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(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 Open to Public Inspection

<u>A</u>	For the	2019 calendar year, or tax year beginning , and ending			II.
В	Check If ap	plicable: C Name of organization FARMWORKER AND LANDSCAPER		D Employe	r Identification number
	Address ch	nange ADVOCACY PROJECT			
	Name char	Doing business as		36-4	306362
\equiv		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephon	
\Box	Initial return			847-	668-2114
	terminated				
	Amended r	CHICAGO IL 60602		G Gross rec	eipts \$ 710,659
\equiv		F Name and address of principal officer:	H(a) Is this a gro	oun roturn for a	ubordinates? Yes X No
	Application	ALEXANDIA DODDA	rita) is unsayit	ար յեւսյյյ յու չ	docionales res 22 No
		33 N. LASALLE STE 900	H(b) Are all sub	ordinates incl	uded? Yes No
		CHICAGO IL 60602	If "No,"	" attach a list	(see instructions)
1	Tax-exem				
J	Website:	▶ FLAPILLINOIS.ORG	H(c) Group exe	mption numbe	er 🕨
K	Form of or	ganization: X Corporation Trust Association Other ▶ L	Year of formation: 1		M State of legal domicile: IL
P	art I	Summary			
	1 B	riefly describe the organization's mission or most significant activities:			
au		IMPROVE WORKING CONDITIONS FOR MIGRANT AND SEASONAL WO	RKERS IN	тнк	
ü		AGRICULTURAL AND LANDSCAPING INDUSTIRES IN ILLINOIS TH			
L	2.	LITIGATION, COMMUNITY LEGAL EDUCATION AND REFERRALS.	MOOGH OOL	KBACII	
Governance	2 0	theck this box	150/ -file		
Ö		humban of cotton manch on a fill a macronian bank (Dart M. Pan 4 a)		1 . 1	
Activities &		lumber of voting members of the governing body (Part VI, line 1a)		3	9
ţį	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)		3,020 4	9
ξį		otal number of individuals employed in calendar year 2019 (Part V, line 2a)			6
Ac	6 T	otal number of volunteers (estimate if necessary)		6	_ 0
	7a T	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0
	b N	let unrelated business taxable income from Form 990-T, line 39		7b	0
			Prior Ye		Current Year
e		Contributions and grants (Part VIII, line 1h)		6,206	535,970
en	1	rogram service revenue (Part VIII, line 2g)		1,233	65,524
Revenue	1	rvestment income (Part VIII, column (A), lines 3, 4, and 7d)		6,038	
-	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,200	37,099
	12 T	otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	40	6,677	708,833
	13 0	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	40	6,678	0
	14 E	enefits paid to or for members (Part IX, column (A), line 4)			0
Ś	15 8	calaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	20	5,300	228,010
JSe	16a F	Professional fundraising fees (Part IX, column (A), line 11e)			0
Expenses	ЬТ	otal fundraising expenses (Part IX, column (D), line 25) ▶ 3,182			
Ж	17 (Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	27	1,810	319,839
		otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		3,788	547,849
		Revenue less expenses. Subtract line 18 from line 12		7,111	160,984
70 %		revenue less expenses. Subtract line 16 from line 12	Beginning of Cu		End of Year
Net Assets or	20 T	otal assets (Part X, line 16)		3,808	383,471
Ass	21 T	otal assets (Part X, line 16) otal liabilities (Part X, line 26)		2,458	1,137
Net	22 N	let assets or fund balances. Subtract line 21 from line 20		1,350	382,334
	art II	Signature Block		1/330	302/334
		alties of perjury, I declare that I have examined this return, including accompanying schedules and staten ct, and complete. Declaration of preparar (other than officer) is based on all information of which preparer			lowledge and belief, it is
		Phillips A.		,-	119/2020
e:		Signature of officer		Data	117/200
Sig		i - 7			
He	re		JTIVE DI	RECTOR	Χ
_		Type or print name and title		-	
ь.		Print/Type preparer's name Preparer's signature	Date	Check	
Pai		ARTHUR S. GUNN, CPA	05/27	/20 self-en	
	parer	Firm's name ARTHUR S. GUNN, LTD	F	irm's EIN 🕨	01-0729456
Use	Only	900 SKOKIE BLVD STE 207			
		Firm's address NORTHBROOK, IL 60062-4031	F	Phone no.	847-607-1040
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No
		ork Reduction Act Notice, see the separate instructions.			Form 990 (2019)
DAA					

4e Total program service expenses ▶

(Expenses \$

4d Other program services (Describe on Schedule O.)

including grants of \$

493,149

) (Revenue \$

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			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		7.7	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<u> </u>	X	-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	A	
•	candidates for public office? If "Yes," complete Schedule C, Part I			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		X
	election in effect during the tax year? If "Yes," complete Schedule C, Part II			x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		_A
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	Ť		
	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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
L	complete Schedule D, Part VI	11a	X	L
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
d	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	11c		_X_
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	444		.
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	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	111	- 22	
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124		
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	_	X
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	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		}	
	If "Yes," complete Schedule G, Part III	19		_ <u>X</u> _
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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	İ		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>

Part IV Checklist of Required Schedules (continued) Yes No 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 X 22 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 c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 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 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 X 25h 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 of any of these persons? If "Yes," complete Schedule L, Part II X 26 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 X 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a b A family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV X 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 X 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 conservation contributions? If "Yes," complete Schedule M X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 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 X 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes." complete Schedule R. Part II. III. or IV. and Part V. line 1 X Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 related organization? If "Yes," complete Schedule R. Part V. line 2 X 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c

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

	The state of the s	iueu)				1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1			Yes	No
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	Х	***************************************
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	e O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		ty over,	(6)		
	a financial account in a foreign country (such as a bank account, securities account, or other financial			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	Accoun	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	AT-179755574	х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ction?	***************************************	5b		Х
C	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	he				
	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 contribution	ons 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	80000000000	20000000000
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	as				
	required to file Form 8282?			7c		
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 c	contract	?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	ract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 889	9 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file	e a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	ed by th	e			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a	30000000000000000000000000000000000000	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 1041?)	12a		reencoller
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
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	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul	le O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	ration o	or			
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income	e?	16		X
	If "Yes," complete Form 4720, Schedule O.					

Form 990 (2019) FARMWORKER AND LANDSCAPER 36-4306362 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 9 1a 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. 9 1b 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? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? X 8a Each committee with authority to act on behalf of the governing body? X 8b 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 X Section 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? X 10a 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 b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 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 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ IL 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. X Own website Another's website Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records ▶ ALEXANDRA SOSSA 33 N. LASALLE STE 900 CHICAGO IL 60602 847-668-2114

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

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

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

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

(A)	(B)	1		- 10	C)			(D)	/E\	(5)
Name and title	Average hours per week (list any hours for	Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1) ALEXANDRA SOSSA										
	60.00				ĺ					
EXECUTIVE DIRECTOR (2) JOSE RIVERO	0.00	X		Х	<u> </u>			104,100	0	0
(2) JOSE RIVERO	5.00									
PRESIDENT	0.00	x		v						_
(3) JACK KING	0.00	1		X		\vdash		0	0	0
(0,011011 111110	5.00									
VICE-PRESIDENT	0.00	X		x				0	0	0
(4) VINCENT H BECKMA							\dashv		0	
	5.00									
TREASURER	0.00	x		x				ol	o	0
(5) SHAHRYAR AFSHAR							\neg			
	5.00									
SECRETARY	0.00	X		X				0	0	0
(6) ROYAL BERG										
	2.00									
DIRECTOR	0.00	X					\Box	0	0	0
(7) RON LEVITSKY										
DIRECTOR	2.00								_	
OIRECTOR (8) BALDERMAR LOPEZ	0.00	X				-		0	0	0
(6) BALDERHAR LOPEZ	2.00									
DIRECTOR	0.00	x		ŀ				0		•
(9) SUZANNE JUDAY	0.00	1		\dashv			\dashv	0	0	0
(0,000111111111111111111111111111111111	2.00									
DIRECTOR	0.00	x						o	o	0
(10) MARIA DOMINQUEZ			\neg				\dashv			0
	2.00									
DIRECTOR	0.00	x						0	0	0
(11)										

	(A) Name and title	(B) Average hours per week (list any	(d	lo not ox, unl	Pos check ess pe	C) sition more erson	than o	one n an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		(F) timated of oth compens	er ation	
		hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		ganizati led orga	on and	s
- Mar														
- 30														
24 233		*********												
1 - 41	***************************************						:							
	£325000000000000000000000000000000000000	5555555555555555												
	**************************************	Beer in Principal Princip												
1b c	Total from continuation shee	ets to Part VII, S						>	104,100					
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (increportable compensation from		mite	d to				bove	e) who received more than	\$100,000 of		,		
3	Did the organization list any fo employee on line 1a? If "Yes," For any individual listed on line	rmer officer, dire complete Sched	ector	r, tru: <i>J for</i> porta	<i>suci</i> able	<i>ina</i> com	<i>lividu</i> pens	al atio	n and other compensation	from the		3	Yes	No X
5	organization and related organ individual Did any person listed on line 1st for services rendered to the org	a receive or acci	rue c	omp	ensa	ation	fron	n an	y unrelated organization or	individual		5		x x
Sec 1	tion B. Independent Contractor Complete this table for your fiv compensation from the organiz	e highest compe zation. Report co	ensa	ted i	ndep	end or th	ent c	ontr	lar year ending with or with	in the organization's tax ye	ar.			
	Name and t	(A) business address	-						Descript	(B) ion of services		Con	(C) npensatio	on
							_							
2	Total number of independent or received more than \$100,000 or	ontractors (inclu	ding	but	not li	mite	ed to	thos	se listed above) who					

50500		Check i	f Sch	edule O cont	ains a r	respons	e or note t	to any line in this	s Part VIII		
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated camp	paigns	samuoto orga	1a						
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership du	es		1b						
S, C	С	Fundraising eve	nts		1c						
Gift	d	Related organiz	ations	************	1d						
S, E	е	Government grants (co	ontributio	ns)	1e						
tior	f	All other contributions,									
the state		and similar amounts no	ot includ	ed above	1f	5	35,970				
d it	g	Noncash contributions	included	I in lines 1a-1f	1g \$		13,030				
S E	h	Total. Add lines	1a-1	<u> </u>				535,970			
						В	Isiness Code				
8	2a	LEGAL FEES					541100	62,118	62,118		
ه ڲ	b	MISCELLANE	ous			VIII.0 (1.551)	561000	3,406	3,406		
n Se	С	49	10000								
Sev	d	950-05100000000 D.C.S.									·
Program Service Revenue	е										
	f	All other program	n serv	rice revenue		100					
_	g	Total. Add lines	2a-21				*(3)*(4)*	65,524			
	3	Investment inco			ds, interes	st, and					
		other similar am						70,240			70,240
	4	Income from inv	estme	ent of tax-exemp	t bond pr	oceeds	>				
	5	Royalties		CONTRACTOR OF THE PARTY		88					
				(i) Real		(ii) Pers	sonal				
	6a	Gross rents	6a								
	b	Less: rental expenses	6b						75		
	С	Rental inc. or (loss)	6c				***				
	d 7a	Net rental incom Gross amount from	e or (loss)	Enchances						
	'a	sales of assets		(i) Securities		(ii) Ot	her				
		other than inventory	7a								
Jue	b	Less: cost or other									
Ver		basis and sales exps.	7b								
æ	l	Gain or (loss)	7c	<u> </u>							
Other Revenue		Net gain or (loss									
ö	8a	Gross income from		ising events							
		(not including \$									
		of contributions rep		on line 1c).	1 1						
		See Part IV, line 18			8a	:	38,925				
		Less: direct expe			8b		1,826				
		Net income or (le			events		24.274	37,099			
	9a	Gross income from		g activities.							
		See Part IV, line 19	10000		9a						
		Less: direct expe			9b						
		Net income or (le			vities		eacegon .				
	10a	Gross sales of in									
		returns and allov		* * * * * * * * * * * *	10a						
		Less: cost of goo		DOMESTIC ACTIONS	10b						
-	С	Net income or (le	oss) fr	om sales of inve	entory		▶	***************************************			
sn						Ві	siness Code				
Miscellaneous Revenue	11a	• • • • • • • • • • • • • • • • • • • •									
llar	b			********							
Sce	С										
Ĕ		All other revenue									
		Total. Add lines					▶				
	12	Total revenue.	See in	structions				708,833	65.524	0	70 240

	art IX Statement of Functional Expe				
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must com	plete column (A).	
	Check if Schedule O contains a respons	se or note to any line in t	his Part IX		
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising 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				
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	197,645	176,825	20,820	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	30,365	26,392	3,973	· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	***************************************				
C	Accounting	11,392		11,392	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	(
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	2,162	1,077	1,085	
14	Information technology				
15	Royalties				
16	Occupancy	24,000	21,600	2,400	
17	Travel	24,082	23,873	205	4
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,639	3,976	461	202
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,039	1,039		
23	Insurance	1,709	1,709		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
E	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	IN-KIND	213,030	211,880		1,150
b	CONSULTANT FEES	32,105	21,518	10,587	
С	TELEPHONE	1,885	1,753	132	
d	SPECIAL EVENTS	1,826			1,826
е	All other expenses	1,970	1,507	463	
25	Total functional expenses. Add lines 1 through 24e	547,849	493,149	51,518	3,182
26	Joint costs. Complete this line only if the			32,310	3,102
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶ if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing 40,190 1 125,322 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 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 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 4,255 b Less: accumulated depreciation 10b 4,255 1,039 10c Investments—publicly traded securities 257,197 181,627 11 12 Investments—other securities. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 952 952 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 223,808 383,471 16 17 Accounts payable and accrued expenses 1,321 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 1,137 1,137 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 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 Total liabilities. Add lines 17 through 25 2,458 1,137 Organizations that follow FASB ASC 958, check here ▶ X Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 208,347 27 368,797 Net assets with donor restrictions 28 13,003 28 13,537 Net Assets or Fund Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 31 Total net assets or fund balances 221,350 382,334 32 Total liabilities and net assets/fund balances 223,808 383,471

Form 990 (2019)

Form **990** (2019)

X

Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

SCHEDULE A (Form 990 or 990-EZ)

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.

Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

FARMWORKER AND LANDSCAPER
ADVOCACY PROJECT

ADVOCACY PROJECT

ADVOCACY PROJECT

ADVOCACY PROJECT

Employer identification number 36-4306362

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1–10 above (see instructions))	(iv) is the organization listed in your governing document?	(vI) Amount of other support (see instructions)
			Yes No	
(A)				
(B)				
(C)				
(D)				
(E)				
Total				

Schedule A (Form 990 or 990-EZ) 2019 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		<u> </u>				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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				, ,		
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10					1	<u> </u>
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the		t, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop her						
	tion C. Computation of Public Su						
14	Public support percentage for 2019 (line 6	, column (f) divided	d by line 11, colum	nn (f))			%%
15	Public support percentage from 2018 Sch		10 10 10 10 10 10 10 10 10 10 10 10 10 1			15	%
16a	33 1/3% support test—2019. If the organ				33 1/3% or more,	check this	
	box and stop here. The organization qual			0.365400.00.000.000.000.000.000.000			ici satisotolico:
þ	33 1/3% support test—2018. If the organ				15 is 33 1/3% or m	ore, check	. —
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test—20°	_					
	10% or more, and if the organization mee						
	Part VI how the organization meets the "fa organization	icts-and-circumsta	nces" test. The or	ganization qualifie	s as a publicly sup	ported	
b	10%-facts-and-circumstances test—20°	19. If the organizati					
b	15 is 10% or more, and if the organization Explain in Part VI how the organization me	meets the "facts-a	and-circumstances	" test, check this I	oox and stop here		
18	Private foundation. If the organization di						N
	instructions						5550550500

\$

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	tion A. Public Support	,			pioto : dit iii)		
Caler	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	113,831	96,914	190,465	170,047	535,970	1,107,227
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	76,319	71,073	98,109	54,433	104,449	404,383
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						
6	Total. Add lines 1 through 5	190,150	167,987	288,574	224,480	640,419	1,511,610
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						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						1,511,610
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	190,150	167,987	288,574	224,480	640,419	1,511,610
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					70,240	70,240
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b					70,240	70,240
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	190,150	167,987	288,574	224,480	710,659	1,581,850
14	First five years. If the Form 990 is for the						1,301,030
	organization, check this box and stop here	•					
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2019 (line 8	, column (f), divide	d by line 13, colum	n (f))		15	95.56%
16_	Public support percentage from 2018 Sche	edule A, Part III, lin	e 15			16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2019 (li	ine 10c, column (f),	divided by line 13,	column (f))		17	4 %
18	Investment income percentage from 2018		H P 47				%
19a	33 1/3% support tests—2019. If the orga 17 is not more than 33 1/3%, check this bo		eck the box on line	14, and line 15 is r	more than 33 1/3%	, and line	▶ X
b	33 1/3% support tests—2018. If the orga			•			reconstitut.
	line 18 is not more than 33 1/3%, check th						
20	Private foundation. If the organization did						

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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b 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.
- 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.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c 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.
- 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).
- b 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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- 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.
 - b 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
4		
1		
2		
20		
3a		
3b	***************************************	
•		
3c		
4a		
4b		
4c	p 0,000 000 00000000000000000000000000	\$4000000000000000000000000000000000000
5a		
5b		- CARREN
5c		58836383011
6	************	\$45000000000
7		
8		
9a		
9b		
31)		
9c		000000000000000000000000000000000000000
10a		

1

Pa	rt 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		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sect	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			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			ĺ
	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		Mariana and American
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	300000000000000000000000000000000000000	A0000000000000000000000000000000000000
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	5000000000000000	RESERVE STREET
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	800000000000000000000000000000000000000	200000000000000000000000000000000000000
3	By reason of the relationship described in (2), did the organization's supported organizations have a	-		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		######################################
Sect	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction			
· a		15).		
b				
c				
·	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instr	uctions).		
2	Activities Test. Answer (a) and (b) below.	٢	V	P1 -
a		300000000000000000000000000000000000000	Yes	No
a	, and the complete and the control of the control o			
	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	000000000000000000000000000000000000000	20000000000000
b	(a) and the contract of the co			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b	020000000000000000000000000000000000000	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		200000000000000000000000000000000000000
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rganizati	ons	7302 Page 6
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on			See
instructions. All other Type III non-functionally integrated supporting organizations r			
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2	***	
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,		****	
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4	****	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integrate		supporting organization	see
instructions).	# 4" = 111 "	11	

Schedule A (Form 990 or 990-EZ) 2019

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047 Open to Public

Inspection Name of the organization Employer identification number FARMWORKER AND LANDSCAPER ADVOCACY PROJECT 36-4306362 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6, (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the

- b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 - (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 treasures, or other similar assets for financial gain, provide the
- following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

and section 170(h)(4)(B)(ii)?

Schedule D (Form 990) 2019 FARMWORK				<u> 36-430</u>			Р	age 2
Part III Organizations Maintainir	ng Collections of	Art, Historical	Treasures,	or Other S	imilar As	sets (contir	ued)	
3 Using the organization's acquisition, access collection items (check all that apply):	sion, and other record	s, check any of the fo	ollowing that r	nake significar	nt use of its			
a Public exhibition	d	Loan or exchange pr	rogram					
b Scholarly research				****				
c Preservation for future generations		**********						
4 Provide a description of the organization's	collections and explain	how they further the	e organization	's exempt pur	nose in Part			
XIII.			0.90	o exempt purp				
5 During the year, did the organization solicit	or receive donations of	of art_historical treas	ures or other	similar				
assets to be sold to raise funds rather than	to be maintained as n	art of the organization	n's collection	2			es	No
Part IV Escrow and Custodial Ar		art of the organization	m s concenton				62	NO
Complete if the organization		on Form 990 P	art IV line	9 or report	ed an amo	ount on For	m	
990, Part X, line 21.		0111 01111 000, 1	arriv, mic	o, or report	cu an anno	Junit On 1 On	"	
1a Is the organization an agent, trustee, custo	dian or other intermed	iary for contributions	or other asse	ts not				
included on Farm 000 Day VO							es X	No
b If "Yes," explain the arrangement in Part XI	II and complete the fol	llowing table:		****		SECTION .	es A	NO
a way or promitted arrangement with arrangement	in and complete the fol	nowing table.				Amoui		
c Beginning balance					4-	Anoui	it.	
					1c			
d Additions during the year					1d			
e Distributions during the year								
f Ending balance					1f		-	5
2a Did the organization include an amount on	Form 990, Part X, line	21, for escrow or cu	stodial accou	nt liability?		Y	es X	No
b If "Yes," explain the arrangement in Part XI Part V Endowment Funds.	II. Check here if the ex	planation has been	provided on P	art XIII			AV.	
Complete if the organizatio			1					
	(a) Current year	(b) Prior year	(c) Two ye	ars back (d) Three years t	oack (e) For	ır years l	pack
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	<u></u>							
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentage of the cu	rrent year end balance	e (line 1g, column (a)) held as:			To, or		
a Board designated or quasi-endowment	%	, ,	•					
b Permanent endowment ▶ %								
c Term endowment ▶ %								
The percentages on lines 2a, 2b, and 2c sh	ould equal 100%							
3a Are there endowment funds not in the poss		tion that are held an	d administere	d for the				
organization by:	coston of the organiza	tion that are new and	u aummistere	u ioi tiie			Yes	Nia
(i) Unrelated organizations						2-43	res	No
(ii) Related organizations								
						3a(ii)		
b If "Yes" on line 3a(ii), are the related organic						3b	L	
4 Describe in Part XIII the intended uses of the		wment funds.						
Part VI Land, Buildings, and Equ			. 13					
Complete if the organization			art IV, line	11a. See Fo	orm 990, F	Part X, line	10.	
Description of property	(a) Cost or other b	(,	other basis	(c) Accun	nulated	(d) Book	value	
	(investment)	(ot	her)	deprec	ation			
1a Land						1		
b Buildings								
c Leasehold improvements	779							
d Equipment		,255			4,255			
e Other							•	
Total. Add lines 1a through 1e. (Column (d) must		X, column (B). line 1	10c.)	QUINCHO CASSETTO				

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" of	on Form 990 Part IV li	20 11h Soo Form 000 Bart V II	ing 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation	ne iz.
	(including name of security)		Cost or end-of-year market va	lue
(1) Financial o	erivatives			
	ld equity interests	OM		
(3) Other				
(A)		60		
(B)		60		
(C) (D)				
(E)		666		
(F)		÷()	7	
(G)			-	-
(H)				
	(b) must equal Form 990, Part X, col. (B) line 12.)	>		
Part VIII	Investments - Program Related.			*******
	Complete if the organization answered "Yes" of	on Form 990, Part IV, li	ne 11c. See Form 990, Part X, li	ne 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end-of-year market va	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" of	on Form 990. Part IV. li	ne 11d. See Form 990. Part X. II	ine 15
	(a) Description) Book value
(1)				***************************************
(2)				
(3)				
(4)				
(5)				
(6)	2.7			
(7)				<u> </u>
(8)				
(9)	(h)			7
Part X	(b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.			
raitx	Complete if the organization answered "Yes" of line 25.	on Form 990, Part IV, li	ne 11e or 11f. See Form 990, Pa	art X,
1.	(a) Description of liability	- An Al	(b) Book value
(1) Federal i	ncome taxes			·
(2)				
(3)				
(4)				
(5)				
(6)	The same of the sa	u		
(7)				
(8)				
(9)		Y		
	(b) must equal Form 990, Part X, col. (B) line 25.)		<u> </u>	
	uncertain tax positions. In Part XIII, provide the text of the file billion and a 50 CR A CC 740.	=	•	T-1
organization's	liability for uncertain tax positions under FASB ASC 740. C	neck nere if the text of the fo	otnote has been provided in Part XIII	Х

2722222			100000	raye n
Pi	ift XI Reconciliation of Revenue per Audited Financial S		ue per Return.	
	Complete if the organization answered "Yes" on Form			
1	Total revenue, gains, and other support per audited financial statements	*************************	1	708,833
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	2b		
С	Recoveries of prior year grants	_2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	708,833
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		
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.			708,833
Pa	irt XII Reconciliation of Expenses per Audited Financial S		nses 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	547,849
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	1 - 1		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	547,849
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.)	3000000000		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c (This must equal Form 900 Part I line 1		ADDITION ADMINE	E47 940

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

PART X - FIN 48 FOOTNOTE

Part XIII Supplemental Information.

(3) OF THE INTERNAL REVENUE CODE, EXCEPT ON NET INCOME DERIVED FROM

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)

UNRELATED BUSINESS ACTIVITIES. THE ORGANIZATION IS NOT INVOLVED IN ANY VENTURE WHICH, IN ITS OPINION, IS SUBJECT TO TAX ON UNRELATED BUSINESS INCOME. ACCORDINGLY, THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. THE ORGANIZATION'S FEDERAL EXEMPT ORGANIZATION RETURNS FOR THE YEARS ENDING DECEMBER 31, 2016, 2017 AND 2018 ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER THEY WERE FILED. ANY YEARS PRIOR TO JANUARY 1, 2016 ARE THEREFORE CONSIDERED CLOSED. THE TAX RETURN FOR THE

Part XIII Supplemental Information (continued)
YEAR ENDED DECEMBER 31, 2019 IS DUE ON MAY 15, 2020 AND BEEN EXTENDED.
PART XIII - SUPPLEMENTAL FINANCIAL INFORMATION
PART IV, LINE 2B - FARMWORKER AND LANDSCAPER ADVOCACY PROJECT HOLDS FUNDS
FOR CLIENTS WHO HAVE RECEIVED LITIGATION STTLEMENTS. THE FUNDS ARE
SUBSEQUENTLY DISBURSED TO THE CLIEENTS.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

Employer identification number

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

ADVOCACY PRO				<u>36-43</u> 063	62
Part I Fundraising Activities. Con Form 990-EZ filers are not r	mplete if the organizat equired to complete th	ion answer	ed "Yes" on Form	n 990, Part IV, line	17.
1 Indicate whether the organization raised fund			Check all that apply.		· · · · · · · · · · · · · · · · · · ·
a Mail solicitations	e Solicitatio	n of non-gove	ernment grants		
b Internet and email solicitations	f Solicitation	n of governm	ent grants		
c Phone solicitations	g Special fu	undraising eve	ents		
d In-person solicitations	_ ,	-			
2a Did the organization have a written or oral ag or key employees listed in Form 990, Part VI	 I) or entity in connection wit 	h professional	I fundraising services	?	Yes No
b If "Yes," list the 10 highest paid individuals or compensated at least \$5,000 by the organiza	entities (fundraisers) pursu	ant to agreem	nents under which the	fundraiser is to be	
Compensated at least \$5,000 by the organiza	idion.	(iii) Dld fund-		(v) Amount paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(II) Activity	raiser have custody or control of contributions?	(Iv) Gross receipts from activity	(or retained by) fundraiser listed in col. (i)	(or retained by) organization
		Yes No			
1					
2					
3					
4					
5					
6					
7					-
8		+			
0					
3					
40					
10					
Total					
Total					
3 List all states in which the organization is registration or licensing.	istered of licensed to solicit	contributions	or nas been notified	it is exempt from	
X 3 X 3 X 3 X 3 X 3 X 3 X 3 X 3 X 3 X 3					
			*****	******	

Schedule G (Form 990 or 990-EZ) 2019 FARMWORKER AND LANDSCAPER 36-4306362 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events 20TH ANNIVERSAR NONE (add col. (a) through (event type) (event type) (total number) col. (c)) Revenue 1 Gross receipts 38,925 38,925 2 Less: Contributions 3 Gross income (line 1 minus 38,925 line 2) 38,925 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 1,826 9 Other direct expenses 1,826 10 Direct expense summary. Add lines 4 through 9 in column (d) 1,826 11 Net income summary. Subtract line 10 from line 3, column (d) 37,099 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain:

Sche	dule G (Form 990 or 990-EZ) 2019	FARMWORKE:	R AND	LANDSCAPER	36-430	6362	2	Page 3
1	Does the organization conduct gamir						Ye	
2	Is the organization a grantor, benefic	iary or trustee of a trust	, or a mem	ber of a partnership or other entity				
							Ye	s No
3	Indicate the percentage of gaming ac	ctivity conducted in:					L	
а				***************************************		13a		%
b	An outside facility			***+***********************************	STATE OF THE STATE	13b		/ _%
4		erson who prepares the	organizati	on's gaming/special events books and		ISU		
	records:	orden who properts the	organizati	orra garring/special events books and				
	Name ►							
	Address ▶			PMARITE PROGRAMMENT CONTROL CO				
5a	Does the organization have a contract							
	revenue?						Ye	s No
b	If "Yes," enter the amount of gaming	revenue received by the	e organizat	ion ▶ \$ and	the			
	amount of gaming revenue retained b	oy the third party ► \$	************	***************************************				
С	If "Yes," enter name and address of t	he third party:						
	Name ►							
	Address ▶				****			
6	Gaming manager information:							
	Name ►	*********		***************************************				
	Gaming manager compensation ▶ \$							
	Director/officer Er	mployee	Independe	ent contractor				
7	Mandatory distributions:							
а	Is the organization required under sta	ate law to make charitat	ole distribut	ions from the gaming proceeds to				
	retain the state gaming license?			<u> </u>			Ye	s No
b	11011	uired under state law to	he distribu	ted to other exempt organizations or		900		5 140
_	spent in the organization's own exem							
Pa	rt IV Supplemental Inform	nation Provide the	evnlana	tions required by Part I, line 2b, col	umpe (iii) a	nd (v)	ond	
9.000.00	Part III lines 9 9h 10	h 15h 15c 16 an	d 17h a	s applicable. Also provide any addit	ional inform	nu (v)	, anu	
	See instructions.	b, 100, 100, 10, all	u IID, a	s applicable. Also provide arry addit	ioriai iriiorri	iation	•	
	Oce mst detions.				·			
****	***************************************							
12.11								
	*********							111111111

	****************		*****					THE PROPERTY OF THE
TO KIND								

						1,7,1,1,1	7 1 1 1 1 1 1 1 1	****

Schedule G (Form 990 or 990-EZ) 2019

SCHEDULE M (Form 990)

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047 2019

Open To Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FARMWORKER AND LANDSCAPER

Employer identification number ADVOCACY PROJECT 36-4306362

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Schedule M (For	m 990) 2019	FARMWOR	KER AN	D LAND	SCAPER		36-43063	62	Page 2
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2019

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990 or 990-EZ. Inspection FARMWORKER AND LANDSCAPER Employer identification number

ADVOCACY PROJECT	36-4306362
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS	TO REVIEW FORM 990
THE COPY OF THE 990 IS PROVIDED TO AT LEAST ONE MEME	BER OF THE BOARD OF
DIRECTORS FOR REVIEW PRIOR TO FILING.	
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLIC	CTS POLICY
CONFLICT OF INTERESTS ARE REVIEWED BY THE BOARD OF I	DIRECTORS AND MANAGEMENT
AND ENFORCED BY THE BOARD.	
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS E	FOR TOP OFFICIAL
DETERMINED BY BOARD OF DIRECTORS	
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DIS	SCLOSURE EXPLANATION
ORGANIZATION DOCUMENTS ARE PUBLICLY AVAILABLE ON WEE	SSITE, OTHER
DOCUMENTATION IS AVAILABLE ON REQUEST.	

FARMWORKER AND LANDSCAPER ADVOCACY PROJECT FINANCIAL STATEMENTS DECEMBER 31, 2019

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Statement of Activities and Change in Net Assets	6
Statement of Functional Expenses	7
Statement of Cash Flows	8
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900 Skokie Boulevard, Suite 207 Northbrook, IL 60062

Phone: 847-498-1597 Fax: 847-498-1683 www.gunncpa.com

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Farmworker and Landscaper Advocacy Project

Report on the Financial Statements

I have audited the accompanying financial statements of Farmworker and Landscaper Advocacy Project (a nonprofit organization), which comprise the statement of financial position as of December 31, 2019, and the related statements of activities and change in net assets, functional expense, and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on these financial statements based on my audit. I conducted my audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that I plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, I express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Opinion

In my opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Farmworker and Landscaper Advocacy Project, as of December 31, 2019, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Northbrook, Illinois

May 1, 2020

STATEMENT OF FINANCIAL POSITION

DECEMBER 31, 2019

ASSETS Cash Cash- Client trust Investments Other assets-deposit Property and equipment (less accumulated depreciation of \$ 4,255)	estrictions 110,371 1,414 257,197 952	Net Assets <u>Donor Rest</u> \$		\$ Total 123,871 1,451 257,197 952
Total Assets	\$ 369,934	\$	13,537	\$ 383,471
LIABILITIES AND NET ASSETS				
LIABILITIES Accrued expense Client trust deposits	\$ 1,137	\$	-	\$ 1,137
Total Liabilities	 1,137			 1,137
NET ASSETS Net assets	 368,797		13,537	382,334
Total Net Assets	368,797		13,537	 382,334
Total Liabilities and Net Assets	\$ 369,934	\$	13,537	\$ 383,471

FARMWORKER AND LANDSCAPER ADVOCACY PROJECT STATEMENT OF ACTIVITIES AND CHANGE IN NET ASSETS

YEAR ENDED DECEMBER 31, 2019

SUPPORT AND REVENUE: Support:	Net Assets without Donor Restrictions		Net Assets with Donor Restrictions		Total	
Corporations and Foundations Law firms Individuals	\$	105,739 67,372 23,193	\$	13,500	\$	119,239 67,372
In-kind donations		213,030		-		23,193 213,030
Board		6,750		-		6,750
Church		1,500		-		1,500
Cy Pres Awards		4,730		_		4,730
Special events		38,925		-		38,925
Net assets released from restrictions		111,296		(12,966)		98,330
Total support	\$	572,535	\$	534	\$	573,069
Revenue:						
Legal fees		62,118				62,118
Unrealized gain on investments		65,055		-		65,055
Interest and dividends		5,185		-		5,185
Miscellaneous		3,406		-		3,406
Total revenue		135,764		-		135,764
Total support and revenue	\$	708,299	\$	534	\$	708,833
EXPENSES:						
Program services	S	493,149	\$	_	S	493,149
Management and general		51,518	_	-	J	51,518
Fundraising and development		3,182				3,182
Total expenses	\$	547,849	\$	•	\$	547,849
Change in net assets	\$	160,450	\$	534	\$	160,984
Net assets - January 1, 2019		208,347		13,003		221,350
Net assets - December 31, 2019	\$	368,797	\$	13,537	\$	382,334

STATEMENT OF FUNCTIONAL EXPENSE

YEAR ENDED DECEMBER 31, 2019

	0	rganization Total	Program Services		Management and General		Fundraising	
Accounting, audit and payroll fees	\$	11,392	\$	-	s	11,392	\$	_
Conference, meeting, meals, workshops		1,020		357		461	-	202
Consultant fees		32,105		21,518		10,587		-
Credit card fees		127				127		_
Depreciation		1,039		1,039		•		
Dues, fees, subscriptions, publications		375		250		125		
Equipment purchase		625		625		•		
In-kind		213,030		211,880		-		1,150
Miscellaneous		218		. 7		211		.,
Office supplies		417		267		150		
Payroll taxes and employee benefits		30,365		26,392		3,973		_
Printing and Reproduction		1,745		810		935		_
Professional liability insurance		1,709		1,709		•		_
Program supplies		625		625				_
Rent		24,000		21,600	51	2,400		_
Salaries and wages		197,645		176,825		20,820		_
Special events		1,826		•		-0,020		1,826
Telephone		1,885		1,753		132		1,020
Travel		24,082		23,873		205		4
Workshops		3,619		3,619				. 7
Total expense	\$	547,849	\$	493,149	\$	51,518	<u>\$</u>	3,182

STATEMENT OF CASH FLOWS

YEAR ENDED DECEMBER 31, 2019

INCREASE < DECREASE > IN CASH:

Change in net assets Adjustments to reconcile change in net assets to	\$	160,984
net cash provided by operating activities:		
Depreciation		1,039
Unrealized gain in investment account		(65,054)
Change in payables and other liabilities		(282)
Net Cash Provided by Operating Activities	-	96,687
CASH FLOWS FROM INVESTING ACTIVITIES:		
Increase in investments Net Cash (used by) investing activities		(11,555)
receasin (used by) investing activities	····	(11,555)
CASH FLOWS FROM FINANCING ACTIVITIES:	· · · · · · · · · · · · · · · · · · ·	-
NET INCREASE IN CASH	\$	85,132
CASH - JANUARY 1, 2019	*****	40,190
CASH - DECEMBER 31, 2019	\$	125,322

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2019

NATURE AND PROGRAMS OF THE ORGANIZATION

The Farmworker and Landscaper Advocacy Project (FLAP) was created in 1999 in response to amendments to Federal law which severely limited the assistance that federally-funded legal services programs could provide to many agency clients.

The mission of the Farmworker and Landscaper Advocacy Project (FLAP) -Ayuda para Trabajadores del Campo y Jardineros- is to improve working conditions for migrant and seasonal workers in Illinois, including low-income farmworkers, nursery workers, greenhouse workers, landscapers, snow plowing workers, packinghouse workers, cannery workers, restaurant workers and meat and poultry workers and their households.

FLAP carries out this mission through community outreach and education, litigation, community legal education, information and referrals and partnering with other organizations to fight human labor trafficking, and prevents family separation by helping immigrants secure dual citizenship for their children. FLAP programs are as follows:

Litigation Support

FLAP files lawsuits on behalf of individuals and as class actions, regardless of immigration status. FLAP focuses primarily on wage and hour violations but also finds an attorney and refers cases such: personal injury, nursing home abuse and neglect, medical malpractice, wrongful death, birth injury, product liability, car, trucking, bus and aviation accidents, premises liability, Federal Torts Claims Act, Assisted Living Negligence, home health care abuse and neglect, DUI, Social Security Disability, family law, Immigration and Breach of Contracts among others. FLAP also refers cases arising under Illinois workers' compensation laws and other labor laws to experienced counsel.

Community Outreach and Education

FLAP staff travels to 24 counties throughout Illinois to educate low income population and increase their access to legal services focusing in Northern and Central Illinois. Additionally, FLAP has working relationships with many organizations and law firms to better reach and serve immigrants, migrant and seasonal workers.

Community Legal Education

FLAP staff provides know-your-rights workshops. FLAP network of attorneys answer questions regarding employments rights, and FLAP staff refers clients to agencies and law firms with expertise in other legal fields that can assist them.

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2019

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting.

Basis of Presentation

Financial statement presentation follows current accounting standards. Under those standards, the Organization is required to report information regarding its financial position according to two classes of net assets, based on the presence or absence of donor imposed restrictions: net assets without donor restrictions and net assets with donor restrictions. Net Assets Without Donor Restrictions — Amounts that are not subject to usage restrictions based on donor-imposed requirements. This class also includes assets previously restricted where restrictions have expired or been met. Net Assets with Donor Restrictions — Assets subject to usage limitations based on donor-imposed or grantor restrictions. These restrictions may be temporary or may be based on a particular use. Restrictions may be met by the passage of time or by actions of the Organization. Certain restrictions may be needed to be maintained in perpetuity. Earnings related to restricted net assets will be included in net assets without donor-restrictions unless otherwise specifically required to be included in donor-restricted net assets by the donor or by applicable state law.

Restricted and Unrestricted Revenue

Contributions received are recorded as increases in net assets with or without donor restrictions.

Donated Services

\$213,030 of in kind contributions were included in the financial statements as income and related off-setting expense during the year ended December 31, 2019.

Cash and Cash Equivalents

For purposes of the Statement of Cash Flows, the Organization considers all highly liquid investments with an initial maturity of three months or less to be cash equivalents.

Investments

The Organization's investments at December 31, 2019 consist of 2,346 common no par value shares of Cincinnati Financial Corporation recorded at fair value based on quoted prices in active markets, which was approximately \$109.63 per share at December 31, 2019. The market value at December 31, 2019 amounted to \$257,197.

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2019

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Financial Statement Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Capitalization policy and depreciation

The Organization capitalizes equipment and other similar assets in excess of \$1,000. Depreciation on these current assets are on the straight line basis, for a period of 3 years.

Statement of Functional Expenses

The costs of providing various program and supporting services have been summarized on a functional basis in the statement of functional expenses. Directly identifiable expenses are charged to programs; general and administrative expense; and fund raising. Expenses related to more than one function are charged on pro-rata basis as estimated by management. Salaries and benefits are allocated on the percentage of time that the individual spends working on a given area. The allocation is done as a percentage of hours dedicated to an area to the total amount of the hours the staff member works. Certain expenses are allocated based on their usage. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Tax Status

The Organization is exempt from federal income tax under Section 501(c) (3) of the Internal Revenue Code. It qualifies for charitable contribution deductions under Section 170(b) (1) (iii) and has been classified as an organization that is not a private foundation under Section 509(a) (1). All required payroll tax filings through December 31, 2019 have been filed by the Organization.

Long Lived Assets

Long-lived assets to be held and used are reviewed for impairment whenever events or changes in circumstances indicate that the related carrying amount may not be recoverable. When required, impairment losses on assets to be held and used are recognized based on the excess of the assets' carrying amount over the fair value of the asset. Fair value is based on market quotes, if available, or is based on valuation techniques. There were no impairment losses recognized during the year ended December 31, 2019.

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2019

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Uncertain Tax Positions

The Organization is exempt from federal income taxes under Section 501(c) (3) of the Internal Revenue Code, except on net income derived from unrelated business activities. The Organization is not involved in any venture which, in its opinion, is subject to tax on unrelated business income. Accordingly, the Organization believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements. The Organization's federal Exempt Organization Returns for the years ending December 31, 2016, 2017 and 2018 are subject to examination by the IRS, generally for three years after they were filed. Any years prior to January 1, 2016 are therefore considered closed. The tax return for the year ended December 31, 2019 is due on May 15, 2020 and has been extended.

ADOPTION OF NEW ACCOUNTING STANDARD

In August 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Updated (ASU) No. 2016-14, Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities. ASU 2016-14 requires significant changes to the financial reporting model of organizations who follow the not-for-profit reporting model. The changes include reducing the classes of net assets from three to two – net assets with donor restrictions and net assets without donor restrictions. The ASU also requires changes in the way certain information is aggregated and reported by the Organization, including required disclosures about liquidity and availability of resources and increased disclosures on functional expenses. The new standard is effective for the Organization's year ending December 31, 2019 and thereafter and must be applied on a retrospective basis. The Organization adopted the ASU effective January 1, 2018.

DATE OF MANAGEMENT REVIEW

The Organization has reviewed subsequent events through and including May 1, 2020 which is the first date the financial statements were available for distribution.

AVAILABILITY OF FINANCIAL ASSETS

At December 31, 2019, the Organization has \$368,982 available to meet needs for general expenditures consisting of cash without restriction of \$110,371 and \$257,197 of liquid investments. None of these financial assets are subject to donor or other contractual restrictions. Accordingly, all such funds are available to meet the cash needs of the Organization in the next 12 months. The Organization manages its liquidity by developing and adopting annual operating budgets that provide sufficient funds for general expenditures in meeting its liabilities and other obligations as they become due. In general, the Organization maintains sufficient financial assets on hand to meet 30 days' worth of normal operating expenses.

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2019

FACILITY LEASE AND SUBSEQUENT EVENTS

The Organization executed a new lease effective October 1, 2018 through September 30, 2020 which calls for a monthly base rate of \$2,000 per month. Lease payments were \$24,000 for the year ending December 31, 2019. The organization is on a month to month lease. Subsequent to December 31, 2019, \$18,000 is required as lease payments for the respective year ending and December 31, 2020 under provisions of the current lease, for a total projected payment of \$18,000 under the lease in effect at December 31, 2019.

PROPERTY, EQUIPMENT AND DEPRECIATION

The Organization recorded \$1,039 in depreciation expense during 2019. At December 31, 2019 all of the Organization's assets are fully depreciated. The Organization's property and equipment at December 31, 2019 amounted to the following:

Office equipment, furniture and fixtures	\$ 4,255
Net property and equipment at cost	\$ 4,255
Less: accumulated depreciation	(4,255)
Net property and equipment	\$ -

FAIR VALUE OF FINANCIAL INSTRUMENTS

Generally accepted accounting principles require disclosure of an estimate of fair value of certain financial instruments. The Organization's significant financial instruments are cash, accounts receivable, and other short-term assets and liabilities. For these financial instruments, carrying values approximate fair value.

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2019

CONCENTRATION OF RISK

The Organization maintained account balances in depository institutions insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000 in each institution. Additionally, the Organization has stock investments in an investment company, comprising stock in one Company as described previously. This stock is subject to fluctuation.

CORONAVIRUS COVID-19 SUBSEQUENT EVENT

As a result of the spread of the COVID-19 coronavirus subsequent to the financial statement date, economic uncertainties have arisen which could negatively impact net income. Other financial impact could occur though such potential impact is unknown at this time.