(33.55)

Return of Organization Exempt From Income Tax

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

2018

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

A	For the 2	2018 calen	dar year, or tax year beginn	ning	, 2018, and ending	9		,
В	Check if app	plicable	C				yer iden	tification number
	X Addres	s change	CUSTOM AUTOMOTIVE	E NETWORK, INC.		52-	1086	811
		change	PO BOX 3247			E Teleph		
	Initial	-	POST FALLS, ID 83	3877-3247		176	(n) a	346-5647
	H	urn/terminated					,0, 5	710 3017
	H-1	led return				G Gross	racainte	\$ 507,749.
	\vdash		F Name and address of principal	officer	i.	H(a) Is this a group retu		
	Аррііса	ation pending		omeer	_ 1	• • •		□ '** □ '**
_	Tay ayan	ant status	SAME AS C ABOVE 501(c)(3) X 501(c) (6) (insert no) 4	947(a)(1) or 1 [527]	H(b) Are all subordinate If "No," attach a lis	t (see ir	nstructions)
<u>,⊹</u>		npt status	_ 		17/			
<u>, 1</u>	Websit		ACIE@CUSTOMA TOMO	· · · · · · · · · · · · · · · · · · ·		H(c) Group exemption r		
K		organization		Association Other	L Year of formation	n 1977 M	State of	legal domicile CA
Pa	arti S	Summar	y be the organization's mission	on or most significant activ	tioe CITETOM ATIT	OMOTTUE NET	ינור חוזי	V'C MICCION IC
			T THE SPECIALTY A					
Governance	1 = 1		THE PROFITABLE DI					
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Ver	2 Ch	eck this bo		discontinued its operation			net as	ssets
පි	3 Nu		ting members of the govern				3	8
~ಶ			dependent voting members				4	8
Activities &			of individuals employed in		V, line 2a)		5	4
Ę	I .		of volunteers (estimate if n				6	0
¥			ed business revenue from P		2		7a	18,785.
	b Net	t unrelated	business taxable income fi	rom Form 990-1, line 38		1 5. 7	7b	-3,913.
		.4.6.4	and a courts (Dant VIII) loss 1	165	11.9	Prior Year		Current Year
æ	1		and grants (Part VIII, line 1 ice revenue (Part VIII, line 1	/ 1 1/2)	496,	214	161 105
Revenue			come (Part VIII, column (A)		11, 7	106,		464,495. 24,469.
æ			e (Part VIII, column (A), line		11e)	14,		18,785.
			- add lines 8 through 11 (616,		507,749.
			milar amounts paid (Part IX		(),		000.	.4,870.
	1		to or for members (Part IX					.170.01
	1	-	r compensation, employee		(A), lines 5-10)	363,	233.	370,955.
ses	l		fundraising fees (Part IX, co		,	3,507		0,0,000.
Expenses			ing expenses (Part IX, colu					
Ä	i					257	205	260 515
	1		es (Part IX, column (A), line		.m. 25)	357,0		268,515.
	I		es Add lines 13-17 (must e		me 25)	727,2		644,340.
		venue less	expenses Subtract line 18	s from line 12		-110,		-136,591.
9 or	00 T-4		Dort V. Jone 16)			Beginning of Curre		End of Year
Assets Balanc	1		Part X, line 16) s (Part X, line 26)			953,2		811,119.
et A			• •			41,		102,570.
Z.2			fund balances Subtract lin	ie 21 from line 20		911,	553.	708,549.
_		Signatur						
Und	er penalties o plete Declari	of perjury, I de ation of prepa	clare that I have examined this returi rer (other than officer) is based on al	n, including accompanying schedule It information of which preparer has	es and statements, and to the any knowledge	e best of my knowledge	and bel	ief, it is true, correct, and
-	•							
Sign		Signatu	e of officer			Date		
:510 :He	gn ro					DDECTDENT		
7	16		Print name and title			PRESIDENT		
WNIID.		ļ., ,·	·	Preparer's signature	Date	Check	ıf	PTIN
Ď]	Troperer or granter o		۱ ۱		
Pa	ıa		PHER A. MAYHEW	HCH C COMPANY D	λ	self-employ	eu	P01049711
Ereparer Firm's name MAGNUSON, MCHUGH & COMPANY, P.A. Firm's address 100 NORTHWEST BLVD. SUITE 400 Firm's EIN ► 82-0331228							_0221220	
							-0331228	
	u the IDC	discuss 45	COEUR D'ALENE is return with the preparer s		tions)	Phone no	208	-765-9500
						01011 00/00/00		X Yes No Form 990 (2018)
9	A FORPA	perwork R	eduction Act Notice, see th	ie separate instructions.	IEEA	0101L 08/20/18		FUIII 990 (2018)

	<u></u>	32-10	000.			aye z
Par	rt III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III					X
	Briefly describe the organization's mission					<u> </u>
'	•					
	SEE_SCHEDULE O					
	Did the organization undertake any significant program services during the year which were not listed on the prior					
2	Form 990 or 990-EZ?		\Box	Vaa	w	Ma
	If "Yes," describe these new services on Schedule O			Yes	X	No
9		2002		Vaa	₩.	Na
3		.62,	Ш	Yes	V	No
4	If "Yes," describe these changes on Schedule O			. ما اما		
4	Describe the organization's program service accomplishments for each of its three largest program services Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to and revenue, if any, for each program service reported	o others,	, the f	otal e	xpens	ses,
4 a	a (Code) (Expenses \$ including grants of \$) (Reve	enue \$)
	CAN CONFERENCE PRESENTED ANNUALLY IN SEPTEMBER COORDINATE PRIVATE	BUSIN	VESS	ME	ETIN	GS
	AND PROVIDE NETWORKING OPPORTUNITIES WITH MEMBER MANUFACTURERS, RES	SELLER	RS,	REPS	S AN	D
	SERVICE PROVIDERS.					
4 b	(Code) (Expenses \$ including grants of \$) (Reve	enue \$				
4 b	`` <u> </u>	٠.		ITH	THE)
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1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	Х	
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? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
1	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	*h. 5	ر کارد	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	x	
Ь	Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
c	Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII	11 c		Х
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° If 'Yes,' complete Schedule D, Part IX	11 d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	х	
2 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
4 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	-	Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		_x

	•						
			AUTOMOTIVE		INC.	 52~1086811	Page 4
[Part IV Chec	cklist of Re	quired Sched	ules (conti	nued)		

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		х
t	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		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			, ,
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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_
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
Ь	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		
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_
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		V !	
1 ~	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2		Yes	No_
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 8 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b.		~	, ,
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	x	*
BAA	TEEA0104L 08/03/18	Form	990 (2018)

Form 990 (2018) CUSTOM AUTOMOTIVE NETWORK, INC.

[Part Vii Statements Regarding Other IRS Filings and Tax Compliance (continued)—

•			Yes	No
2 a 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	2 a	4	1 2 2	1,4(8)
b If at least one is reported on line 2a, did the organization file all required federal employmen	<u> </u>	2 b	X	3.47
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in		. 147		1737
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year		3 a		l¦a⊁≀.
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial.)	er authority over, a inancial account)?	4 a		Х
b If 'Yes,' enter the name of the foreign country ►		7 × 1	1	3
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial		19.30	1.3	The second
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	•	5 a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf	er transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?	ons or gifts were	6 b		
7 Organizations that may receive deductible contributions under section 170(c).		₹\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1 X	7.0
a Did the organization receive a payment in excess of \$75 made partly as a contribution and p	artly for goods and	13.2	1	
services provided to the payor?	, ,	7 a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v Form 8282?	as required to file	7 c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	1, 10	2	11
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit contract?	7 e	Servi and	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben	efit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file F as required?	form 8899	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C ²	_	7 h		_
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained organization have excess business holdings at any time during the year?	by the sponsoring	8	25256	ર્ક્ક રહે -
9 Sponsoring organizations maintaining donor advised funds.		125		* 20 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
a Did the sponsoring organization make any taxable distributions under section 4966?		9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related per-	son?	9 b		
10 Section 501(c)(7) organizations. Enter		13.5%	3,25	J. 25
a Initiation fees and capital contributions included on Part VIII, line 12	10 a	W- WAL-	\$ 2.7. J	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		75	(1 to 1) 1, 4 (2)
11 Section 501(c)(12) organizations. Enter ,	1	8/4	200	
a Gross income from members or shareholders	11 a		45	, , , , , , , , , , , , , , , , , , ,
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	116	3.2		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu or		12a	222	('P)
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	12.0	3.,/	, () -
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	12.0		- 13 - 13 - 13 - 13 - 13 - 13 - 13 - 13	
a is the organization licensed to issue qualified health plans in more than one state?		13a	JFIL (01)	UZE
Note. See the instructions for additional information the organization must report on Schedule	e O	43%	3/55	. 33
b Enter the amount of reserves the organization is required to maintain by the states in		1,7,73		33.7
which the organization is licensed to issue qualified health plans	13b	7.3		
c Enter the amount of reserves on hand	13c		: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	BY A
14a Did the organization receive any payments for indoor tanning services during the tax year?		14 a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	Schedule Q	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in	remuneration or	1,5		v
excess parachute payment(s) during the year?		15		X
If 'Yes,' see instructions and file Form 4720, Schedule N	<u>-</u>	1	33	
16 Is the organization an educational institution subject to the section 4968 excise tax on net inv	estment income?	16	1. O.C. W	X
If 'Yes,' complete Form 4720, Schedule O		Form	900	3018;
BAA TEEA0105L 12/31/18		rorm	990 (∠∪ (ŏ)

Form 990 (2018) CUSTOM AUTOMOTIVE NETWORK, INC. 52-1086811 Page 6 Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 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 in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 8 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 5 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? SEE SCHEDULE O X 6 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? SEE SCHEDULE O Х 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8ь 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 in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes.' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts' Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in SEE ŚCHEDULE O Schedule O how this was done Х 12c13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 Х 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 SEE SCHEDULE O 15 a Х b Other officers or key employees of the organization X 15h If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16 a 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? 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA 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 in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year SEE SCHEDULE O 20 State the name, address, and telephone number of the person who possesses the organization's books and records

TRACIE NUNEZ PO BOX 3247

POST FALLS ID 83877-3247 (760) 346-5647

Form 990 (2018)	CHISTOM	AUTOMOTIVE	NETWORK.	TNC

52-1086811

Page 7

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

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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee Position (do not check more (B) (F) (A) than one box, unless person is both an officer and a director/trustee) Name and Title Reportable compensation from related organizations (W-2/1099-MISC) Reportable compensation from Estimated amount of other Average hours compensation from the organization per week the organization (W-2/1099-MISC) Officer Highest compensated employee Former nstitutional Key employee ndividual (list any and related related organizations rganiza tions below I trustee dotted (1) ANDY MCJANNETT 5 0 Х Х CHAIRMAN 0 0. 0. 3 (2) SCOTT WAHLSTROM 0 CHAIRMAN ELECT Х 0 0. 0. (3) JR MOORE 3 0 Х 0 0. PAST CHAIRMAN 0. (4) ROYAL COBURN 2 DIRECTOR 0 Х 0 0 0. (5) BOB BARRA 2 0 X 0 0. DIRECTOR 0. (6) BRETT CORNING 2 0 Х 0 DIRECTOR 0 0. 3 (7) ROGER GOYETTE Χ Х TREASURER 0 0 0 0. (8) JOHN DEBALSO 2 Х 0. DIRECTOR 0 0 0 40 (9) TRACIE NUNEZ PRESIDENT 0 X 216,370 0 0. (10)(11)(12)(13)(14)

(A) Name and title	(B) Average hours per week (list any	(do box office	not o	Pos check ess pe	sition more erson direct	than is bot	one h an	(D) Reportable compensation from the organization (W-2/1099 MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	hours for related organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1099 MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)										
(16)										
(17)										
(18)									··· ·	
(19)										
(20)										
(21)								,		
(22)			1		-					
(23)			\dashv							
(24)										
(25)										
1 b Sub-total	l <u>.</u>	ll		J			>	216,370.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	on A						► [']	0. 216,370.	0.	0.
2 Total number of individuals (including but not limited	to those li	sted a	abov	/e) w	/ho r	ecei	/ed			
from the organization 1							•••	···		Yes No
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru: h ındıvıdu:	stee, <i>al</i>	key	em	ploy	ee,	or h	ighest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportabler than \$1	e cor 50,00	npe)0?	nsa If 'Y	tion 'es, '	and com	othe plet	er compensation f te Schedule J for	rom	4 X
5 Did any person listed on line 1a receive or accrume for services rendered to the organization? If 'Yes	e compen	satioi te Sc	n fro	om a lule :	any <i>J foi</i>	unre r <i>suc</i>	late h pe	d organization or erson	ındıvıdual	5 X
Section B. Independent Contractors										
1 Complete this table for your five highest compen compensation from the organization. Report compen	sated inde sation for t	pend the ca	dent denc	cor dar y	ntrac rear	tors endir	that ng w	t received more that he org	nan \$100,000 of ganization's tax yea	r
(A) Name and business addi	ress							(B) Description o	f services	(C) Compensation
							-			
Total number of independent contractors (including by	out not limit	ted to	tho	se li	sted	abov	/e) v	who received more	than	 \$\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
\$100,000 of compensation from the organization									100	

	. Check if Schedule O contains a response or note to any line in this Part VIII								
大学のないので						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1 a Federated campaigns 1 a					· · · · · · · · · · · · · · · · · · ·	The country of the fact of		The state of the s
Gra		Membership dues		1 b					
S, (Fundraising events	ļ	1 c				Land All Wall Market	
Giff		I Related organizations		1 d				· 一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	
ns.	. 6	Government grants (contributi	ūuš)	1 e				1967 - 1968 - 19	
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, o similar amounts not included	grants, and ahove	1 f					
intr id C	•	Noncash contributions include	d in lines 1a-1	f \$		Salaman San		The rection to the same	是表情 的人
<u>2</u>	t	Total. Add lines 1a-1f					The state of the s	B. W. C. F. S.	が発える。
Program Service Revenue	_				Business Code		BAYS KILLSE	表达到了1000000000000000000000000000000000000	
eve		TRADE ASSOC CONFER			561000	340,254.			
e B		MEMBER DUES & ASSE			561000	119,302.	119,302.		
Σį		MISCELLANEOUS RECE	IPTS		561000	4,939.	4,939.		
Se	C	'					<u> </u>		
ram	e) 							
<u> </u>	ī	All other program serve	ce revenue	؛ ا		464 405	\$255.06.50 Per	5 × × × × × × × × × × × × × × × × × × ×	CS Says of 40 Production as See The
		Total. Add lines 2a-2f				464,495.	(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(· 1000 1000 1000 1000 1000 1000 1000 10	於此, 文字就母 第1月
	3	Investment income (incother similar amounts)	luding divi	dend	s, interest and	24,469.			24,469.
Ì	4	Income from investmen	t of tax-ex	emot	bond proceeds.	24,403.			24,403.
	5	Royalties		, -	▶			-	
- 1	•		(ı) Rea	 al	(ii) Personal	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	14 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	根据的现在分 点	23.500 × 2000.13
	6 a	Gross rents			 				阿蒙尔斯斯
	b	Less, rental expenses			 				
ł	С	: Rental income or (loss)			 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		Net rental income or (lo	ss)		. >	Taudh uwar e war zoe was park is	THE YORK SERVICE STATES THE	ಗಾಗವಾಗ ಸ್ವಾಪ್ಕಾಪ್ -	LET A CORNER SHOW A PARK THE FOR
	7 -	Gross amount from sales of	(ı) Secur	ties	(ii) Other	SOUND PORTS	The same		The Control of the State of the
	, u	assets other than inventory			,	- character and - Miles and -	The state of the s		nich der der Stande der Stellen der Stallen der Stalle
	ь	Less cost or other basis		•			Section of the sectio	A STATE OF THE PARTY OF THE PAR	Marie Carlos
	•	and sales expenses							
	C	: Gain or (loss)							
	d	Net gain or (loss)			<u> </u>				
<u>u</u>	8 a	Gross income from fund	draising ev	ents			學語為為可從		金铁铁头 改物物
Öther Revenue		(not including \$							
e e		of contributions reporte	d on line 1	c)		是设施、经验证	张德国的		
<u>ت</u> ا		See Part IV, line 18		•	a	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
je		Less direct expenses			b[CANO CAMPRODICATION	The state of the s	.૧ <u>૮૦ ફોર્યું મુખ્યાન</u> હતું કો કુઠ	国际中央企业公司
δ	C	: Net income or (loss) fro	m tundrais	sing e	events	<u> </u>			1800 20 20 20
	9 a	Gross income from gam See Part IV, line 19	ning activit		a				
		Less direct expenses			b		经验验的	都是的自然不同意	The Mark State of the State of
	C	: Net income or (loss) fro	m gaming	activ	rities				
}	10 a	Gross sales of inventor	, less retu	ırns					5 XXX 2 82 1925 1
ŀ		and allowances		1	a				3 17 47 50 EVS
		Less cost of goods sule		. 1	p	は私族の教を著っ		The state of the s	\$
[c	Net income or (loss) fro		finve		W - 11 - 2 tz	W 3 7 2 3 3 3 3 5	****	
1		Miscellaneous Revenu	e		Business Code		The world the state of the stat	And	就在第一位,被不同
1		ADVERTISING		~ -	541800	18,785.		18,785.	
	b	'							
	C بہ	All other revenue							
(-	Total. Add lines 11a-11a	4	Ĺ	Da.	10 705	(1) · 袋, 满, k · 5 · 1 · 2 · 4 · 3 · 5 · 5 · 1	100 mm 1 2 50 mm - √ 2 1 1 1	1 1 Gent 162 1
-									122 M (2014)
	14	Total revenue. See inst	IUCHOHS			507,749.	464,495.	18,785.	24,469.

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.								
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. (A) (B) (C) (D) Fundraising expenses expenses								
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,870.	4,870.					
2	Grants and other assistance to domestic individuals. See Part IV, line 22							
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.							
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	216,370.	108,185.	108,185.	0.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.			
7	A	129,746.	92,733.	37,013.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	223/123.	35,793.	3,7013.				
9	Other employee benefits							
10	Payroll taxes	24,839.	14,236.	10,603.				
11	Fees for services (non-employees)	•						
ā	a Management							
ŧ	Legal	1,693.		1,693.				
(Accounting	16,275.		16,275.				
(d Lobbying							
e	Professional fundraising services See Part IV, line 17		14 13 14 14 16 1 16 11 11 11 11 11 11 11 11 11 11 1	N				
	Investment management fees		2-1					
	Other (If line 11g amount exceeds 10% of line 25, column							
	(A) amount, list line 11g expenses on Schedule 0.)		00 100					
12	Advertising and promotion	22,698.	20,428.	2,270.				
13	Office expenses	8,914.	4,457.	4,457.				
14	Information technology	25,654.	20,523.	5,131.				
15	Royalties							
16	Occupancy							
17	Travel .	7,334.	4,400.	2,934.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	107,636.	96,872.	10,764.				
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	579.		579.				
23	Insurance	8,526.		8,526.				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24c. If line 24c amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule (O.)			The state of the s				
ā	BOARD MEETING	27,760.		27,760.				
	SEMA SHOW EXPENSES	18,801.	16,921.	1,880.				
	BANK CHARGES	9,810.	20/222.	9,810.				
	INVESTMENT ADVISOR FEES	8,777.		8,777.				
	e All other expenses	4,058.	1,135.	2,923.				
	Total functional expenses Add lines 1 through 24e	644,340.	384,760.	259,580.	0.			
	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)	044, 540.	304,700.	237,300.	0.			
DAA					Form 990 (2018)			

		Check if Schedule O contains a response or note to	any line in this Part	Χ			
		,			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			12,182.	1	17,411.
	2	Savings and temporary cash investments		,	157,308.	2	88,566.
i	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	officers, directors, mployees Complete			5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions) Complete	s'		6		
ဖွ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges				9	
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 6,	313.			
	b	Less accumulated depreciation		999.		10 c	2,314.
	11	Investments — publicly traded securities.			783,759.	11	702,828.
	12	Investments – other securities See Part IV, line 11			12		
	13	Investments - program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equal line	34)		953,249.	16	811,119.
	17	Accounts payable and accrued expenses			151.	17	
	18	Grants payable				18	
	19	Deferred revenue			41,445.	19	102,570.
	20	Tax-exempt bond liabilities				20	· · · · · · · · · · · · · · · · · · ·
ies	21	Escrow or custodial account liability Complete Part I			Mars Na Services	21	. A) -> ((%) (>)
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, directors, trustees, d disqualified persons	ı		22	
_	23	Secured mortgages and notes payable to unrelated th	urd parties			23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	s to related third parti plete Part X of Schedu	es, ule D		25	
\Box	26	Total liabilities. Add lines 17 through 25			41,596.	26	102,570.
Ses		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	re ► X and comple	ete		1000	708 549
aŭ	27	Unrestricted net assets			911,653.	27	708,549.
3al	28	Temporarily restricted net assets				28	
필	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), chand complete lines 30 through 34.	eck here ►				Sandard Sandar
ts (30	Capital stock or trust principal, or current funds				30	
8	31	Paid-in or capital surplus, or land, building, or equipment				31	
As	32	Retained earnings, endowment, accumulated income,	or other funds			32	
é	33	Total net assets or fund balances			911,653.	33	708,549.
	34	Total liabilities and net assets/fund balances			953,249.	34	811,119.
BA	Ā		TEEA0111L 08/03/18				Form 990 (2018)

Form 990 (2018) CUSTOM AUTOMOTIVE NETWORK, INC. 52-	1086811	Page 12
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	507,749.
2 Total expenses (must equal Part IX, column (A), line 25)	2	644,340.
3 Revenue less expenses Subtract line 2 from line 1	3	-136,591.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	911,653.
5 Net unrealized gains (losses) on investments	5	-66,513.
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	708,549.
Part XII Financial Statements and Reporting		
Check if Schedule O contains a response or note to any line in this Part XII		X
	-	Yes No
1 Accounting method used to prepare the Form 990 Cash Accrual X Other SEE SCH. O If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis	ed on a	
b Were the organization's financial statements audited by an independent accountant?		2 b X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	ate	
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?		2 c X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2 × 1 × 1
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	ıt	
or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 Ь
BAA TEEA0112L 08/03/18		Form 990 (2018)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(6)

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered 'Yes,' on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	oxy Tax) (see separate inst	tructions), then 6) organizations Complete Part III			
				Employer identifica	ation number
vanie	CUSTO	M AUTOMOTIVE NETWORK, INC.		52-108681	
Pa	rt I-A Complete if the	e organization is exempt under sect	ion 501(c) or is a		
	Provide a description of	the organization's direct and indirect political nition of 'political campaign activities')			
2	•	y expenditures (see instructions)		► \$	
		cal campaign activities (see instructions)		*	
		e organization is exempt under secti	on 501(c)(3).		
	•	excise tax incurred by the organization under		▶ \$	
2		excise tax incurred by organization managers		► \$	
3	If the organization incurr	ed a section 4955 tax, did it file Form 4720 fo	r this year?		Yes No
4:	a Was a correction made?	·	•		Yes No
	b If 'Yes,' describe in Part	IV			
		e organization is exempt under secti	on 501(c), excep	t section 501(c)(3).	
		expended by the filing organization for section			
2	Enter the amount of the 527 exempt function activ	filing organization's funds contributed to other vities	organizations for sec	ction • \$	
3	Total exempt function ex line 17b	penditures Add lines 1 and 2 Enter here and	i on Form 1120-POL,	► \$	
4	Did the filing organization	n file Form 1120-POL for this year?			Yes X No
5	organization made paym amount of political contribu	ses and employer identification number (EIN) ents. For each organization listed, enter the a utions received that were promptly and directly detrical action committee (PAC). If additional sp	imount paid from the livered to a separate po	filing organization's fund olitical organization, such	Is Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political confributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)			•		
(2)			· -		
(3)					
(4)					
(5)					

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

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 20	D18 CUSTOM AUTO	MOTIVE NETWORK,	INC.	52-108	36811 Page 2
Rart II-A Complete if section 501	f-the organization	is-exempt under se	ction 501(c)(3) and		
address	s, EIN, expenses, and	s to an affiliated group (and I share of excess lobbying sked box A and 'limited co	g expenditures)	ated group member's nar	me,
(The term	Limits on Lobby	ing Expenditures ns amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
c Total lobbying expendit d Other exempt purpose	tures to influence a le tures (add lines 1a ai expenditures	egislative body (direct lobi nd 1b)			
Fotal exempt purpose of Lobbying nontaxable as both columns.		•	ble ın		
If the amount on line 1e, co Not over \$500,000 Over \$500,000 but not over \$1 Over \$1,000,000 but not over Over \$1,500,000 but not over Over \$17,000,000 g Grassroots nontaxable h Subtract line 1g from lif i Subtract line 1f from lif j If there is an amount othe section 4911 tax for this	amount (enter 25% one 1a If zero or less ne 1c If zero on either Is year?	, enter -0- enter -0- ine 1h or line 1i, did the org LYear Averaging Period I made a section 501(h) el	over \$500,000 over \$1,500,000 over \$1,500,000. ganization file Form 4720 Under Section 501(h) lection do not have to design and section for the section for t	complete all of the five	Yes No
		ow. See the separate inst ring Expenditures During			
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2 a Lobbying nontaxable amount					-
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount			200116m W S 31.4 s	300 No. 10 100 100 100 100 100 100 100 100 100	
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures				Schedula C /Far	m 990 or 990-FZ) 2018
SAA				Screaule C (For	m 330 or 990-6717018

 $\sqrt{S_{ij}}$

1.1 34.

Part II-B (Complete if the organization is exempt under section 501(c)(3) and has NOT-filed Form 5768-(election under section 501(h)). (a) (p) For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity No Amount During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? a Direct contact with legislators, their staffs, government officials, or a legislative body?

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A: Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912

b If 'Yes,' enter the amount of any tax incurred under section 4912

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		Х
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	Х	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)

(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1	Dues, assessments and similar amounts from members.	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	150 m	
ā	Current year	2 a	
ŀ	Carryover from last year	2 b	
(: Total	2 c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0.
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0.

Part IV Supplemental Information

i Other activities?

i Total Add lines 1c through 1i

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

SCHEDULE D (Form 990)

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

2018

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	CUSTOM AUTOMOTIVE NETWORK,	INC.	52-1086811
Pai	tl. Organizations Maintaining Dono	r Advised Funds or Other Similar Fur	
	Complete if the organization ansi	wered '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 dor are the organization's property, subject to the		onor advised funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant func of the donor or donor advisor, or for any other	ds can be used only purpose conferring Yes No
Par	t II Conservation Easements.		
. 41		wered 'Yes' on Form 990, Part IV, line	7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e.g., re	ecreation or education) Preservation o	of a historically important land area
	Protection of natural habitat	Preservation o	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization hast day of the tax year	eld a qualified conservation contribution in the form	n of a conservation easement on the
			Held at the End of the Tax Year
_	Total number of conservation easements		2 a
	Total acreage restricted by conservation easer		2 b
C	: Number of conservation easements on a certif	ied historic structure included in (a)	2 c
	Number of conservation easements included in structure listed in the National Register		2 d
3	Number of conservation easements modified, tran tax year ►	sferred, released, extinguished, or terminated by th	ne organization during the
4	Number of states where property subject to conse	vation easement is located >	_
5	Does the organization have a written policy regard enforcement of the conservation easement		ndling of violations,
6	Staff and volunteer hours devoted to monitoring, ii	nspecting, handling of violations, and enforcing cor	nservation easements during the year
7	Amount of expenses incurred in monitoring, insper ►\$	cting, handling of violations, and enforcing conserv	vation easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements	conservation easements in its revenue and expens o the organization's financial statements that d	se statement, and balance sheet, and escribes the organization's accounting for
Par	t III Organizations Maintaining Collection	ctions of Art, Historical Treasures, or vered 'Yes' on Form 990, Part IV, line	Other Similar Assets. 8.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	ld for public exhibition, education, or research in fu	nue statement and balance sheet works of intherance of public service, provide,
t	olf the organization elected, as permitted under historical treasures, or other similar assets held fo following amounts relating to these items	SFAS 116 (ASC 958), to report in its revenue of public exhibition, education, or research in further	statement and balance sheet works of art, rance of public service, provide the
	(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, h amounts required to be reported under SFAS		cial gain, provide the following
a	Revenue included on Form 990, Part VIII, line		► \$
	Assets included in Form 990, Part X		▶ \$

·Schedule D (Form 990) 2018 CUST				52-108	
Part III Organizations Mainta	ining Collectio	ns of Art, Hist	orical Treasures, c	or Other Similar Ass	ets (continued)
 Using the organization's acquisition items (check all that apply) 	n, accession, and otl	ner records, check a	any of the following that a	are a significant use of its	collection
a Public exhibition		d Loan	or exchange programs	•	
b Scholarly research		e 💹 Other	·		
c Preservation for future gene					
4 Provide a description of the organic Part XIII			-		
5 During the year, did the organization to be sold to raise funds rather t	ation solicit or rece	ve donations of a	rt, historical treasures, organization's collection	or other similar assets	Yes No
Part IV Escrow and Custodia					<u> </u>
line 9, or reported an					550, 1 0 17,
1 a Is the organization an agent, tru on Form 990, Part X?	stee, custodian or	other intermediary	for contributions or other	ner assets not included	☐ Yes ☐ No
b If 'Yes,' explain the arrangement	t in Part XIII and co	mplete the follow	ıng table		
2					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance				1f	
2 a Did the organization include an a	amount on Form 99	0, Part X, line 21,	for escrow or custodia	l account liability?	Yes No
b If 'Yes,' explain the arrangement	in Part XIII Check	here if the explain	nation has been provid	ed on Part XIII	
Part V Endowment Funds. C	omplete if the	organization an	<u>iswered 'Yes' on F</u>	orm 990, Part IV, Iir	ne 10.
	(a) Current year	(b) Prior yea	r (c) Two years bac	k (d) Three years back	(e) Four years back
1 a Beginning of year balance	· · · · · · · · · · · · · · · · · · ·	ļ			
b Contributions		 			
 c Net investment earnings, gains, and losses 					
d Grants or scholarships					
 Other expenditures for facilities and programs 					
f Administrative expenses					
g End of year balance					<u> </u>
2 Provide the estimated percentag	=	ar end balance (lir	ne 1g, column (a)) held	as	
a Board designated or quasi-endowm		 %			
b Permanent endowment	<u> </u>				
c Temporarily restricted endowmer		 %			
The percentages on lines 2a, 2b, a	nd 2c should equal 1	00%			
3 a Are there endowment funds not in to organization by	he possession of the	organization that a	are held and administered	d for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' on line 3a(ii), are the rela	ited organizations l	isted as required (on Schedule R?		3b
4 Describe in Part XIII the intended	d uses of the organ	ization's endowme	ent funds		<u> </u>
Part VI Land, Buildings, and	Equipment.				
Complete if the organi	zation answere	d 'Yes' on Fori	m 990, Part IV, line	e 11a. See Form 99	0, Part X, line 10.
Description of property	(a) Co	est or other basis investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		-,		(1)在我们被放下第一	
b Buildings.					
c Leasehold improvements	<u> </u>				
d Equipment			6,313.	3,999.	2,314.
e Other					
Total. Add lines 1a through 1e (Colum	ın (d) must equal F	orm 990, Part X, o	column (B), line 10c)	>	2,314.
BAA	· · · · · · · · · · · · · · · · · · ·			Schedi	ule D (Form 990) 2018

Rart VII Investments — Other Securities.		N/A
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)		
(l)		
Total (Column (b) must equal Form 990, Part X, column (B) line 12)		是是實施。在學院的不同國際,也是被理解的學院的學院
Part VIII. Investments - Program Related.	'Voc' on Form 990	N/A , 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
	(b) DOOK Value	(c) Method of Valuation Cost of end-of-year market Value
(1)		
(2)		
(4)		
(5)		
(6)		
7)		
(8)		
(9)		
(10)		
Total (Column (b) must equal Form 990, Part X, column (B) line 13)		おかれ、大文を持ち、京、新、、、、、、、、、、、、、、、、、、、、、、、、、、、、、、、、、、
Part IX • Other Assets.	N/A	
		, Part IV, line 11d. See Form 990, Part X, line 15.
(a) Des	cription	(b) Book value
<u>(1)</u> (2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B)) line 15)	
Part X Other Liabilities.	rm 000 Port IV Juno 11	o or 11f Son Form 000 Part V June 25
Complete if the organization answered 'Yes' on Fo (a) Description of liability	(b) Book value	E OF THE SEE FORM 330, PART A, THE 23.
(1) Federal income taxes	(b) Book value	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	<u> </u>	The control of the second of the second of the second of

^{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 FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII SEE PART XIII

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Schedule D (Form 990) 2018 CUSTOM AUTOMOTIVE NETWORK, INC		52-1086811	Page
Part XI Reconciliation of Revenue per Audited Financial Stat		per Return. N/A	
. Complete if the organization answered 'Yes' on Form 9	990, Part IV, line 12a		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		, .,	
a Net unrealized gains (losses) on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
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.	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b	<u> </u>	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 12)	5	
Part XII Reconciliation of Expenses per Audited Financial Sta	tements With Expense	es per Return, N/A	
Complete if the organization answered 'Yes' on Form 9		•	
1 Total expenses and losses per audited financial statements	· · · · · · · · · · · · · · · · · ·	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		25	
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b	10.35	
c Other losses	2 c	18.3	
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d	1 1 <u></u>	2 e	
3 Subtract line 2e from line 1		3	

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

PART X - FIN 48 FOOTNOTE

Part XIII Supplemental Information.

b Other (Describe in Part XIII)

c Add lines 4a and 4b

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.

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

PERFORMANCE WAREHOUSE ASSOCIATION QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE AND, THEREFORE, HAS NO PROVISION FOR FEDERAL INCOME TAXES. IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, PERFORMANCE WAREHOUSE ASSOCIATION IS REQUIRED TO DISCLOSE CERTAIN INFORMATION REGARDING POTENTIAL LIABILITIES REGARDING ITS TAX POSITIONS IT CURRENTLY TAKES OR HAS TAKEN IN PRIOR YEARS. CURRENTLY, THERE ARE NO UNRECOGNIZED TAX BENEFITS OR

LIABILITIES THAT NEED TO BE RECOGNIZED DURING THE CURRENT YEAR OR DUE TO A TAX

Schedule D (Form 990) 2018

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Part XIII Supplemental Information (continued)

PART X - FIN 48 FOOTNOTE (CONTINUED)

POSITION TAKEN IN A PRIOR YEAR. IF PERFORMANCE WAREHOUSE ASSOCIATION WERE TO HAVE A POTENTIAL LIABILITY FOR SUCH TAXES, IT WOULD ALSO ACCRUE INTEREST AND PENALTIES AS A LIABILITY IN THE FINANCIAL STATEMENTS. PERFORMANCE WAREHOUSE ASSOCIATION EXPECTS NO RECOGNIZED TAX BENEFITS THAT WILL BE INCURRED WITHIN THE NEXT YEAR OF THE DATE OF THESE FINANCIAL STATEMENTS.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees -

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

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

MB No 1545 0047

2018

Open to Public \\ Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CUSTOM AUTOMOTIVE NETWORK, INC.

Employer identification number 52-1086811

ŗan	i Questions Regarding Compensation				
				Yes	No
1 a	Check the appropriate box(es) if the organization provided any VII, Section A, line 1a Complete Part III to provide any re	of the following to or for a person listed on Form 990, Part levant information regarding these items		13	
	First-class or charter travel	Housing allowance or residence for personal use		12.	J. 1.51
	Travel for companions	Payments for business use of personal residence	200		183
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees	100	33	S. P. V.
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)		16.	
			1332		
	If any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses describe		1 b	Çr. Br.	7 3 22
	rembulsement of provision of all of the expenses describe	ed above. If 140, complete i art in to explain	(A)	* . ` `	g, 7
2	Did the organization require substantiation prior to reimbur	rsing or allowing expenses incurred by all directors,	15000	13	۲
	trustees, and officers, including the CEO/Executive Directo		2		
	Indicate which, if any, of the following the filing organization us CEO/Executive Director Check all that apply Do not check establish compensation of the CEO/Executive Director, but	k any boxes for methods used by a related organization to			
	Compensation committee	Written employment contract	27 Jan	34.4	ida (K.) Sagara,
	Independent compensation consultant	Compensation survey or study		1.7.3	7. S.
	Form 990 of other organizations	X Approval by the board or compensation committee		(5.)°	1
	Troini 330 of other organizations	Approval by the board of compensation committee	****	عرب کرد ا و دند	
4	During the year, did any person listed on Form 990, Part V	/II Section A line 1a with respect to the filing	20, 3		\$ 5.
•	organization or a related organization	The content of the co	. کرد		100
а	Receive a severance payment or change-of-control payme	nt?	4 a		<u>X</u>
	Participate in, or receive payment from, a supplemental no	•	4 b		Χ
	Participate in, or receive payment from, an equity-based co		4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide th	ne applicable amounts for each item in Part III	2.57	~ (
	0.1	Secretary Const. F. O.			17.77
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizati	·	18		ر از کو ا
	For persons listed on Form 990, Part VII, Section A, line 1a, did contingent on the revenues of	d the organization pay or accrue any compensation		(2, W 2, Solit-	1.4
	The organization?		5 a	5 C 3 A	45 E
	Any related organization?		5 b		
	If 'Yes' on line 5a or 5b, describe in Part III		70) 1	- 2 3	375
6	For persons listed on Form 990, Part VII, Section A, line 1a, dic	d the organization pay or accrue any compensation		()	23 37 - 1
	contingent on the net earnings of	, , , , , , , , , , , , , , , , , , ,	21.5		100 S
	The organization?		6 a		
	Any related organization?		6 b		
	If 'Yes' on line 6a or 6b, describe in Part III		200 1 m	XE.	1 3
	For persons listed on Form 990, Part VII, Section A, line 1a payments not described on lines 5 and 6 ⁹ If 'Yes,' describe		7		
	Were any amounts reported on Form 990, Part VII, paid or			ĺ	
	to the initial contract exception described in Regulations se If 'Yes,' describe in Part III	ection 53 4958-4(a)(3) /	8		
	If 'Yes' on line 8, did the organization also follow the rebuttable section 53 4958.6(c)?	presumption procedure described in Regulations			

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

Schedule J (Form 990) 2018

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52-1086811

CUSTOM AUTOMOTIVE NETWORK, INC.

Part II. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2018

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation				
(A) Name and Title	·	(I) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	and other deferred compensation	benefits	(columns(B)(i)-(D)	(r) Compensation in column (B) reported as deferred on prior Form 990
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Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

2018

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Department of the Treasury Internal Revenue Service

Name of the organization

CUSTOM AUTOMOTIVE NETWORK, INC

Employer identification number

52-1086811

FORM 990. PART III, LINE 1 - ORGANIZATION MISSION

CUSTOM AUTOMOTIVE NETWORK'S MISSION IS TO ASSIST THE SPECIALTY AUTOMOTIVE INDUSTRY
IN EFFORTS TO EXPAND, MAINTAIN AND PROMOTE THE PROFITABLE DISTRIBUTION OF SPECIALTY
AUTOMOTIVE PRODUCTS THROUGH THE MANUFACTUER, DISTRIBUTOR, RETAILER AND CONSUMER
CHANNELS.

FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

MEMBERS ARE AUTOMOTIVE WAREHOUSES THAT HAVE JOINED THE ORGANIZATION FOR BETTERMENT OF THE INDUSTRY AND EDUCATION.

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

OFFICERS AND DIRECTORS ARE ELECTED BY THE GENERAL MEMBERSHIP.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FINANCIAL COMMITTEE WILL REVIEW OR GIVE THE PRESIDENT THE AUTHORITY TO REVIEW ON BEHALF OF THE BOARD.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE IS PROVIDED TO THE BOARD AND OFFICERS TO DISCLOSE ANY POSSIBLE CONFLICTS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE PRESIDENT'S ANNUAL SALARY REVIEW AND SALARY CHANGES ARE DELIBERATED AND DECIDED BY THE CAN EXECUTIVE BOARD.

FORM 990, PART VI. LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 1 - OTHER ACCOUNTING METHOD

MODIFIED CASH