

***** THIS IS NOT A FILEABLE COPY *****

**IRS E-file Signature Authorization
for a Tax Exempt Entity**

OMB No. 1545-0047

Form **8879-TE**

For calendar year 2024, or fiscal year beginning _____, 2024, and ending _____, 20____

2024

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

Name of filer **AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

EIN or SSN
95-6056761

Name and title of officer or person subject to tax **SUPHACK NAING
PRESIDENT**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here	☒	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 11,557,085.
2a Form 990-EZ check here	☐	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here	☐	b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here	☐	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b
5a Form 8868 check here	☐	b Balance due (Form 8868, line 3c)	5b
6a Form 990-T check here	☐	b Total tax (Form 990-T, Part III, line 4)	6b
7a Form 4720 check here	☐	b Total tax (Form 4720, Part III, line 1)	7b
8a Form 5227 check here	☐	b FMV of assets at end of tax year (Form 5227, Item D)	8b
9a Form 5330 check here	☐	b Tax due (Form 5330, Part II, line 19)	9b
10a Form 8038-CP check here	☐	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize **EVERGREEN ALLIANCE PROFESSIONAL CORP.** to enter my PIN **92840**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ****** THIS IS NOT A FILEABLE COPY ****** Date

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

30352190720

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **REBECCA CHRISTIANSEN** Date **10/21/25**

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2024)

LHA 402521 12-26-24

11501021 161399 2015

2024.04031 AMVETS DEPARTMENT OF CALIFO 2015__1

Form **990**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

2024Open to Public
Inspection**A For the 2024 calendar year, or tax year beginning and ending****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
12345 EUCLID ST.City or town, state or province, country, and ZIP or foreign postal code
GARDEN GROVE, CA 92840**F** Name and address of principal officer: **SUPHACK NAING
SAME AS C ABOVE****D** Employer identification number**95-6056761****E** Telephone number**(714) 761-5811****G** Gross receipts \$**23,415,233.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.AMVETSCASF.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1949** **M** State of legal domicile: **CA****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: PROVIDES VETERANS AND THEIR FAMILIES WITH SERVICE PROGRAMS SUCH AS SERVICE OFFICERS, WELCOME
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 8
	4	Number of independent voting members of the governing body (Part VI, line 1b) 8
	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a) 270
	6	Total number of volunteers (estimate if necessary) 8
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11 0.	
Revenue	8	Contributions and grants (Part VIII, line 1h) 14,078,171.
	9	Program service revenue (Part VIII, line 2g) 0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 144,416.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -3,520,457.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 10,702,130.
	Expenses	13
14		Benefits paid to or for members (Part IX, column (A), line 4) 0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 7,840,201.
16a		Professional fundraising fees (Part IX, column (A), line 11e) 0.
b		Total fundraising expenses (Part IX, column (D), line 25) 163,005.
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,386,630.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 11,796,926.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12 -1,094,796.
	20	Total assets (Part X, line 16) 21,031,029.
	21	Total liabilities (Part X, line 26) 859,437.
	22	Net assets or fund balances. Subtract line 21 from line 20 20,171,592.

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	SUPHACK NAING, PRESIDENT				
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	REBECCA CHRISTIANSEN	REBECCA CHRISTIANSEN	10/21/25		P01219191
	Firm's name	Firm's EIN			
	EVERGREEN ALLIANCE PROFESSIONAL CORP.	86-1400078			
	Firm's address	Phone no.			
	4332 CERRITOS AVE, SUITE A105 LOS ALAMITOS, CA 90720	714-372-8110			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

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

432001 12-10-24

Form **990** (2024)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

PROUDLY SERVES VETERANS AND THEIR FAMILIES IN YOUR COMMUNITY THROUGH SERVICE PROGRAMS SUCH AS SERVICE OFFICERS, WELCOME HOME PROGRAM TO OUR HOMELESS VETERANS, AND GRANTS USED FOR VARIOUS OTHER VETERAN PROGRAMS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **9,415,207.** including grants of \$ **106.**) (Revenue \$)
TEAM AMVETS THRIFT STORES OPERATE VETERAN-MANAGED AND VETERAN-RUN THRIFT STORES IN SOUTHERN AND CENTRAL CALIFORNIA. THE STORES OFFER DONATED HOUSEHOLD ITEMS AND CLOTHING TO THE GENERAL PUBLIC AT A DISCOUNTED PRICE. PROCEEDS FROM SALES OF THE DONATED MERCHANDISE ARE USED TO SUPPORT THE AMVETS SERVICE FOUNDATION AND ITS PROGRAMS WHICH SERVE VETERANS WITHIN CALIFORNIA. THE RECRUITING PROCESS OF TEAM AMVETS ACTIVELY RECRUITS MILITARY VETERANS TO WORK WITHIN THE THRIFT STORES AND SERVICE FOUNDATION PROVIDES ADDITIONAL OPPORTUNITIES TO THE SOUTHERN CALIFORNIA VETERAN COMMUNITY AND ALSO ACTS AS A FORM OF THERAPY FOR VETERANS RETURNING FROM COMBAT WITH POST TRAUMATIC STRESS OR OTHER MENTAL DISABILITIES.

4b (Code:) (Expenses \$ **1,633,085.** including grants of \$ **369,000.**) (Revenue \$)
SERVICE TO VETERANS - SERVICE OFFICERS PROVIDE FREE QUALITY VETERANS' BENEFITS CLAIMS SERVICE AND INFORMATION IN THE AREAS OF EDUCATION, DISABILITY COMPENSATION, MEDICAL SERVICES, HOSPITALIZATION, AND REHABILITATION. THEY ARE TRAINED IN ALL ASPECTS OF VETERANS AFFAIRS BENEFIT REGULATIONS, ARE IN TUNE WITH VETERANS' ISSUES, AND HAVE KNOWLEDGE OF SPECIFIC VETERANS' CONCERNS. ADDITIONAL SERVICES INCLUDE DONATED CLOTHING TO HOMELESS VETERANS, DONATED TIME, ENERGY AND PRODUCTS TO THE STAND DOWNS, DISCOUNTS PROVIDED TO VETERANS, AND PREFERENTIAL HIRING OF VETERANS.

4c (Code:) (Expenses \$ **560,894.** including grants of \$ **174,472.**) (Revenue \$)
"WELCOME HOME" - FURNITURE ASSISTANCE PROGRAM IN PARTNERSHIP WITH VETERANS ADMINISTRATION TO PROVIDE FURNITURE AND OTHER HOUSEHOLD ITEMS TO VETERANS WHO HAVE BEEN HOMELESS BUT ARE NOW IN THE PROCESS OF REBUILDING THEIR LIVES.

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **11,609,186.**

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Form 990 (2024)

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Form 990 (2024)

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Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22 X	
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	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
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	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	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	33	X
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	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38 X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 19	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Form 990 (2024)

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

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 270		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a 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:			
a 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 1041?	12a		
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.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
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		
c 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 Schedule O	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

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

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

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	1a	8		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b Enter the number of voting members included on line 1a, above, who are independent	1b	8		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 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?	7a		X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9			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?	10a		X	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b			
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X		
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X		
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X		
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X		
13 Did the organization have a written whistleblower policy?	13	X		
14 Did the organization have a written document retention and destruction policy?	14	X		
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?				
a The organization's CEO, Executive Director, or top management official	15a	X		
b Other officers or key employees of the organization	15b	X		
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		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 CA

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
LEONA WHEELER - (714) 761-5811
12345 EUCLID ST., GARDEN GROVE, CA 92840

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

[illegible]

**AMVETS DEPARTMENT OF CALIFORNIA
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal								281,756.	0.	16,005.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								281,756.	0.	16,005.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 2

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

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Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	10,477,207.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 10,358,918.				
	h Total. Add lines 1a-1f				10,477,207.		
Program Service Revenue			Business Code				
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			335,403.			335,403.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	(ii) Personal			
			100,843.				
			b Less: rental expenses ...	6b			
	c Rental income or (loss)	6c	60,393.				
	d Net rental income or (loss)			60,393.	60,393.		
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other			
			2,105,327.				
			b Less: cost or other basis and sales expenses	7b			
	c Gain or (loss)	7c	353,383.	-12,183.			
	d Net gain or (loss)			341,200.			341,200.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
			b Less: direct expenses	8b			
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
		b Less: direct expenses	9b				
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a	10,394,502.					
		b Less: cost of goods sold	10b				10,053,571.
		c Net income or (loss) from sales of inventory					340,931.
Miscellaneous Revenue			Business Code				
	11 a VENDING MACHINE INCOME		900099	1,298.			1,298.
	b MISCELLANEOUS		900099	653.			653.
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			1,951.			
12 Total revenue. See instructions				11,557,085.	401,324.	0.	678,554.

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	350,000.	350,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	193,578.	193,578.		
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	148,804.	59,522.	74,402.	14,880.
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	6,604,665.	6,399,212.	205,453.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	174,274.	162,751.	11,523.	
10 Payroll taxes	523,118.	503,080.	20,038.	
11 Fees for services (nonemployees):				
a Management				
b Legal	837,731.		837,731.	
c Accounting	92,400.		92,400.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	70,571.		70,571.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	379,663.	179,900.	51,638.	148,125.
12 Advertising and promotion	29,022.	29,006.	16.	
13 Office expenses	478,984.	468,907.	10,077.	
14 Information technology				
15 Royalties				
16 Occupancy	1,608,523.	1,541,339.	67,184.	
17 Travel	61,900.	32,160.	29,740.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	482,767.	391,119.	91,648.	
23 Insurance	1,034,090.	940,554.	93,536.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a VEHICLE EXPENSE	336,539.	329,352.	7,187.	
b BANK AND MERCHANT FEES	197,795.		197,795.	
c BAD DEBT	27,951.	27,951.		
d DUES & SUBSCRIPTIONS	3,791.	755.	3,036.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	13,636,166.	11,609,186.	1,863,975.	163,005.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,381,767.	1	1,388,424.
	2 Savings and temporary cash investments	1,179,577.	2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	46,240.	4	78,732.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	457,088.	8	580,427.
	9 Prepaid expenses and deferred charges	41,511.	9	54,037.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	15,495,791.		
	b Less: accumulated depreciation	7,448,340.		
	11 Investments - publicly traded securities	7,755,878.	10c	8,047,451.
	12 Investments - other securities. See Part IV, line 11	9,158,586.	11	9,999,069.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	10,382.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	21,031,029.	15	1,333,105.	
Liabilities	17 Accounts payable and accrued expenses	21,031,029.	16	21,481,245.
	18 Grants payable	730,156.	17	1,739,388.
	19 Deferred revenue		18	
	20 Tax-exempt bond liabilities		19	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties		23	
	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	129,281.	24	
	26 Total liabilities. Add lines 17 through 25	859,437.	25	1,521,568.
	Net Assets or Fund Balances	27 Net assets without donor restrictions	859,437.	26
28 Net assets with donor restrictions				
Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.				
29 Capital stock or trust principal, or current funds			27	20,171,592.
30 Paid-in or capital surplus, or land, building, or equipment fund			28	18,220,289.
31 Retained earnings, endowment, accumulated income, or other funds				
32 Total net assets or fund balances		20,171,592.	29	
33 Total liabilities and net assets/fund balances		21,031,029.	30	
Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				

Form **990** (2024)

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Form 990 (2024)

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,557,085.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,636,166.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,079,081.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,171,592.
5	Net unrealized gains (losses) on investments	5	302,778.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-175,000.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	18,220,289.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
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 _____		

Form **990** (2024)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization **AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION** Employer identification number **95-6056761**

Part I 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).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 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).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 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.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **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.**
- 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.**
- 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.**
- d ☐ **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.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations _____
- g 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?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

AMVETS DEPARTMENT OF CALIFORNIA

SERVICE FOUNDATION

Schedule A (Form 990) 2024

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Part II 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13,795,566.	18,295,687.	15,791,723.	14,078,171.	10,477,207.	72,438,354.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	13,795,566.	18,295,687.	15,791,723.	14,078,171.	10,477,207.	72,438,354.
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.						72,438,354.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	13,795,566.	18,295,687.	15,791,723.	14,078,171.	10,477,207.	72,438,354.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	249,253.	272,512.	262,510.	309,241.	436,246.	1,529,762.
9 Net income from unrelated business activities, whether or not the business is regularly carried on					340,931.	340,931.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,923.	123,515.	40,894.	37,010.	1,951.	205,293.
11 Total support. Add lines 7 through 10						74,514,340.

12 Gross receipts from related activities, etc. (see instructions)	12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here		☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	97.21 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	97.57 %

16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

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

Schedule A (Form 990) 2024

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on 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.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Schedule A (Form 990) 2024

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Schedule A (Form 990) 2024

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Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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.		

Section 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).		

Section 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?		
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).		
3 By reason of the relationship described on line 2, above, 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.		

Section 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 instructions).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .			
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.			

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Schedule A (Form 990) 2024

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a 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 (<i>explain in detail in Part VI</i>):			
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 0.015 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 0.035.	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 0.85 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 integrated Type III supporting organization (see instructions).			

Schedule A (Form 990) 2024

**AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Schedule A (Form 990) 2024

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (describe in Part VI). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2024 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

This image shows a full page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, typical of notebook paper. There are no margins, text, or other markings on the page.

SCHEDULE D
(Form 990)

(Rev. December 2024)
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 **AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Employer identification number
95-6056761

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	☐ Yes	☐ No
6 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?	☐ Yes	☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 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	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 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

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

☐ Yes ☐ No

9 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 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.

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 \$

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment _____ %

b Permanent endowment _____ %

c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations? _____

(ii) Related organizations? _____

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

	Yes	No
3a(i)		
3a(ii)		
3b		

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,429,602.		2,429,602.
b Buildings		8,983,315.	5,067,948.	3,915,367.
c Leasehold improvements		2,358,248.	1,161,901.	1,196,347.
d Equipment		895,982.	660,581.	235,401.
e Other		828,644.	557,910.	270,734.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)).				8,047,451.

Schedule D (Form 990) (Rev. 12-2024)

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DEPOSITS	22,899.
(2) OPERATING LEASE	1,310,206.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	1,333,105.

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAPITAL LEASE OBLIGATIONS	1,513,518.
(3) SECURITY DEPOSIT	8,050.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	1,521,568.

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

Schedule D (Form 990) (Rev. 12-2024)

AMVETS DEPARTMENT OF CALIFORNIA

Schedule D (Form 990) (Rev. 12-2024) SERVICE FOUNDATION

95-6056761 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	21,883,313.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	302,778.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	302,778.
3	Subtract line 2e from line 1	3	21,580,535.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	70,571.
b	Other (Describe in Part XIII.)	4b	-10,094,021.
c	Add lines 4a and 4b	4c	-10,023,450.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	11,557,085.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses 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	23,659,616.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	23,659,616.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	70,571.
b	Other (Describe in Part XIII.)	4b	-10,094,021.
c	Add lines 4a and 4b	4c	-10,023,450.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	13,636,166.

Part XIII Supplemental Information

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

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES RELATING TO REVENUE RECEIVED IN CONNECTION WITH EXEMPT PROGRAMS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701(D) OF THE CALIFORNIA TAX CODE. ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR INCOME TAXES IN THESE FINANCIAL STATEMENTS.

THE ORGANIZATION FOLLOWS FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH PROVIDES ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN ORGANIZATION IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN. THE ORGANIZATION EVALUATES UNCERTAIN TAX POSITIONS WHEREBY THE EFFECT OF THE UNCERTAINTY WOULD BE RECORDED IF THE TAX POSITIONS WILL, MORE LIKELY THAN NOT, BE SUSTAINED UPON EXAMINATION. AS OF DECEMBER 31, 2024, MANAGEMENT DOES NOT BELIEVE THE ORGANIZATION HAS ANY UNCERTAIN TAX POSITIONS REQUIRING ACCRUAL OR DISCLOSURE.

THE ORGANIZATION IS SUBJECT TO POTENTIAL INCOME TAX AUDITS ON OPEN TAX YEARS BY ANY TAXING JURISDICTION IN WHICH IT OPERATES. THE STATUTE OF LIMITATIONS FOR FEDERAL AND CALIFORNIA STATE PURPOSES IS GENERALLY THREE AND FOUR YEARS, RESPECTIVELY.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

COGS	-10,053,571.
RENT EXPENSE	-40,450.

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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 **AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION** Employer identification number
95-6056761

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMVETS DEPARTMENT OF CA 4969E MCKINLEY AVE, SUITE 207 FRESNO, CA 93727	95-1526290	501(C)(19)	350,000.	0.			SUPPORT VETERANS

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **1.**
- 3 Enter total number of other organizations listed in the line 1 table

AMVETS DEPARTMENT OF CALIFORNIA

Schedule I (Form 990) (Rev. 12-2024) **SERVICE FOUNDATION**

95-6056761

Page 2

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FURNITURE & HOUSEHOLD GOODS	431	0.	193,578.	FMV	FURNITURE & HOUSEHOLD GOODS

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

BUDGETS ARE PROVIDED DURING THE GRANT REQUEST PROCESS AND THE ORGANIZATION MONITORS THE USE OF FUNDS THROUGH A FOLLOW-UP PROCESS, RECONCILIATIONS OF DISBURSEMENTS AND SUBMITTAL OF RECEIPTS, IF APPLICABLE.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public
Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

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

Name of the organization **AMVETS DEPARTMENT OF CALIFORNIA
SERVICE FOUNDATION**

Employer identification number
95-6056761

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		10,358,918.	THRIFT VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (.....)				
26 Other (.....)				
27 Other (.....)				
28 Other (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part V, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it
must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) 2024

Part II

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

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF CONTRIBUTIONS IS BEING REPORTED.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization AMVETS DEPARTMENT OF CALIFORNIA SERVICE FOUNDATION	Employer identification number 95-6056761
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**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
HOME & OTHER VARIOUS PROGRAMS.**

FORM 990, PART VI, SECTION A, LINE 7A:

THE DIRECTORS ARE ELECTED AT EACH DEPARTMENT ANNUAL CONVENTIONS IN ACCORDANCE WITH THE BYLAWS, POLICIES AND PROCEDURES OF THE DEPARTMENT. EACH DIRECTOR SHALL TAKE OFFICE ON THE DATE OF THE ANNUAL BOARD OF DIRECTORS MEETING OF THE CORPORATION FOLLOWING THE DEPARTMENT CONVENTION AND SHALL HOLD OFFICE UNTIL THE DATE OF THE ANNUAL BOARD OF DIRECTORS MEETING OF THE CORPORATION FOLLOWING THE ADJOURNMENT OF THE THIRD ENSUING ANNUAL DEPARTMENT CONVENTION AND UNTIL A SUCCESSOR HAS BEEN ELECTED.

FORM 990, PART VI, SECTION A, LINE 7B:

CHANGES TO SPECIFIC SECTIONS OF THE THE GOVERNING DOCUMENTS MUST BE VOTED ON BY DELEGATES APPOINTED TO THE STATE CONVENTION. ALL OTHER SECTIONS OF THE BYLAWS MAY BE AMENDED WITH APPROVAL OF A TWO-THIRDS MAJORITY OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

PAID CPA FIRM PREPARES THE FORM 990 AND SUBMITS THE FORM 990 TO THE BOARD OF DIRECTORS TO REVIEW FOR ACCURACY AND REASONABLENESS. THE PAID CPA THEN PRESENTS THE 990 TO THE BOARD OF DIRECTORS WHEN THEY MAY ASK QUESTIONS AND/OR FOR CLARIFICATIONS AS TO THE AMOUNTS AND INFORMATION ON THE FORM 990. THE BOARD OF DIRECTORS THEN MAKE RECOMMENDATIONS ON WHETHER THE FORM 990 IS REASONABLE AND WHETHER THEY RECOMMEND FILING THE FORM AS PRESENTED OR WITH CHANGES THAT WERE DISCUSSED WITH THE CPAS.

FORM 990, PART VI, SECTION B, LINE 12C:

PERIODIC REVIEWS ARE CONDUCTED TO ENSURE COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS OR A COMPENSATION COMMITTEE DETERMINE AND APPROVE THE QUALIFICATIONS, JOB DESCRIPTION AND COMPENSATION PACKAGE FOR THE EXECUTIVE DIRECTOR AND TOP MANAGEMENT.

THE BOARD OF DIRECTORS OR A COMPENSATION COMMITTEE MEET TO DISCUSS THE REQUIREMENTS FOR HIRING AN OFFICER OR KEY EMPLOYEE. CANDIDATES THAT MEET THE QUALIFICATIONS FOR THE POSITION ARE PRESENTED TO THE BOARD THE BOARD APPROVES THE COMPENSATION AND HIRING OF THE CANDIDATE.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC BY REQUEST.

FORM 990, PART XII LINE 2C

THE ORGANIZATION DID NOT CHANGE ITS METHOD OF OVERSIGHT OR SELECTION DURING THE YEAR.

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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 AMVETS DEPARTMENT OF CALIFORNIA SERVICE FOUNDATION	Employer identification number 95-6056761
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Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
AMVETS DEPARTMENT OF CALIFORNIA - 95-1526290 4969E MCKINLEY AVE, SUITE 207 FRESNO, CA 93727	VETERANS SERVICE ORGANIZATION	CALIFORNIA	501(C)(19)				X
AMVETS NATIONAL HEADQUARTERS - 53-0176836 4647 FORBES BOULEVARD LANHAM, MD 20706	VETERANS SERVICE ORGANIZATION	DISTRICT OF COLUMBIA	501(C)(19)				X

Schedule R (Form 990) (Rev. 1-2025) **SERVICE FOUNDATION**

Page 2

Part III

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

[illegible]

AMVETS DEPARTMENT OF CALIFORNIA

Schedule R (Form 990) (Rev. 1-2025) **SERVICE FOUNDATION**

95-6056761 Page **3**

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) AMVETS DEPARTMENT OF CA	B	350,000.	
(2)			
(3)			
(4)			
(5)			
(6)			

2024 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
2	PURCHASE OF SUTHERLAND BUILDING	06/29/90	SL	40.00		16	553,007.				553,007.	529,519.		23,488.	553,007.
3	SUTHERLAND BLDG-INSULATION	07/13/95	SL	40.00		16	8,218.				8,218.	5,822.		205.	6,027.
4	SUTHERLAND BLDG-LIGHT FIXTURE	07/28/95	SL	40.00		16	6,000.				6,000.	4,250.		150.	4,400.
5	SAN DIEGO-LIGHT FIXTURE/ELECTRICAL	08/30/95	SL	40.00		16	16,097.				16,097.	11,420.		402.	11,822.
6	ROOF REPAIR & WARRANTY	01/09/20	SL	15.00		16	3,350.				3,350.	893.		223.	1,116.
7	SAN DIEGO-HEATING/AIR CONDITIONING	11/26/97	SL	40.00		16	75,106.				75,106.	48,999.		1,878.	50,877.
41	FRESNO-SHIELDS BLDG DEVELOPMENT	03/21/03	SL	40.00		16	1,776,407.				1,776,407.	921,511.		32,772.	954,283.
42	FRESNO-PURCHASE OF SHIELDS BLDG	04/12/01	SL	40.00		16	273,607.				273,607.	204,583.		6,840.	211,423.
43	SHIELDS BLDG-SUBSEQUENT COSTS	05/28/03	SL	40.00		16	12,916.				12,916.	6,646.		323.	6,969.
44	SHIELDS BLDG-CAPITALIZED LEGAL EXP	09/30/03	SL	40.00		16	14,328.				14,328.	7,253.		358.	7,611.
45	SHIELDS BLDG-CONTINUING LEGAL EXP	01/31/04	SL	40.00		16	34,208.				34,208.	17,033.		855.	17,888.
46	SHIELDS BLDG-CONTINUING LEGAL EXP.	05/25/04	SL	40.00		16	5,000.				5,000.	2,448.		125.	2,573.
47	SHIELDS BLDG-CONTINUING LEGAL EXP	06/07/04	SL	40.00		16	6,150.				6,150.	3,011.		154.	3,165.
48	SHIELDS BLDG-CONTINUING LEGAL EXP	07/22/04	SL	40.00		16	3,240.				3,240.	1,573.		81.	1,654.
49	SHIELDS BLDG-CONTINUING LEGAL EXP	10/21/04	SL	40.00		16	1,200.				1,200.	575.		30.	605.
50	SHIELDS BLDG-CONTINUING LEGAL EXP	12/31/05	SL	40.00		16	24,624.				24,624.	11,081.		616.	11,697.
51	SHIELDS BLDG-CONTINUING LEGAL EXP	06/28/06	SL	40.00		16	2,365.				2,365.	1,035.		59.	1,094.

428111 04-01-24

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
52	SHIELDS BLDG-CONTINUING LEGAL EXP	07/19/06	SL	40.00		16	1,400.				1,400.	610.		35.	645.
53	SHIELDS BLDG-CONTINUING LEGAL EXP	08/31/06	SL	40.00		16	5,200.				5,200.	2,253.		130.	2,383.
54	SHIELDS BLDG-CONTINUING LEGAL EXP	10/31/06	SL	40.00		16	1,937.				1,937.	831.		48.	879.
55	SHIELDS BLDG-CONTINUING LEGAL EXP	11/27/06	SL	40.00		16	750.				750.	321.		19.	340.
56	FRESNO BUILDING IMPROVEMENT	04/07/08	SL	40.00		16	34,850.				34,850.	13,722.		871.	14,593.
118	PURCHASE OF HILLTOP BUILDING	02/14/86	SL	40.00		16	659,913.				659,913.	659,913.		0.	659,913.
119	HILLTOP BLDG IMPROVEMENTS	03/01/86	SL	40.00		16	4,101.				4,101.	3,190.		103.	3,293.
120	HILLTOP BLDG IMPROVEMENTS	07/01/88	SL	40.00		16	1,649.				1,649.	1,248.		41.	1,289.
121	HILLTOP AIR CONDITIONING SYSTEM	08/01/88	SL	40.00		16	34,000.				34,000.	25,699.		850.	26,549.
122	HILLTOP PAVING	01/26/94	SL	40.00		16	26,314.				26,314.	18,639.		658.	19,297.
123	HILLTOP-LIGHTING IMPROVEMENTS	01/09/96	SL	40.00		16	14,234.				14,234.	9,968.		356.	10,324.
124	HILLTOP-PAVING WORK (CHURCH)	12/06/95	SL	40.00		16	1,557.				1,557.	1,093.		39.	1,132.
125	(D)HILLTOP-FIBERGLASS ROOF (CHURCH)	09/04/97	SL	40.00		16	12,660.				12,660.	8,335.		317.	8,652.
126	HILLTOP-R&R HVAC-NEW-ELECTRICAL	05/31/99	SL	40.00		16	113,083.				113,083.	69,499.		2,827.	72,326.
127	HILLTOP-STORE EXPANSION PROJECT	05/31/01	SL	40.00		16	1,292,709.				1,292,709.	729,842.		32,318.	762,160.
128	DRAIN INSTALL	06/01/20	SL	40.00		16	6,630.				6,630.	594.		166.	760.
129	HILLTOP PARKING APPRAISAL	05/15/10	SL	.000		16	2,500.				2,500.			0.	
161	3315 SOUTH STREET BLDG	12/31/05	SL	40.00		16	1,173,902.				1,173,902.	395,215.		29,348.	424,563.

428111 04-01-24

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
162	BUILDOUT ON LONG BEACH OFFICE	06/30/11	SL	40.00		16	282,005.				282,005.	88,126.		7,050.	95,176.
163	NEW ROLLING STEEL FOR EAST WALL RECEIVING #2 DOOR	11/13/18	SL	40.00		16	4,177.				4,177.	217.		104.	321.
243	7215 LINDALE, SACRAMENTO	01/01/96	SL	25.00		16	200,000.				200,000.	171,612.		8,000.	179,612.
244	812 K ST. SANGER - POST 98	11/01/98	SL	40.00		16	118,186.				118,186.	95,473.		2,955.	98,428.
245	812 K ST. SANGER - POST 98	06/29/05	SL	40.00		16	30,000.				30,000.	12,750.		750.	13,500.
246	812 K ST. SANGER - POST 98	07/01/08	SL	40.00		16	102,092.				102,092.	39,560.		2,552.	42,112.
247	7215 LINDALE DR POST #1 REBUILD	07/01/09	SL	40.00		16	103,980.				103,980.	37,693.		2,600.	40,293.
248	POST # REBUILD	01/01/10	SL	40.00		16	36,688.				36,688.	12,841.		917.	13,758.
249	812 ST. SANGER - POST 98	07/01/09	SL	40.00		16	193,269.				193,269.	70,060.		4,832.	74,892.
250	12345 EUCLID, GARDEN GROVE-BLDG.	12/14/14	SL	40.00		16	1,240,000.				1,240,000.	310,400.		31,000.	341,400.
251	AMV 1330 BOLANOS FAC MAINT 8.26.14	01/15/15	SL	40.00		16	140,600.				140,600.	31,635.		3,515.	35,150.
252	PURCHASE OF FRESNO BUILDING	07/08/83	SL	40.00		16	225,637.				225,637.	192,851.		5,641.	198,492.
253	MISC FRESNO BLDG IMPROVEMENTS	01/01/86	SL	40.00		16	36,081.				36,081.	28,122.		902.	29,024.
254	FRESNO BLDG IMPROVEMENTS	07/01/88	SL	40.00		16	14,908.				14,908.	11,279.		373.	11,652.
255	FRESNO BLDG IMPROVEMENTS	08/01/88	SL	40.00		16	32,504.				32,504.	24,569.		813.	25,382.
256	FRESNO-BLDG IMPROVEMENTS	09/30/95	SL	40.00		16	10,645.				10,645.	7,518.		266.	7,784.
257	FRESNO-LIGHTING IMPROVEMENTS OLD	01/09/96	SL	40.00		16	14,755.				14,755.	10,328.		369.	10,697.
258	FRESNOBLDG-ELECTRICAL/CLEANU	09/30/04	SL	40.00		16	7,236.				7,236.	3,437.		181.	3,618.

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333	(D)2022 AUDIT ADJUSTMENT	12/31/22	SL	.000		16						8,634.		0.	8,634.
	* 990 PAGE 10 TOTAL BUILDINGS						8,995,975.				8,995,975.	4,875,729.		209,505.	5,085,234.
	FURNITURE & FIXTURES														
22	STORE FIXTURE RENOVATION (BIRD)	03/31/04	SL	5.00		16	1,177.				1,177.	1,177.		0.	1,177.
23	STORE FIXTURES (RAUCHRL3IRD)	07/31/04	SL	5.00		16	12,474.				12,474.	12,474.		0.	12,474.
24	10 CARTS. CART REFURBISHING	08/31/07	SL	5.00		16	1,729.				1,729.	1,729.		0.	1,729.
25	(D)BALLASTS	09/17/09	SL	5.00		16	1,880.				1,880.	1,880.		0.	1,880.
26	ACE POS SYSTEM	04/01/12	SL	5.00		16	18,770.				18,770.	18,770.		0.	18,770.
27	(D)(100) SHOPPING BASKETS	05/03/12	SL	5.00		16	1,294.				1,294.	1,294.		0.	1,294.
28	ALEMAN NEON SIGN	07/26/12	SL	5.00		16	34,227.				34,227.	34,227.		0.	34,227.
29	PHONE SUPPORT/MAINT	07/31/16	SL	5.00		16	2,062.				2,062.	2,062.		0.	2,062.
30	NEW PHONE LEASE (CAP LEASE)	07/31/16	SL	5.00		16	4,480.				4,480.	4,480.		0.	4,480.
31	(15)DUMP TABLES & (7)RD GARMENT RACKS	10/21/13	SL	5.00		16	2,070.				2,070.	2,070.		0.	2,070.
32	RACKS FROM CHULA VISTA	02/27/15	SL	5.00		16	2,834.				2,834.	2,834.		0.	2,834.
33	SAN DIEGO CCTV	09/04/15	SL	5.00		16	2,677.				2,677.	2,677.		0.	2,677.
34	STORE FIXTURES (RAUCH/BIRD)	07/31/04	SL	5.00		16	1,453.				1,453.	1,453.		0.	1,453.
35	CASH REGISTER COUNTER CASE	07/25/08	SL	5.00		16	1,623.				1,623.	1,623.		0.	1,623.
36	RE-LAMP ENERGY SAVERS	08/21/08	SL	5.00		16	1,039.				1,039.	1,039.		0.	1,039.

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37	ROOF REPAIRS	11/23/20	SL	5.00		16	1,745.				1,745.	1,076.		349.	1,425.
38	SBS INSTALLATION FOR BARCODING	04/28/23	SL	5.00		16	2,028.				2,028.	270.		406.	676.
69	FLOOR SAFE MODEL BWB3020-FL	12/19/01	SL	7.00		16	1,243.				1,243.	1,243.		0.	1,243.
70	DOCK LIFT & INSTALLATION	03/21/03	SL	5.00		16	5,252.				5,252.	5,252.		0.	5,252.
71	METTLER TOLEDO SCALE & INSTALLATION	03/21/03	SL	5.00		16	6,234.				6,234.	6,234.		0.	6,234.
72	BURGLAR ALARM SYSTEM	03/21/03	SL	5.00		16	7,712.				7,712.	7,712.		0.	7,712.
73	DOLLIES,SVCE CARTS,MATTS,CLOCKS,TRT	03/21/03	SL	5.00		16	3,867.				3,867.	3,867.		0.	3,867.
74	(D)120 SWIVEL CASTERS	07/31/03	SL	5.00		16	2,243.				2,243.	2,243.		0.	2,243.
75	19 DONATION CARTS	09/25/03	SL	5.00		16	4,750.				4,750.	4,750.		0.	4,750.
76	(D)76 SWIVEL CASTERS FOR 19 CARTS	09/17/03	SL	5.00		16	1,550.				1,550.	1,550.		0.	1,550.
77	20 DONATION CARTS,CASTERS, FIXTURES,1	03/25/04	SL	5.00		16	8,032.				8,032.	8,032.		0.	8,032.
78	ACME SAFE	06/08/06	SL	7.00		16	2,014.				2,014.	2,014.		0.	2,014.
79	COMPACTOR	01/31/08	SL	5.00		16	1,751.				1,751.	1,751.		0.	1,751.
80	(D)BALE MULE	07/30/08	SL	5.00		16	1,332.				1,332.	1,332.		0.	1,332.
81	(D)BALLASTS AND LAMPS	08/31/08	SL	5.00		16	3,069.				3,069.	3,069.		0.	3,069.
82	AC UNIT	06/30/10	SL	5.00		16	4,695.				4,695.	4,695.		0.	4,695.
83	(D)DVR SECURITY SYSTEM	07/28/10	SL	5.00		16	4,992.				4,992.	4,992.		0.	4,992.
84	(D)(100) SHOPPING BASKETS	05/07/12	SL	5.00		16	1,294.				1,294.	1,294.		0.	1,294.

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85	ALEMAN NEON SIGNS	06/21/12	SL	5.00		16	28,821.				28,821.	28,821.		0.	28,821.
86	AIR CONDITIONING UNIT	06/15/16	SL	5.00		16	7,634.				7,634.	7,634.		0.	7,634.
87	PHONE SYSTEM	07/31/16	SL	5.00		16	2,062.				2,062.	2,062.		0.	2,062.
88	NEW PHONE LEASE (CAP LEASE)	07/31/16	SL	5.00		16	5,150.				5,150.	5,150.		0.	5,150.
89	HVAC	09/19/16	SL	5.00		16	4,520.				4,520.	4,520.		0.	4,520.
90	(10)DUMP TABLES & (5)RD GARMENT RACKS	10/21/13	SL	5.00		16	1,400.				1,400.	1,400.		0.	1,400.
91	SHOPPING CARTS (50)	06/30/14	SL	7.00		16	4,080.				4,080.	4,080.		0.	4,080.
92	50 % DOWN REPLACE UNIT #4 10TON 2002 YORK MODEL#DH120	05/02/18	SL	7.00		16	3,220.				3,220.	2,300.		460.	2,760.
93	SECURE RETAIL POS + COMPUTER	05/01/17	SL	5.00		16	26,220.				26,220.	26,220.		0.	26,220.
94	SECURE RETAIL POS + COMPUTER	05/01/17	SL	5.00		16	12,686.				12,686.	12,686.		0.	12,686.
95	POS SYSTEM BAR CODING	12/15/21	SL	5.00		16	24,147.				24,147.	10,061.		4,829.	14,890.
96	JOB 134634 COMPLETE REPLACE UNIT #4 10TON 2002 YORK MOD	07/31/18	SL	7.00		16	2,978.				2,978.	2,127.		425.	2,552.
97	DUHUA SECURITY SYSTEM	08/05/22	SL	7.00		16	16,957.				16,957.	3,431.		2,422.	5,853.
98	DUHUA CAMERAS	01/24/23	SL	5.00		16	3,757.				3,757.	751.		751.	1,502.
99	SUPHACK NAING - FRESNO FANCE	12/29/23	SL	5.00		16	3,137.				3,137.			627.	627.
100	SALVADOR MARTINEZ - 45 FEET FENCE	12/29/23	SL	5.00		16	2,100.				2,100.			420.	420.
146	(D)10 RECEPTACLES	07/22/10	SL	5.00		16	1,213.				1,213.	1,213.		0.	1,213.
147	(D)(100) SHOPPING BASKETS	05/03/12	SL	5.00		16	1,294.				1,294.	1,294.		0.	1,294.

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148	ALEMAN NEON SIGNS	06/21/12	SL	5.00		16	12,224.				12,224.	12,224.		0.	12,224.
149	HYDRAULIC CYLINDER, SEAL KIT, FUSE	08/29/12	SL	5.00		16	2,255.				2,255.	2,255.		0.	2,255.
150	PHONE SYSTEM	07/31/16	SL	5.00		16	2,062.				2,062.	2,062.		0.	2,062.
151	NEW PHONE LEASE (CAP LEASE)	07/31/16	SL	5.00		16	4,480.				4,480.	4,480.		0.	4,480.
152	(D)CONTAINERS	04/28/10	SL	5.00		16	4,881.				4,881.	4,881.		0.	4,881.
153	(15)DUMP TABLES & (8)RD GARMENT RACKS	10/21/13	SL	5.00		16	2,130.				2,130.	2,130.		0.	2,130.
154	RACKS FROM CHULA VISTA	02/27/15	SL	5.00		16	2,834.				2,834.	2,834.		0.	2,834.
155	STORE FIXTURES (RAUCH/BIRD)	07/31/04	SL	5.00		16	1,453.				1,453.	1,453.		0.	1,453.
156	NEW PHONE LEASE (CAP LEASE)	07/31/16	SL	5.00		16	4,854.				4,854.	4,854.		0.	4,854.
157	RE-LAMP ENERGY SAVERS	08/21/08	SL	5.00		16	1,039.				1,039.	1,039.		0.	1,039.
158	PARTNER TEC SP850 256 GB SSD WIN1 LOT 2019	12/08/22	SL	5.00		16	37,388.				37,388.	8,101.		7,478.	15,579.
159	SECURE RETAIL POS SYSTEMS	06/12/23	SL	5.00		16	4,086.				4,086.	477.		817.	1,294.
186	BAILER CAGE	08/26/08	SL	5.00		16	1,051.				1,051.	1,051.		0.	1,051.
187	BALER	10/31/08	SL	5.00		16	1,384.				1,384.	1,384.		0.	1,384.
188	A/C UNIT	08/13/09	SL	5.00		16	6,450.				6,450.	6,450.		0.	6,450.
189	LOCKERS	06/09/10	SL	5.00		16	1,249.				1,249.	1,249.		0.	1,249.
190	(D)(100) SHOPPING BASKETS	05/07/12	SL	5.00		16	1,294.				1,294.	1,294.		0.	1,294.
191	FIVE-TON HEAT PUMP	08/09/12	SL	5.00		16	26,808.				26,808.	26,808.		0.	26,808.

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192	ALEMAN NEON SIGNS	09/11/12	SL	15.00		16	4,391.				4,391.	3,318.		293.	3,611.
193	(D)SECURITY CAMERAS	04/30/16	SL	5.00		16	1,277.				1,277.	1,277.		0.	1,277.
194	POS & TAG SOFTWARE	05/26/16	SL	5.00		16	16,656.				16,656.	16,656.		0.	16,656.
195	POS & TAG SOFTWARE	07/15/16	SL	5.00		16	16,656.				16,656.	16,656.		0.	16,656.
196	NEW PHONE LEASE (CAP LEASE)	07/31/16	SL	5.00		16	4,854.				4,854.	4,854.		0.	4,854.
197	(D)AJE 04 FROM 2016 AUDIT	01/28/17	SL	5.00		16	18,018.				18,018.	18,018.		0.	18,018.
198	BIG JOE	07/31/17	SL	5.00		16	4,446.				4,446.	4,446.		0.	4,446.
199	SIGN FOR STORE	05/31/17	SL	5.00		16	4,391.				4,391.	4,391.		0.	4,391.
200	SECURE RETAIL POS - BAR CODE PRINTER	12/19/18	SL	5.00		16	3,059.				3,059.	3,059.		0.	3,059.
201	50 METAL SHOPPING CARTS	07/14/22	SL	5.00		16	9,215.				9,215.	2,765.		1,843.	4,608.
202	SECURITY SYSTEM	07/14/22	SL	15.00		16	19,778.				19,778.	1,978.		1,319.	3,297.
203	INSTALLATION OF 2 AC	01/05/22	SL	15.00		16	40,249.				40,249.	22,413.		2,683.	25,096.
204	SECURE RETAIL POS SYSTEMS	06/05/23	SL	5.00		16	1,587.				1,587.	185.		317.	502.
205	(D)185 SHOPPING CARTS	07/03/23	SL	5.00		16	7,135.				7,135.	714.		1,427.	2,141.
206	PROPER ELECTRIC - REPLACE BALLAST & LIGHTS	08/04/23	SL	5.00		16	5,675.				5,675.	473.		1,135.	1,608.
207	REPLACE PAGE/MUSIC AMP	03/18/24	SL	5.00		16	1,200.				1,200.			200.	200.
208	MICROSOFT SUFACE PRO 9 TABLET 13"" CORE 15 12TH GEN	03/04/24	SL	5.00		16	1,400.				1,400.			233.	233.
284	KONICA LASER PRINTER/FAX	10/21/09	SL	7.00		16	7,320.				7,320.	7,320.		0.	7,320.

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285	KONICA COPIER	03/15/11	SL	7.00		16	5,517.				5,517.	5,517.		0.	5,517.
286	OFFICE FURNITURE	02/10/09	SL	7.00		16	6,048.				6,048.	6,048.		0.	6,048.
287	VIDEO CONFERENCING KIT	08/04/10	SL	5.00		16	1,866.				1,866.	1,866.		0.	1,866.
288	OFFICE FURNITURE	08/26/10	SL	7.00		16	2,707.				2,707.	2,707.		0.	2,707.
289	OFFICE FURNITURE	02/01/12	SL	7.00		16	2,047.				2,047.	2,047.		0.	2,047.
290	FURNITURE	06/05/12	SL	7.00		16	1,916.				1,916.	1,916.		0.	1,916.
291	FURNITURE	06/27/12	SL	7.00		16	3,082.				3,082.	3,082.		0.	3,082.
292	(D)SCANNERS FOR ALL OFFICES	04/16/13	SL	5.00		16	5,155.				5,155.	5,155.		0.	5,155.
293	(D)SECURITY MONITORING EQUIPMENT	11/01/13	SL	5.00		16	2,028.				2,028.	2,028.		0.	2,028.
294	PANASONIC TELEPHONE SYSTEM -GG	10/13/14	SL	5.00		16	6,799.				6,799.	6,799.		0.	6,799.
295	PANASONIC TELEPHONE SYSTEM -GG	10/14/14	SL	5.00		16	4,783.				4,783.	4,783.		0.	4,783.
296	FIRE ALARM & MONITORING SERVICE -GG	10/14/14	SL	7.00		16	4,187.				4,187.	4,187.		0.	4,187.
297	OFFICE FURNITURE	01/15/15	SL	7.00		16	5,513.				5,513.	5,513.		0.	5,513.
298	OFFICE FURNITURE	04/15/15	SL	7.00		16	7,511.				7,511.	7,511.		0.	7,511.
299	OFFICE FURNITURE	05/15/15	SL	7.00		16	1,994.				1,994.	1,994.		0.	1,994.
300	OFFICE FURNITURE	10/01/15	SL	7.00		16	5,335.				5,335.	5,335.		0.	5,335.
301	BROADWAY ALARM	01/01/14	SL	5.00		16	5,575.				5,575.	5,575.		0.	5,575.
302	LB POS - FOUNDATION PAID FOR (2016 AUDIT AJE 04)	12/31/16	SL	5.00		16	10,645.				10,645.	10,645.		0.	10,645.

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303	DELL SERVER AND EQUIPMENT	12/30/22	SL	7.00		16	12,860.				12,860.	1,837.		1,837.	3,674.
304	1 DELL ATTITUDE NOTEBOOKS	01/17/23	SL	5.00		16	2,158.				2,158.	432.		432.	864.
305	1 DELL ATTITUDE NOTEBOOKS	01/17/23	SL	5.00		16	2,158.				2,158.	432.		432.	864.
306	VIDEO CONFERENCING EQUIPMENT	04/28/23	SL	5.00		16	5,502.				5,502.	734.		1,100.	1,834.
307	WIRED UP HOME SOLUTIONS	06/29/23	SL	5.00		16	12,054.				12,054.	1,205.		2,411.	3,616.
308	SIERRA PACIFIC GAS STORAGE	05/28/24	SL	5.00		16	16,936.				16,936.			1,976.	1,976.
320	7 POS SYSTEMS	02/01/24	SL	5.00		16	57,565.				57,565.			4,797.	4,797.
321	FIREWALL	02/20/24	SL	5.00		16	1,989.				1,989.			166.	166.
322	GONDOLA AND STORE FIXTURE	04/16/24	SL	5.00		16	25,909.				25,909.			2,159.	2,159.
323	ACME DISPAY FIXTURE	04/30/24	SL	5.00		16	6,477.				6,477.			540.	540.
324	ULINE PALLET TRUCK	05/02/24	SL	5.00		16	2,935.				2,935.			245.	245.
325	ULINE UTILITY CART	05/02/24	SL	5.00		16	1,160.				1,160.			97.	97.
326	CENTRAL VALLEY NETWORKS COMPUTERS	05/07/24	SL	5.00		16	1,523.				1,523.			127.	127.
327	ULINE 2 BASKET CONVENIENT CART	05/07/24	SL	5.00		16	6,150.				6,150.			513.	513.
328	WIRED UP - WALL MOUNT STORAGE	06/19/24	SL	5.00		16	25,674.				25,674.			2,140.	2,140.
329	WIRED UP - CABLE RUN FOR INTERNET	06/19/24	SL	5.00		16	8,250.				8,250.			688.	688.
330	WIRED UP - CABLE RUN FOR INTERNET	07/09/24	SL	5.00		16	3,593.				3,593.			299.	299.
331	EVERON - NEW ALARM SYSTEM	08/13/24	SL	5.00		16	4,777.				4,777.			398.	398.

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336	2024 AUDIT ADJUSTMENT	12/31/24		.000	HY	16	18,018.				18,018.	1,144.		17,118.	18,262.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES						888,593.				888,593.	546,956.		65,909.	612,865.
	TRANSPORTATION EQUIPMENT														
39	2009 - TOYOTA - 4T4BE46K39R077432	10/31/24	SL	5.00		16	16,398.				16,398.	16,395.		0.	16,395.
101	TRUCK WRAPS	09/01/12	SL	5.00		16	17,815.				17,815.	17,815.		0.	17,815.
102	REGISTRATION + TRACKING DEVICES + TRUCK WRAPS	06/01/14	SL	5.00		16	2,838.				2,838.	2,838.		0.	2,838.
103	2012 - ISUZU - 54DC4W1C1CS805569	06/14/14	SL	5.00		16	42,735.				42,735.	42,735.		0.	42,735.
105	2012 - ISUZU - 54DC4W1B1CS805367	06/01/14	SL	5.00		16	42,735.				42,735.	42,735.		0.	42,735.
106	2017 - CHEVY - 54DCDQ1BXHS803186	04/13/18	SL	5.00		16	57,314.				57,314.	57,314.		0.	57,314.
108	2004 - GMC - 1GKFG15T541196925	01/01/14	SL	5.00		16	10,960.				10,960.	10,960.		0.	10,960.
110	16' BOBTAIL SET AND INSTALLATION CHARGE	05/14/18	SL	5.00		16	2,591.				2,591.	2,590.		0.	2,590.
116	2022 - RAM - 3C7WRNDL8NG329214	07/01/23	SL	5.00		16	78,195.				78,195.	7,819.		15,639.	23,458.
209	TRUCK WRAPS	09/01/12	SL	5.00		16	17,815.				17,815.	17,815.		0.	17,815.
210	TRUCK WRAP - ADJUSTMENT	10/20/11	SL	5.00		16	17,047.				17,047.	17,047.		0.	17,047.
211	16' BOBTAIL SET AND INSTALLATION CHARGE	05/21/18	SL	5.00		16	4,154.				4,154.	4,153.		0.	4,153.
212	2017 - CHEVY - 54DCDW1B3HS803188	04/13/18	SL	5.00		16	57,709.				57,709.	57,709.		0.	57,709.
213	2012 - ISUZU - 54DC4W1B7CS805471	06/01/14	SL	5.00		16	42,735.				42,735.	42,735.		0.	42,735.
214	2023 CHEVY TRAVERSE - 1GNERMKW5PJ197912	05/05/23	SL	5.00		16	41,801.				41,801.	5,573.		8,360.	13,933.

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219	2013 - ISUZU - JALE5W166D7301686	06/01/14	SL	5.00		16	15,753.				15,753.	15,753.		0.	15,753.
220	(D)REGISTRATION OF TRUCKS	06/01/14	SL	5.00		16	3,030.				3,030.	3,030.		0.	3,030.
221	AVION GRAPHIC TRUCK WRAP	06/01/14	SL	5.00		16	8,069.				8,069.	8,069.		0.	8,069.
222	2015 - ISUZU - JALE5W169F7302303	03/18/15	SL	5.00		16	47,677.				47,677.	47,677.		0.	47,677.
223	AVION GRAPHIC TRUCK WRAP	05/15/15	SL	5.00		16	3,295.				3,295.	3,295.		0.	3,295.
224	(D)DRACO TRUCKS - REAR WALL & DOOR HEADER	06/30/15	SL	5.00		16	1,291.				1,291.	1,291.		0.	1,291.
225	IZUZU CARGO HANDLING LIFT PLATFORM	07/30/15	SL	5.00		16	6,817.				6,817.	6,817.		0.	6,817.
226	2012 - ISUZU - 54DC4W1C2CS805564	06/01/14	SL	5.00		16	42,735.				42,735.	42,735.		0.	42,735.
227	2017 - CHEVY - 54DCDW1B1JS808895	12/17/18	SL	5.00		16	40,756.				40,756.	17,344.		8,151.	25,495.
228	2017 - CHEVY - 54DCDW1BXJS808894	12/17/18	SL	5.00		16	40,756.				40,756.	17,344.		8,151.	25,495.
229	WRAP FOR TRUCK #22NJ3J	02/28/19	SL	5.00		16	2,591.				2,591.	2,418.		173.	2,591.
230	WRAP FOR TRUCK #22NJ3F	02/28/19	SL	5.00		16	2,591.				2,591.	2,418.		173.	2,591.
231	2012 - ISUZU - 54DC4W1B0CS805473	01/01/15	SL	5.00		16	5,960.				5,960.	5,960.		0.	5,960.
238	2023-GMC-7GZ37TC76PN007022	07/31/23	SL	5.00		16	49,462.				49,462.	4,946.		9,892.	14,838.
309	2018 - CHEVY - 1G1ZC5ST7KF198717	05/01/19	SL	5.00		16	23,465.				23,465.	10,041.		1,956.	11,997.
311	AVION GRAPHIC TRUCK WRAP	05/15/15	SL	5.00		16	3,295.				3,295.	3,295.		0.	3,295.
312	2015 - ISUZU - JALE5W164F7300734	03/15/15	SL	5.00		16	66,816.				66,816.	66,816.		0.	66,816.
332	2024 FORD TRANSIT-350 CARGO - 1FTBW3X86RKA48768	06/01/24	SL	5.00		16	83,102.				83,102.			6,925.	6,925.

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335	(D)2009 - TOYOTA - 4T4BE46K39R077432	10/15/11	SL	5.00		16	16,395.				16,395.	16,395.		0.	16,395.
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT						916,698.				916,698.	621,877.		59,420.	681,297.
	LAND														
1	SUTHERLAND/SAN DIEGO -LAND	06/29/90	L				809,556.				809,556.			0.	
40	SHIELDS/FRESNO - LAND	04/12/01	L	.000			223,860.				223,860.			0.	
117	HILLTOP - LAND	02/14/86	L				421,025.				421,025.			0.	
160	SOUTH STREET LAND	12/31/05	L				503,000.				503,000.			0.	
239	7215 LINDALE-LAND	01/01/96	L				60,000.				60,000.			0.	
240	812 K ST. SANGER - POST 98 - LAND	11/01/98	L				10,000.				10,000.			0.	
241	12345 EUCLID, GARDEN GROVE-LAND	01/15/15	L				310,000.				310,000.			0.	
242	BROADWAY LAND	07/08/83	L				92,161.				92,161.			0.	
	* 990 PAGE 10 TOTAL LAND						2,429,602.				2,429,602.	0.		0.	0.
	OTHER														
8	200-AMP BUS BAR & 26 CIRCUIT BRE;	03/26/03	SL	15.00		16	1,721.				1,721.	1,721.		0.	1,721.
9	ORNAMENTAL IRON FENCE	11/18/03	SL	15.00		16	5,464.				5,464.	5,464.		0.	5,464.
10	HOLLOW METAL FRONT ENTRY DOORS	02/19/04	SL	15.00		16	2,230.				2,230.	2,230.		0.	2,230.
11	16' X 8' SINGLE GATE W/ BARBED WIRE	05/19/05	SL	15.00		16	2,375.				2,375.	2,375.		0.	2,375.
12	SAN DIEGO-ENERGY EFFICIENT RE-LAN	05/18/05	SL	15.00		16	36,629.				36,629.	36,629.		0.	36,629.

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13	SUTHERLAND ROOF	09/30/08	SL	15.00		16	21,440.				21,440.	21,440.		0.	21,440.
14	ROOF REPAIR	12/31/11	SL	15.00		16	16,182.				16,182.	12,946.		1,079.	14,025.
15	ROOF REPAIR	01/01/12	SL	15.00		16	16,183.				16,183.	12,947.		1,079.	14,026.
16	REMODEL OF SAN DIEGO STORE - BOLANOS	08/15/12	SL	15.00		16	65,129.				65,129.	49,932.		4,342.	54,274.
17	RACKS FOR CHULA VISTA WAREHOUSE	04/18/14	SL	5.00		16	2,807.				2,807.	2,807.		0.	2,807.
18	3 NEW SKYLIGHTS	01/29/18	SL	15.00		16	3,280.				3,280.	1,075.		219.	1,294.
19	1/2 DOWN PAYMENT FOR ROOF COATING	02/24/21	SL	15.00		16	4,936.				4,936.	960.		329.	1,289.
20	2ND PAYMENT FOR ROOF COATING	03/31/21	SL	15.00		16	5,111.				5,111.	966.		341.	1,307.
21	ROOF REPAIR	01/29/18	SL	15.00		16	1,860.				1,860.	552.		124.	676.
57	REMODEL OF FRESNO STORE	09/13/12	SL	15.00		16	87,337.				87,337.	66,473.		5,822.	72,295.
58	NEW TRANSFORMER	11/30/12	SL	15.00		16	8,500.				8,500.	6,281.		567.	6,848.
59	(D)LEASE FOR AC UNIT	03/30/20	SL	7.00		16	4,173.				4,173.	2,235.		596.	2,831.
60	STORAGE CONTAINER	08/05/20	SL	15.00		16	2,789.				2,789.	1,361.		398.	1,759.
61	REPLACE AC UNIT	11/30/20	SL	15.00		16	11,800.				11,800.	5,198.		1,686.	6,884.
62	NEW FLOOR UPSTAIRS	12/30/21	SL	15.00		16	5,832.				5,832.	778.		389.	1,167.
63	ROOF REPAIR	04/24/17	SL	15.00		16	3,975.				3,975.	1,767.		265.	2,032.
64	REPAIRING OF POPOUT WALL	02/08/22	SL	15.00		16	3,905.				3,905.	1,069.		558.	1,627.
65	VORTEX ROLLING STEEL DOOR REPLACEMENT	02/13/24	SL	15.00		16	6,884.				6,884.			901.	901.

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66	FRONT DOOR REPAIR	04/17/24	SL	15.00		16	1,588.				1,588.			170.	170.
67	VORTEX DOORS	07/31/24	SL	15.00		16	3,107.				3,107.			185.	185.
68	JANUS ROLL UP DOOR AND MOTOR	11/04/24	SL	15.00		16	4,200.				4,200.			100.	100.
130	NEW FENCE BETWEEN CHURCH & STOR	06/20/05	SL	15.00		16	2,950.				2,950.	2,950.		0.	2,950.
131	SCALCOAT & STRIPE PARKING LOT	11/18/05	SL	15.00		16	5,763.				5,763.	5,763.		0.	5,763.
132	PARKING LOT IMPROVEMENTS	03/15/10	SL	15.00		16	13,058.				13,058.	12,043.		871.	12,914.
133	LOT GRADING	06/10/10	SL	15.00		16	1,500.				1,500.	1,358.		100.	1,458.
134	ROOF REPAIR	04/15/12	SL	15.00		16	43,620.				43,620.	34,169.		2,908.	37,077.
135	ELECTRICAL PANELS & BREAKERS	05/09/12	SL	15.00		16	18,609.				18,609.	14,474.		1,241.	15,715.
136	REMODEL OF HILLTOP STORE - BOLANOS	07/26/12	SL	15.00		16	45,061.				45,061.	34,547.		3,004.	37,551.
137	LANDSCAPING	04/29/13	SL	15.00		16	6,100.				6,100.	4,203.		407.	4,610.
138	RACKS FROM CHULA VISTA WAREHOUSE	04/18/14	SL	15.00		16	2,807.				2,807.	2,807.		0.	2,807.
139	TESTING FOR ROOF MOLD	04/10/20	SL	15.00		16	54,342.				54,342.	28,465.		7,763.	36,228.
140	REPLACEMENT OF 1 2.5 TON BRYANT UNIT	11/18/21	SL	15.00		16	10,210.				10,210.	1,475.		681.	2,156.
141	REPLACEMENT OF 3 4 TON BRYANT UNITS	11/18/21	SL	15.00		16	28,640.				28,640.	4,137.		1,909.	6,046.
142	NEW ROOF	11/20/20	SL	15.00		16	105,512.				105,512.	52,861.		15,073.	67,934.
144	ZED ELECTRIC - OUTLETS AND MOUNTING BOX	01/24/23	SL	15.00		16	6,330.				6,330.	422.		422.	844.
145	NEW LIGHT FIXTURES	02/27/24	SL	15.00		16	7,410.				7,410.			412.	412.

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164	ROOF REPAIR	01/24/12	SL	15.00		16	13,515.				13,515.	10,737.		901.	11,638.
165	ELECTRICAL CIRCUITS AND CEILING FANS	07/10/12	SL	15.00		16	4,650.				4,650.	3,565.		310.	3,875.
166	SUBPANEL & WIRING RE-WORK	07/26/12	SL	15.00		16	3,250.				3,250.	2,492.		217.	2,709.
167	PRESTIGE STRIPING: PARKING LOT REPAIR	08/30/12	SL	15.00		16	15,750.				15,750.	9,188.		1,050.	10,238.
168	DEPOSIT FOR AC PUMP UNITS	08/01/16	SL	15.00		16	4,100.				4,100.	2,027.		273.	2,300.
169	DEPOSIT FOR AC PUMP UNITS	09/14/16	SL	15.00		16	4,100.				4,100.	1,993.		273.	2,266.
170	DEPOSIT FOR AC PUMP UNITS	10/01/16	SL	15.00		16	4,100.				4,100.	1,981.		273.	2,254.
171	DEPOSIT FOR AC PUMP UNITS	10/12/16	SL	15.00		16	4,100.				4,100.	1,981.		273.	2,254.
172	DIAL ONE SONSHINE - 2 ROOF UNITS	09/07/19	SL	15.00		16	18,730.				18,730.	6,244.		1,249.	7,493.
173	ROOF REPAIR	06/01/20	SL	15.00		16	34,254.				34,254.	8,183.		2,284.	10,467.
174	DOWN PAYMENT FOR LB FENCE (EAST)	10/18/21	SL	15.00		16	8,224.				8,224.	1,233.		548.	1,781.
175	AC ALL STAR - CARRIER 5 TON ROOFTOP AC UNIT	08/31/17	SL	15.00		16	7,432.				7,432.	3,138.		495.	3,633.
177	ROOF REPLACMENT 50% DEPOSIT	07/27/23	SL	15.00		16	67,310.				67,310.	1,870.		4,487.	6,357.
178	NICE & CLEAN PAINTNG - INDOOR AND OUTDOOR PAINTING	07/27/23	SL	15.00		16	4,000.				4,000.	111.		267.	378.
179	ED'S FENCING - WROUGH IRON FENCE	08/15/23	SL	15.00		16	8,850.				8,850.	246.		590.	836.
180	CLOUD COMFORT - HEATING PACKAGE	08/18/23	SL	15.00		16	28,240.				28,240.	784.		1,883.	2,667.
181	ED'S FENCING - WROUGH IRON FENCE	08/24/23	SL	15.00		16	8,920.				8,920.	248.		595.	843.
182	J&J ROOFING - ROOF REPLACEMENT	09/18/23	SL	15.00		16	76,960.				76,960.	1,710.		5,131.	6,841.

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183	ELEVEN WESTERN BUILDERS PARKING REPAIR	06/26/24	SL	15.00		16	144,617.				144,617.			4,821.	4,821.
184	AVION GRAPHICS	12/18/24	SL	5.00		16	3,852.				3,852.			0.	
185	ELEVEN WESTERN - EXTERIOR PAINT	12/23/24	SL	5.00		16	5,854.				5,854.			0.	
259	IMPROVEMENTS - GARDEN GROVE	12/14/14	SL	15.00		16	42,515.				42,515.	25,509.		2,834.	28,343.
260	ALVAREZ DESIGN - GARDEN GROVE	12/14/14	SL	15.00		16	10,946.				10,946.	6,568.		730.	7,298.
261	BOLANOS ELEVATOR - GARDEN GROVE	12/14/14	SL	15.00		16	625,000.				625,000.	375,000.		41,667.	416,667.
262	CRI - ELECTRIC WORK - GARDEN GROVE	12/14/14	SL	15.00		16	64,126.				64,126.	38,476.		4,275.	42,751.
263	ARCHITECTUAL CHANGES	01/15/15	SL	15.00		16	21,870.				21,870.	13,122.		1,458.	14,580.
264	10,000 SQFT CARPET & 2383 SQF TTILES	01/15/15	SL	15.00		16	21,000.				21,000.	12,600.		1,400.	14,000.
265	30 CHANNEL LITTERS INTERNALLY ILUMATED SIGN	01/15/15	SL	15.00		16	6,800.				6,800.	4,080.		453.	4,533.
266	30 FLAG POLE	01/15/15	SL	15.00		16	7,825.				7,825.	4,695.		522.	5,217.
267	STRIP PARKING LOT SPACES, PAINT POLES	01/15/15	SL	15.00		16	2,300.				2,300.	1,380.		153.	1,533.
268	REWORK CURB FOR H/C SPACES, ADA SPACES	01/15/15	SL	15.00		16	9,350.				9,350.	5,610.		623.	6,233.
269	REPLACE 7PCS GLASS	01/15/15	SL	15.00		16	6,800.				6,800.	4,080.		453.	4,533.
270	REPIAR IRRIGATION SYSTEM, EXCAVATE, INSTALL GRASS	01/15/15	SL	15.00		16	8,350.				8,350.	5,010.		557.	5,567.
271	FIRE SMOKE DETECTORS FOR ELEVATOR	01/15/15	SL	15.00		16	3,500.				3,500.	2,100.		233.	2,333.
272	TELEPHONE LINE ENGERING BY AT & T	01/15/15	SL	15.00		16	7,069.				7,069.	4,241.		471.	4,712.
273	ALVAREZ DESIGN - GARDEN GROVE 13-033-5 9.18.14	01/15/15	SL	15.00		16	3,550.				3,550.	2,130.		237.	2,367.

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274	CHAPIN HCJ INSTALL	01/15/15	SL	15.00		16	2,615.				2,615.	1,569.		174.	1,743.
275	CRI - ELECTRIC WORK - GARDEN GROVE	01/15/15	SL	15.00		16	14,678.				14,678.	8,807.		979.	9,786.
276	PROTECTION ONE	01/15/15	SL	15.00		16	1,406.				1,406.	844.		94.	938.
277	WESTSIDE WEB & WIRE	01/15/15	SL	15.00		16	1,694.				1,694.	1,016.		113.	1,129.
278	WESTSIDE WEB & WIRE	02/15/15	SL	15.00		16	1,879.				1,879.	1,117.		125.	1,242.
279	MIDWAY LOCKSMITH	02/15/15	SL	15.00		16	4,211.				4,211.	2,503.		281.	2,784.
280	CRI	04/15/15	SL	15.00		16	3,250.				3,250.	1,713.		192.	1,905.
281	(D)3 DAY BLINDS	05/15/15	SL	15.00		16	5,903.				5,903.	3,672.		394.	4,066.
282	ARTIFICIAL GRASS INSTALLMENT AT GG	12/07/22	SL	15.00		16	5,700.				5,700.	412.		380.	792.
313	DEPOSIT FOR OCEANSIDE STORE SIGN	03/20/24	SL	15.00		16	7,588.				7,588.			211.	211.
314	INSTALL LED PYLON SIGN	04/30/24	SL	15.00		16	2,652.				2,652.			74.	74.
315	INSTALL INTERNALLY ILLUMINATED CHANNELL LETTERS	04/30/24	SL	15.00		16	8,461.				8,461.			235.	235.
316	GRAPHICS FOR OCEANSIDE NEW WINDOW	04/30/24	SL	15.00		16	1,417.				1,417.			39.	39.
317	OCEANSIDE BUILDING REMODEL	04/30/24	SL	15.00		16	281,341.				281,341.			7,815.	7,815.
318	AVION TRANSPORTATION GRAPHICS - LOGOS	06/30/24	SL	15.00		16	3,585.				3,585.			100.	100.
319	ELEVEN WESTERN BUILD - REMODEL	07/31/24	SL	15.00		16	28,786.				28,786.			800.	800.
334	(D)2021 AUDIT ADJUSTMENT	12/31/21	SL	.000		16						1,026.		0.	1,026.
	* 990 PAGE 10 TOTAL OTHER						2,368,324.				2,368,324.	1,021,891.		147,933.	1,169,824.

428111 04-01-24

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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