the year, did the organization solicit or receive donations of art, historical seasures, or other similar assesses to be said for rates funds safety than to be maintained as part of the organization's collection?.		t III   Organizations Maintaining Col	•				sets (COI	illriuea)
Public exhibition   d	3		d other records, check a	ny of the following that m	nake signific	cant use of its		
b   Scholarly research   e   Other		collection items (check all that apply):		_				
Preservation for future generations	а	Public exhibition	d	Loan or exchange	programs			
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar sassets to be sold to raise funds rather than to be maintained as part of the organization's collection?	b	Scholarly research	е	Other				
Summarian   Summ	С	Preservation for future generations						
5. During the year, did the organization solicil or receive donations of art, historical freasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X III or Porm 990, Part X III or P	4	Provide a description of the organization's collection	ns and explain how they	further the organization'	s exempt p	urpose in Part		
assets to be sold to riske funds rather than to be maintained as part of the organization's collection?-		XIII.						
Secrow and Custodial Arrangements.   Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.   Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	5	During the year, did the organization solicit or receive	ve donations of art, histo	orical treasures, or other	similar			
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Ves		assets to be sold to raise funds rather than to be m	aintained as part of the	organization's collection?			Yes	☐ No
990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Yes   No	Pa	t IV Escrow and Custodial Arrange	ments.					
Included on Form 990, Part X?		•	vered "Yes" on For	m 990, Part IV, line	9, or rep	orted an amo	unt on Fo	orm
b If "Yes," explain the arrangement in Part XIII and complete the following table:    Amount	1a	Is the organization an agent, trustee, custodian or o	other intermediary for co	ntributions or other asset	ts not			
to Beginning balance d Additions during the year e Distributions during the year 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d		included on Form 990, Part X?					· Yes	No
to Beginning balance d Additions during the year e Distributions during the year 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d	b	If "Yes," explain the arrangement in Part XIII and co	emplete the following tab	ole:			_	_
E Beginning balance  d Additions during the year  1						Amo	unt	
d Additions during the year  Distributions during the year  Ending belance  10  11  12a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  15 If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII  Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  16 Beginning of year balance  17 Doubt be remarked and losses  18 Beginning of year balance  19 Contributions  10 Net investment earnings, gains, and losses  10 Grants or scholarships  11 Office and programs  12 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  18 Board designated or quasi-endowment  19 Permanent endowment  10 Permanent endowment  10 Permanent endowment  10 Permanent endowment  11 Plants  12 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  19 Board designated or quasi-endowment  10 Permanent endowment  10 Permanent endowment  10 Permanent endowment  11 Provers on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  12 Provide the estimated percentage on fines 2a, 2b, and 2c should equal 100%.  13 Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  12 (i) Unrelated organizations  13 (ii) Related organizations  14 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  10 Land  11 Land  12 Land  13 Land  14 Land  15 Buildings  16 Leasehold improvements  17,718  17,718  17,718	С	Beginning balance			. 1c			
e Distributions during the year  f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? \					. 1d			
Ending balance   1th   1th   2a   1th   2a   2b   1th eorganization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?   1ves   No b   ff Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Check here if the explanation has been provided on Part XIII. Check here if the explanation has been provided on Part XIII. Check here if the explanation has been provided on Part XIII. Check here if the explanation has been provided on Part XIII.   1th		<b>5</b> ,						
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?		<b>3</b> ,			<u> </u>			
Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part IV, line 10.    Part V		-			' —		Yes	□No
Endowment Funds.   Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	_	_			•		_	H
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part IV, line 11a			there is the explanation	nas seen provided on r	uit /(iii			
Seginning of year balance   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back			vered "Yes" on For	m 990 Part IV line	10			
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Permanent endowment  %  b Permanent endowment  %  c Term endowment  %  c Term endowment  %  c Term endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations  b if "Yes" on line 3a(iii), are the related organizations listed as required on Schedule R?  1 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Organization (d) Book value of Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the Organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Part		· · · · · · · · · · · · · · · · · · ·				1) Three ware back	(a) Faurus	ava baak
b Contributions c Net investment earnings, gains, and losses	10	<u> </u>	Current year (b) F	rior year (c) Two years	s back (d	i) Three years back	(e) Four ye	ars back
c Net investment earnings, gains, and losses								
d Grants or scholarships								
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  8 Board designated or quasi-endowment b Permanent endowment	С							
e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment  ———————————————————————————————————								
programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment		' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '						
f Administrative expenses g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment  Permanent endowment  M The percentages on lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations  If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other) (other)  Buildings  C Leasehold improvements  d Equipment  S 17,718  17,718	е	·						
g End of year balance		· -						
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment	f	·						
a Board designated or quasi-endowment    b Permanent endowment    c Term endowment    math percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations    (ii) Related organizations    b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?    Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (investment) (other) (other) (d) Book value depreciation (d) Book value depreciation (d) Book value (d) Book	g	·						
b Permanent endowment	2		ar end balance (line 1g,	column (a)) held as:				
Term endowment	а	Board designated or quasi-endowment	%					
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations  (ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (c) Accumulated depreciation  (d) Book value  4 Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  4 Description of property  (a) Equipment  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (e) Book value  (f) Book value  (g) Book value  (h) Book value	b							
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iiii) Related organizations (iiii) Related organizations (iiiii) Related organizations (iiiii) Related organizations (iiiii) Related organizations (iiiii) Related organizations (iiii) Related organizations (iiii) Related organizations (iiii) Related organizations (iiii) Related organizations (iii) Related organizations (iii	С	Term endowment • %						
organization by:  (i) Unrelated organizations  (ii) Related organizations  (iii) Related organizations		The percentages on lines 2a, 2b, and 2c should eq	ual 100%.					
(ii) Unrelated organizations (iii) Related organizations (iii) (iii) Related organizations (iii) (iii) Related organizations (iii)	3a	Are there endowment funds not in the possession of	of the organization that a	are held and administered	d for the		_	
(ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  to Leasehold improvements  c Leasehold improvements  d Equipment  e Other  17,718  17,718		organization by:					Y	es No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		(i) Unrelated organizations					3a(i)	
Describe in Part XIII the intended uses of the organization's endowment funds.  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 (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (e) Equipment  (f) Equipment  (g) Cost or other basis (other)  (h) Cost or other basis (other)  (n) Equipment		(ii) Related organizations					3a(ii)	
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (e) Equipment  (f) Equipment  (g) Equipment  (h) Cost or other basis (other)  (h) Equipment  (h) Equi	b	If "Yes" on line 3a(ii), are the related organizations I	listed as required on Scl	nedule R?			3b	
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 (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (e) Buildings  (c) Accumulated depreciation  (d) Book value  (e) Equipment  (f) Accumulated depreciation  (h) Equipment  (n) Equipment	4	Describe in Part XIII the intended uses of the organ	ization's endowment fur	nds.				
Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation	Pa	t VI Land, Buildings, and Equipmer	nt.					
tall Land         (investment)         (other)         depreciation           b Buildings             c Leasehold improvements             d Equipment          81,683         52,512         29,171           e Other          17,718         17,718		Complete if the organization answ	vered "Yes" on For	m 990, Part IV, line	11a. See	e Form 990, P	art X, line	e 10.
1a Land          b Buildings          c Leasehold improvements          d Equipment          e Other          17,718		Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Acc	cumulated	(d) Book va	alue
b Buildings          c Leasehold improvements          d Equipment          e Other          17,718			(investment)	(other)	depre	eciation		
c Leasehold improvements         81,683         52,512         29,171           e Other         17,718         17,718	1a	Land						
c Leasehold improvements         81,683         52,512         29,171           e Other         17,718         17,718	b	Buildings						
d Equipment     81,683     52,512     29,171       e Other     17,718     17,718								
e Other 17,718 17,718				81 - 683		52,512	2	9,171
		· '						
			Form 990, Part X. colum					

Part VII	Investments - Other Securities.				
	Complete if the organization answere	d "Yes" on For	m 990, Par	t IV, line 11b. S	ee Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book va	lue	(c) Method of valuation: Cost or end-of-year market value
(1) Financial o					-
(2) Closely-he	ld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)	n (b) must equal Form 990, Part X, col. (B) line 12.,	) <b>.</b>			
Part VIII	Investments - Program Related.	,			
- 4.1.	Complete if the organization answere	d "Yes" on For	m 990, Par	t IV, line 11c. S	ee Form 990, Part X, line 13.
	(a) Description of investment		(b) Book va	lue	(c) Method of valuation: Cost or end-of-year market value
(1)					Cost of end-of-year market value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col. (B) line 13.	)			
Part IX	Other Assets.	d "\/oo" on For	000 Dan	+ I\ / I:ma 44 d C	as Farms 000 Dart V line 15
	Complete if the organization answere		III 990, Pai	t iv, line i id. S	
(4)	(a) D	escription			(b) Book value
(1) (2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 15.,	)			🕨
Part X	Other Liabilities.				
	Complete if the organization answere line 25.	d "Yes" on For	m 990, Par	t IV, line 11e or	11f. See Form 990, Part X,
1.	(a) Description of liability	(b) Book v	alue		
(1) Federal ii	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (	b) must equal Form 990, Part X, col. (B) line 25.) • 🕨				

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

Sched	ule D (Form 990) 2019 Electronic Registration Information Center Inc			89681 Page <b>4</b>
Pai	Reconciliation of Revenue per Audited Financial Statements	•	er Re	turn.
	Complete if the organization answered "Yes" on Form 990, Part I'	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements $\cdots \cdots \cdots$		1	1,220,914
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments · · · · · · · · · · · · · · 2a			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.) 2d			
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		2e	
3	Subtract line 2e from line 1		3	1,220,914
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII.) 4b			
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	1,220,914
Pa	rt XII Reconciliation of Expenses per Audited Financial Statement	ts With Expenses	s per	Return.
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	1,055,213
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			, ,
а	Donated services and use of facilities			
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIII.) 2d			
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		2e	
3	Subtract line 2e from line 1		3	1,055,213
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			_,,,,,,
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII.)			
c	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 18.</i> ) · · · · · ·		5	1,055,213
	rt XIII Supplemental Information.			1,000,1110
	de 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. I	Part X	line
	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi-		uit7t,	
	Footnote for uncertain tax position under FIN 48 (Part X)	onar imormation.		
<u> </u>	FOOCHOOLE TOT MICEICATH CAX POSICION MIGEI FIN 40 (FAIL X)			
Tho	accounting standard on accounting for uncertainty in income	tavon addronno	. +ho	dotormination of
1116	accounting standard on accounting for uncertainty in income	caxes addresses	CITE	decerminacion or
r.rb.o.	then too benefits slaimed on expected to be slaimed on a too	maturm should h		gondod in the
wiie	ther tax benefits claimed or expected to be claimed on a tax :	recurn should r	ете	corded in the
e:	onsiel statements. Weden that swidense EDIG man massemine th	- + b	i	
Line	ancial statements. Under that guidance, ERIC may recognize the	e tax benerit i	rom	an uncertain tax
pos.	ition only if it is more likely than not that the tax position	n will be susta	ınea	on examination
			<b>-</b> .	1. 1
by ·	taxing authorities based on the technical merits of the posit	ion. Examples o	f ta	x positions
inc	lude the tax-exempt status of ERIC and various positions rela	ted to the pote	ntia	1 sources of
unr	elated business taxable income (UBIT).			

EEA Schedule D (Form 990) 2019

EEA Schedule D (Form 990) 2019

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

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Electronic Registration Information Center Inc. 45-5389681

01. Governing body decisions (Part VI, line 7b)
All members of the Organization have a right but not the obligation to appoint a
representative to the Board of Directors. This means a member may choose not to put a
representative on the Board, and, as such, the size of the Board may or may not equal the
size of the membership. Accordingly, the organization has a two-tiered governance model,
meaning that some decisions are allocated to members and others to the Board of Directors.
For example, the members and not the Board have the power to approve the dues schedule,
and amend the bylaws, membership agreement, and certificate of incorporation.
02. Form 990 governing body review (Part VI, line 11)
The Form 990 was reviewed by the Board of Directors, the Executive Director, an outside
accountant, and counsel.
03. Conflict of interest policy compliance (Part VI, line 12c)
Annually, Directors are required to complete a conflict-of-interest disclosure form. In
accordance with ERIC's conflict of interest policy, the Board, any committee thereof, and
the Executive Director review disclosures of covered transactions, review covered
transactions to determine if they meet the standard for approval, maintain documentation
as may be necessary and appropriate to document the review of Form 990, Part VI, covered
transactions, and, in the case of a committee or the Executive Director, report to the
Board on any covered transaction approved. in accordance with the conflict-of-interest
policy.
04. CEO, executive director, top management comp (Part VI, line 15a)
To determine the Evecutive Director's compensation, the Evecutive Committee of the Board

Schedule O (Form 990 or 990-EZ) (2019)
Page 2

Name of the organization	Employer identification number
Electronic Registration Information Center Inc.	45-5389681
conducts a performance review of the Executive Director and, in consultation	on with the
Finance Committee, reviews comparability data and information from similar	organizations
from IRS Form 990s and a comprehensive non-profit compensation report. This	s decision is
documented contemporaneously in writing. The full Board is apprised of the	Executive
Committee's review and determination and votes on the Organization's annual	l budget,
including the Executive Director's compensation. The Executive Director, where the compensation is the Executive Director, where the compensation is the Executive Director.	no is an ex
officio, non-voting member of the Executive Committee and the Board recuses	s himself from
all discussions relating to his compensation.	
05. Other officer or key employee compensation (Part VI, line 15b	
The Organization does not have any other compensated officers or key employ	yees. The
Executive Director conducts an annual performance review of other employees	s and makes a
compensation determination. This determination is presented to the full Boa	ard as part of
its annual review and approval of Organization's budget.	
06. Governing documents, etc, available to public (Part VI, line 19)	
The organization's governing documents (bylaws and membership agreement) as	ce available on
its website. Other governing documents, including the conflict-of-interest	policy,
financial statements, and Form 1023 are available upon request.	
07. Explanation of other changes in net assets or fund balances (Part XI,	line 9)
To adjust beginning net assets to match balance on the 2018 Form 990.	