Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545 0047 2018

Department of the Treasury

► 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

| <u> </u> | F4 | h = 2010 I | | | 70 101 1113(100(10113 | · | | Jii. | | | | | |
|--------------------------------|-----------------------------|--|--|---|---|-----------------------------------|---------------|--|---------------------------------|--|--|--|--|
| <u>A</u> | | · · · | dar year, or tax year begi | nning | | 2018, and endi | ing | 15 - · | <u> </u> | | | | |
| В | | if applicable | C | · | | | | 1 ' ' | entification number | | | | |
| | XIA | ddress change | CUSTOM AUTOMOTI | VE NETWOR | K, INC. | | | 52-108 | | | | | |
| | X | ame change | PO BOX 3247 | 02077 224 | 7 | | | E Telephone nu | umber | | | | |
| | Шп | nitial return | POST FALLS, ID | | (760) | 346-5647 | | | | | | | |
| | Fi | nal return/terminated | | | | | | | | | | | |
| | | mended return | | | | | | G Gross receipt | s \$ 507,749. | | | | |
| | Па | pplication pending | F Name and address of princip | al officer | | | H(a) Is this | s a group return for s | | | | | |
| | ш. | | SAME AS C ABOVE | | | \sim | H(b) Are a | It subordinates inclu | ded? Yes No | | | | |
| ī | Tax | exempt status | 501(c)(3) X 501(c) (| 6) ◄ (ins | sert no.) 4947(| a)(1) or 627 | - / If "No | ," attach a list (see | instructions) | | | | |
| J | - | · | ACIE@CUSTOMAUTOM | | <u>`</u> ` | -X-7 (1) (1) (1) (1) (1) | H/cs Crown | exemption number | _ | | | | |
| K | | n of organization | X Corporation Trust | Association | Other > | L Year of forma | | | | | | | |
| | nt I | | | ASSOCIATION | Other | L fear of forma | ation 197 | IVI State o | of legal domicile CA | | | | |
| Га | 1 | Summar Briefly describ | y be the organization's mis: | tion or most si | ignificant activities | CIICTON AT | TONOUT | THE NEWLION | VIC MEGGEON TO | | | | |
| | ' ' | TO ACCTO | TO THE ORGANIZATION STRIS | SION OF THOSE S | TE TNDITCEDY | COSTOM AC | TOWOLI | LAF WELMOK | K.2 WISSION IS | | | | |
| çe | | 10 A2212 | T THE SPECIALTY | AUTOMOTIV | L INDUSTRY | IN EFFORT | S TO E | XPAND, MA | TNTAIN AND | | | | |
| Jan | İ | | THE PROFITABLE D | | | | | - PRODUCTS | THROUGH THE | | | | |
| Peri | _ | | MANUFACTUER, DISTRIBUTOR, RETAILER AND CONSUMER CHANNELS. Check this box I if the organization discontinued its operations of dispassed at more them 25% of its net assets. Number of voting members of the governing body (Part VI line 1a) | | | | | | | | | | |
| Activities & Governance | 2 | | ting members of the gove | on discontinue Arnina hody /P | u its operations | UIS POSE OF | | of its net a | ISSETS | | | | |
| જ | 4 | | dependent voting membe | ,g 200, (. | ٠ ٠.,٠ | | Tal | | | | | | |
| <u>ies</u> | 5 | Total number | of individuals employed | n calendar ve | ar 2018 (Part V | SE 2a) MAY 1 | 7 2019 | $\begin{array}{c c} S & 4 \\ \hline O & 5 \end{array}$ | 8 | | | | |
| Ϋ́ | 6 | Total number | of individuals employed of volunteers (estimate if | necessary) | | SU MAY T | 4 5013 | 9 6 | 4 0 | | | | |
| ç | _ | Total unrelate | ed business revenue from | Part VIII. colu | ımn (C), line 12 | | | | | | | | |
| _ | 1 | | business taxable income | | | OGD | -N 117 | | 207700. | | | | |
| | | | | | | | | Prior Year | Current Year | | | | |
| | 8 | Contributions | and grants (Part VIII, line | ļ <u>-</u> | 1101 1001 | - Guirent real | | | | | | | |
| Revenue | 9 | | ice revenue (Part VIII, lin | | 496,014. | 464,495. | | | | | | | |
| ver | 10 | - | come (Part VIII, column (| | - | 106,310. | 24,469. | | | | | | |
| Re | | | e (Part VIII, column (A), li | | |) | - | 14,542. | 18,785. | | | | |
| | | | add lines 8 through 11 | | | | <u> </u> | 616,866. | 507,749. | | | | |
| | | | milar amounts paid (Part | | | | | 7,000. | 4,870. | | | | |
| | 14 | | to or for members (Part | | | | - | 7,000. | 4,070. | | | | |
| | 15 | Salaries other | r compensation, employe | e henefite (Pa | rt IX column (A) | lines 5-10\ | - | 363,233. | 370,955. | | | | |
| es | 10 | | | | - | 363,233. 37 | | | | | | | |
| Sus | юа | | fundraising fees (ParliX, | | | | - | | | | | | |
| Expenses | b | | ing expenses (Part IX, co | | | | | | | | | | |
| ш | 17 | Other expense | es (Part IX, column (A), li | ines 11a-11d, | 11f-24e) | | | 357,005. | 268,515. | | | | |
| | 18 | Total expense | es Add lines 13-17 (must | equal Part IX, | column (A), line | 25) | | 727,238. | 644,340. | | | | |
| | 19 | Revenue less | expenses Subtract line | 18 from line 12 | 2 | | | -110,372. | -136,591. | | | | |
| 5 8 | | | · · · · · · · · · · · · · · · · · · · | | | | Beaunni | ng of Current Year | | | | | |
| ets | 20 | Total assets (| Part X, line 16) | | | | _ 3g | 953,249. | 811,119. | | | | |
| Ass | 21 | | s (Part X, line 26) | | | | | 41,596. | 102,570. | | | | |
| Net Assets or Fund Balances | 22 | Net assets or | fund balances Subtract I | ine 21 from lin | ne 20 | | <u> </u> | 911,653. | | | | | |
| | rt II | Signature | 4 | 21 1101111111 | | | | JII, 053. | 708,549. | | | | |
| | | | | | | d | | | <u> </u> | | | | |
| comp | r penal olete De | ues of perjury, I de eclaration of prepai | clare that I have examined this ret er (other than officer) is based on | urn, including acco all information of v | mpanying schedules an which preparer has any | a statements, and to knowledge | tne best of n | ny knowledge and be | eliet, it is true, correct, and | | | | |
| | | | March 1 James | | | · · · | | 05-13 | | | | | |
| c:~ | ın | Signatur | e of officer | 1 | | | l_ Da | | | | | | |
| Sig | jii re | | | | | | | | | | | | |
| 116 | Here TRACIE NUNEZ PRESIDENT | | | | | | | | | | | | |
| | | | • | Prenaro | 2 10/ | | | | DTIN | | | | |
| | | | eparer's name | Prepare | TUTE /// | 5-8 | . 19 | Checkif | PTIN | | | | |
| Pai | | | PHER A. MAYHEW | 1 pe | -14 | - 10 | | self-employed | P01049711 | | | | |
| | pare | | ► MAGNUSON, MC | | | | |] | | | | | |
| Us | e On | y Firm's addres | ss 2100 NORTHWE | ST BLVD, | SUITE 400 | | | Firm's EIN ► 82 | 2-0331228 | | | | |
| | | | COEUR D'ALEN | | · | | | | -765-9500 | | | | |
| May | the I | RS discuss thi | s return with the preparer | | | s) | | | X Yes No | | | | |
| | | | eduction Act Notice, see | | | | FA01011 08/ | 20/18 | Form 990 (2018) | | | | |

| Form 990 (2018) CUSTOM AUTOMOTIVE NETWORK, INC | 52- <u>1</u> | 086811 | Page 2 |
|--|--------------------|-----------------|-------------------|
| Part III Statement of Program Service Accomplishments | | | |
| ' Check if Schedule O contains a response or note to any line in this Part III | | | Σ |
| Briefly describe the organization's mission | | | |
| SEE SCHEDULE O | | | |
| | _ | . — | |
| | | | |
| | | | |
| 2 Did the organization undertake any significant program services during the year which were not listed or | n the prior | | |
| Form 990 or 990-EZ? | | Yes | X No |
| If "Yes," describe these new services on Schedule O | | | |
| 3 Did the organization cease conducting, or make significant changes in how it conducts, any prog | gram services? | Yes | X No |
| If "Yes," describe these changes on Schedule O | | | |
| 4. Describe the organization's program service accomplishments for each of its three largest progra | am services, as n | neasured by e | expenses |
| Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all and revenue, if any, for each program service reported | locations to other | rs, the total e | xpenses, |
| 4a (Code:) (Expenses \$ including grants of \$ |) (Revenue | Ś | |
| CAN CONFERENCE PRESENTED ANNUALLY IN SEPTEMBER COORDINATE P | · · | | ייידאוככ ^ |
| AND PROVIDE NETWORKING OPPORTUNITIES WITH MEMBER MANUFACTURE | | | |
| | rys' reserve | EV2' VEL | YND - |
| SERVICE PROVIDERS. | | | |
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| | | | |
| b (Code) (Expenses \$ including grants of \$ |) (Revenue | \$ |) |
| GENERAL MEMBERSHIP MEETING (GMM) HELD ANNUALLY IN NOVEMBER I | N CONJUNCT | ION WITH | THE |
| SEMA SHOW. THE GMM IS A BREAKFAST MEETING OPEN TO ALL CAN M | | | |
| MEMBERSHIP ON CAN BUSINESS, ACKNOWLEDGE AWARD WINNERS, AND P | | | EVANT |
| SPEAKERS. | | | |
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| | | <u> </u> | |
| c (Code) (Expenses \$ including grants of \$ |) (Revenue | |) |
| CAN NEWSLINE IS A PUBLICATION PRODUCED SIX TIMES EACH YEAR F | OR ALL CAN | MEMBERS. | <u>IT</u> |
| INCLUDES ASSOCIATION AND INDUSTRY RELEVEANT INFORMATION, AS | WELL AS AD | VERTISING | ; |
| OPPORTUNITIES TO CAN MEMBERS. IT IS AVAILABLE IN PRINT AND | ON-LINE TH | ROUGH THE | CAN |
| WEBSITE. | | | |
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| | | | |
| d Other program services (Describe in Schedule O) | | | |
| (Expenses \$ including grants of \$) (Rever | nue \$ | |) |
| e Total program service expenses ► 0. | | | |
| TEEA0102L 08/03/18 | | Form | 990 (2018) |

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|---------|------------|--------------|------------|
| Part IV | II DACKUST | ni keniliren | SCHEHILLES |
| | CHCCKHOL | of Required | JULICALICS |

| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If Yes, 'complete Schedule B. Schedule of Contributors (see instructions)? 2 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 3 Del the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 3 Del the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 4 Is Section 501(X) organizations. Del the organization engage in tobbying activities, or have a section 501(ft) election of effect during the fax year? If Yes, 'complete Schedule C, Part III (see Schedule C, Pa | Ь_ | | | Τ | r |
|---|-----|--|------|-----|---------|
| 3 Dut 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 II 4 Section 501(x)30 organizations. Dut the organization is properly activities, or have a section 501(n) election in effect during the fax year? If Yes, complete Schedule C, Part III 5 Is the organization a section 501(x)(4), 501(x)(5), or 501(x)(5) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Proceeding 98.19 If Yes, complete Schedule C, Part III 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 dishribution or investment of amounts in such thinsor accounts? If Yes, complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or instance structures? If Yes, complete Schedule D, Part II 8 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or instance structures? If Yes, complete Schedule D, Part II 9 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or instance to consecution of the securities of the sec | 1 | | 1 | Yes | No X |
| for public office? If "Piss" complete Schedule C, Part II 4 Section 501(Ag) organizations. Dut the organization engage in lobbying activities, or have a section 501(ft) election in effect during the fax year? If "Piss", complete Schedule C, Part II 5 Is the organization a section 501(CA), 501(CS), 6051(CS), 6050(CS), 6050(| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | Х |
| in effect during the fax year? If Yes, 'complete Schedule' C, Part III Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(5) or ganization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If Yes, 'complete Schedule' C, Part III Dot the organization maintain any donor advised funds or any similar funds or accounts' If Yes, 'complete Schedule D, Part III Dot the organization receive or hold a conservation easement, including easements to provide advice on the distribution or investment of amounts in such funds or accounts' If Yes,' complete Schedule D, Part III Dot the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes,' complete Schedule D, Part III Dot the organization report an amount in Part X, line 21, for escrow or custodrial account liability, serve as a custodrial for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation or services? If Yes,' complete Schedule D, Part IVI Dot the organization report an amount for investments or other securities in Part X, line 10° If Yes,' complete Schedule D, Part VIII If the organization report an amount for land, buildings, and equipment in Part X, line 10° If Yes,' complete Schedule D, Part VIII Dot the organization report an amount for land, buildings, and equipment in Part X, line 10° If Yes,' complete Schedule D, Part VIII Dot the organization report an amount for other securities in Part X, line 10° If Yes,' complete Schedule D, Part VIII Dot the organization report an amount for other inabilities 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 XIII Dot the organization report an amount for other inabilities 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 XIII Dot the organization and an amount for other liabilities in Part X, line 18 | 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 |
| assessments, or similar amounts as defined in Revenue Procedure 98-197 If Yes, complete Schedule C, Part III Dot the organization maritan any doors advested finds or any similar funds or accounts for which donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes, complete Schedule D, Part II Dot the organization receive or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structures? If Yes, complete Schedule D, Part III Dot the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes, complete Schedule D, Part III Dot the organization report an amount in Part X, line 21, for ecrow or custodial account liability, serve as a custodian for amounts no listed in Part X, or provide veriet courseling, debt management, credit repair, or debt negotishon for amounts no listed in Part X, or provide veriet courseling, debt management, credit repair, or debt negotishon services? If Yes, complete Schedule D, Part IV Did the organization, directly or though a related organization, hold assets in temporarily restricted endowments, or X as applicable a Did the organization report an amount for Investments — other securities in Part X, line 10° If Yes, complete Schedule D, Part VIII bit the organization report an amount for investments— other securities in Part X, line 10° If Yes, complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15° In Yes, complete Schedule D, Part VIII d Did the organization report an amount for other inabilities in Part X, line 15° In Yes, complete Schedule D, Part XIII d Did the organization report an amount for other inabilities in Part X, line 15° In Yes, complete Schedule D, Part XIII d Did the organization report an amount for other inabilities in Part X, line 15° In Yes, complete Schedule D, Part XIII d Did the organization included in consolidated financi | 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election | 4 | | |
| to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 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 III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 courseling, debt management, credit repair, or debt negolation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for investments — other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 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 VI 11 Did the organization report an amount for other liabilities 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 XI 11 Did the organization report an amount for other liabilities in Part X, line 25 if Yes," complete Schedule D, Part XI 11 Did the organization report an amount for other liabilities in Part X, line 25 if Yes," complete Schedule D, Part XI 11 Did the organization report an amount for other liabilities in Part X, line 25 if Yes," complete Schedule D, Part XI 11 Did the organization report an amount for other liabilities in Part X, line 25 if Yes," complete Schedule D, Part XI 12 Did the organization or report an amount for other liabilities in Part X, line 25 if Yes," complete Schedule D, Par | 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 | |
| environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II 8 | 6 | to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, | 6 | | |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II | 7 | | 7 | | Х |
| for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services? If Yes,' complete Schedule D, Part V 10 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 11 If the organization's answer to any of the following questions is Yes', then complete Schedule D, Part V, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes,' complete Schedule D, Part VI 11 D Did the organization report an amount for investments — other securities in Part X, line 12? If Yes,' complete Schedule D, Part VI 11 D Did the organization report an amount for investments — program related in Part X, line 16? If Yes,' complete Schedule D, Part VII 11 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 VIII 2 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 X 11 D D D D D D D D D D D D D D D D D | 8 | | 8 | | Х |
| permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Dd the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII b Dd 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 c Dd the organization report an amount for investments – other securities 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 d Dd the organization report an amount for other assets 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 d Part X, line 16? If "Yes," complete Schedule D, 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 XIII to Y 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 XIII to Y d Did the organization separate or consolidated financial statements for the lax year in If "Yes," complete Schedule D, Part X d Did the organization's lability for uncertain tax positions under FIN 48 (ASC "AO)? If "Yes," complete Schedule D, Part X line organization and separate, independent audited financial statements for the tax year? If "Yes," and if the organization asset of Vi to line 12a, then completing Schedule D, Parts XI and XII is optional labely as the organization asset of Vi to line 12a, then completing Schedule D, Parts XI and XII is optional labely as the organization asset of Vi to line 12a, then completing Schedule D, Parts XI and XII is optional labely as the organization asset of Vi to line 12a, then complete Schedule G, Part II line 10 Dd the organization report on Part IX, column (A), line 3, more th | 9 | for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation | 9 | | X |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI Uses assets reported in Part X, line 10? If 'Yes,' complete Schedule D, Part VI Uses assets reported in Part X, line 10? If 'Yes,' complete Schedule D, Part VI Uses assets reported in Part X, line 10? If 'Yes,' complete Schedule D, Part VII Uses assets reported in Part X, line 10? If 'Yes,' complete Schedule D, Part VII Uses assets reported in Part X, line 10? If 'Yes,' complete Schedule D, Part VII Uses assets reported in Part X, line 10? If 'Yes,' complete Schedule D, Part VII Uses assets reported in Part X, line 10? If 'Yes,' complete Schedule D, Part VII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part VIII Uses to do not be assets in Part X, line 10. Part X, line 10. Part X VIII Uses to do not be assets in Part X, line 10. Part X VIII Uses to do not be assets in Part X, line 10. Part X VIII Uses to do not be assets in Part X, line 10. Part X VIII Uses to do not be assets in Part X, line 10. Part X VIII | 10 | 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 | | X |
| D. Part VI b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part VII 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 VII 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 VII 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 X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's hability for uncertain tax positions under FIN 48 (ASC 740)? If "yes," complete Schedule D, Part X line X 12.2 Did the organization bian separate, independent audited financial statements for the tax year? If "yes," complete Schedule D, Part X and XII is optional low Was the organization oncluded 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 low Was the organization aschool described in section 170(b)(1)(A)(ii)? If "yes," complete Schedule E line X line IS was the organization aschool described in section 170(b)(1)(A)(ii)? If "yes," complete Schedule E line X line IS was the organization aschool described in Schedule D, Parts XI and XII is optional line organization have aggregate revenues or expenses of more than \$1,000 from granitamking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investm | 11 | | | | ţ |
| assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 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 X f Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization is 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 "40")" If "Yes," complete Schedule D, Part X 12a Did the organization oblain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization included in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 | | D, Part VI | 11 a | X | |
| assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII 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 e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X 111 | | assets reported in Part X, line 16 ⁷ If 'Yes,' complete Schedule D, Part VII. | 11 Ь | | X |
| in Part X, line 16? If 'Yes,' complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X f Did the organization's separate or consolidated innancial 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Part X I and XII 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 13 is the organization asshool described in section 170(b)(1)(A)(II)? If 'Yes,' complete Schedule E 14a 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 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 report a total of more than \$15,000 of expenses for professional fundraising services 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 15 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3 for the analysis of the aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule G, Part II and IV 16 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part IX, column (A), line 3 for any any and any any any | • | 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 | | X |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X 12 a Did the organization separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII 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 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 14 Did the organization maintain an office, employees, or agents outside of the United States? 15 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 16 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 17 Did the organization report at old 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 II and IV 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If 'Yes,' complete Schedule G, Part III 19 Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20 Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization organization of the pagainization of the organization report more than \$5,000 of grants or o | • | 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 | | X |
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| Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part II (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 1 X 19 Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20a X b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Lines or of the tax year? If yes year or other assistance to any domestic organization or | 1 | 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 | X | |
| Is the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X 15 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' 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts III and IV' 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV' 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20a X 20b Life 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Life be organization report more than \$5,000 of grants or other assistance to any domestic organization or | 12: | | 12a | | Х |
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| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20a X 20b Lift 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Lift 'Yes' to line 20a, did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | ı | business, investment, and program service activities outside the United States, or aggregate foreign investments valued | 14b | | х |
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| column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 X 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20a X 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV | 16 | | |
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| complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20a X b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | 18 | | X |
| 20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i> b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | 19 | | Х |
| 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | 20a | | 20a | | |
| 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 | ŧ | If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| | 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II | 21 | _ | X |

Form 990 (2018) CUSTOM AUTOMOTIVE NETWORK, INC.

Part IV | Checklist of Required Schedules (continued)

| | · | | Yes | No | | | | |
|--|---|-------|-------|----------|--|--|--|--|
| 22 | 2 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 | 3 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 | | | | | |
| 24 | 4a 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 | | | | |
| | 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 | | | | | | |
| 25 | 5 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 | | | | | | | |
| 27 | 7 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) | · . ' | , | | | | | |
| | a 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 | | | | |
| | c 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 | | | | | | | |
| 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 L | 31 | | X | | | | |
| 32 | 2 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II | 32 | | Х | | | | |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I | 33 | | Х | | | | |
| 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 | | Х | | | | |
| 35 | a 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 | | | | | | |
| 37 | Old 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 | | | | | | | |
| | 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 | | | | | |
| 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 | | | | |
| 1 | a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | | 162 | 110 | | | | |
| • | b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | , | . | | | | | |
| | c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | ; · | ` | , | | | | |
| D. C | (gambling) winnings to prize winners? | 1 c | X | <u> </u> | | | | |
| BA | A TECHNICAL COLONIA | Lotu | 990 (| ZU18) | | | | |

Form 990 (2018) CUSTOM AUTOMOTIVE NETWORK, INC.

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

| 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 a At any time during the calendar year, did the organization have an interest in, or a significant or other authority over a financial account? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, in the sea or 50, of the organization that it was or is a party to a prohibited tax shared the range of the organization of the organization that it was or is a party to a prohibited tax shared the rotation of the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions in the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charactable contributions or gifts were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). 8 of the organization network a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7 b If Yes, indicate the number of Forms 8282 filed during the year 8 b If Yes, indicate the number of Forms 8282 filed during the year 9 b If Yes, it de the organization received a contribution of cars, boats, arplaines, or other vehicles, did the organization received a contribution of cars, boats, arplaines, or other vehicles, did the organization file or foreign and the payment in the payor organization received a contribution of cars, boats, arplaines, or other vehicles, did the organization file of the payor org | | | | | Yes | No |
|---|-----|--|--|------------------|--|----------------------------|
| b if at least one is reported on line 2a, did the organization file all required federal employment lax returns? Note, If the sum of Aines 1 and 2a is greater than 250, you may be required to e-fix (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 a Many time during the calendar year did to be a fixed a fixed and a fixed fi | 2 8 | 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 | The state of the s | 14. |
| 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 a At any time during the calendar year, did the organization have an interest in, or a significant or other authority over a financial account? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, enter the name of the foreign county? 5 if Year, in the sea or 50, of the organization that it was or is a party to a prohibited tax shared the range of the organization of the organization that it was or is a party to a prohibited tax shared the rotation of the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions in the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charactable contributions or gifts were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). 8 of the organization network a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7 b If Yes, indicate the number of Forms 8282 filed during the year 8 b If Yes, indicate the number of Forms 8282 filed during the year 9 b If Yes, it de the organization received a contribution of cars, boats, arplaines, or other vehicles, did the organization received a contribution of cars, boats, arplaines, or other vehicles, did the organization file or foreign and the payment in the payor organization received a contribution of cars, boats, arplaines, or other vehicles, did the organization file of the payor org | ŀ | If at least one is reported on line 2a, did the organization file all required federal employmen | nt tax returns? | 2 b | | |
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| 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? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b Did the sponsoring organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(2) organizations. Enter. a Gross income from members or shareholders 11 Section 501(c)(2) organizations. Enter. a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 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 b Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O 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 instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If 'Yes,' complete Form 4720, Schedule O | | as required? | | 7 g | | |
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| 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 | 15 | excess parachute payment(s) during the year? | n remuneration or | <u> </u> | 92 | |
| If 'Yes,' complete Form 4720, Schedule O | | • | vootmont inge | | 10 A. | |
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| | ΑA | | | Forn | 990 | 2018) |

Form 990 (2018) CUSTOM AUTOMOTIVE NETWORK, INC. 52-1086811 Page 6 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 in 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 No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 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 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Χ 4 Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed? 4 \overline{X} 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? SEE SCHEDULE O 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? SEE SCHEDULE O 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b Х ÷ . . ; Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? X 8 a X 8ь **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 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? 10 b 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 Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 1154 SEE SCHEDULE O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in SEE SCHEDULE O X Schedule O how this was done 12 c 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 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? 3.5 a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O 15 a Х 15 b X b Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) · 5-16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 16 a taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Other (explain in Schedule O) Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

TRACIE NUNEZ PO BOX 3247

| Form 990 (| 2018) | CHSTOM | AUTOMOTIVE | NETWORK. | TNC |
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 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 relat | ed organiz | ation | con | (C) | | ed any | / CU | irrent oπicer, directi | or, or trustee | _ | |
|--|---|-------------|-----------------------|--------------------------------|---------------------------|------------------------------|--------|--|--|--|--|
| (A) Name and Title | (B) Average hours per | l thai | n one s both | (do n box, an o ector | ot ch unle: officei | | on | (D) Reportable compensation from the organization | (E) Reportable compensation from | (F) Estimated amount of other compensation | |
| | week (list any hours for related organiza- tions below dotted line) | or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | from the organization and related organizations | |
| (1) ANDY MCJANNETT | 5 | | | | | | | | | | |
| CHAIRMAN | 0 | X | | Х | | | | 0. | 0. | 0. | |
| (2) SCOTT WAHLSTROM | 3 | | | | | | | | | | |
| CHAIRMAN ELECT | 0 | X | | | | | | 0. | 0. | 0. | |
| (3) JR MOORE | 33 | | | | | | | | | | |
| PAST CHAIRMAN | 0 | X | | | | | | 0. | 0. | 0. | |
| (4) ROYAL COBURN | 2 | | | | | | | | | | |
| DIRECTOR | 0 | X | | | | | | 0. | 0. | 0. | |
| (5) BOB BARRA | 2 | | | | | ! | | | | | |
| DIRECTOR | 0 | Х | | | | | | 0. | 0. | 0. | |
| (6) BRETT CORNING | 22 | | | | | | | | | | |
| DIRECTOR | 0 | X | | | | | | 0. | 0. | 0. | |
| (7) ROGER GOYETTE | 3 | | | | | | | | _ | - | |
| TREASURER | 0 | Х | | X | | | | 0. | 0. | 0. | |
| (8) JOHN DEBALSO | 2 | | | | | | | | | - | |
| DIRECTOR | 0 | Х | | | | | | 0. | 0. | 0. | |
| (9) TRACIE NUNEZ | 40 | | | | | | | | | · - | |
| PRESIDENT | 0 | | | Х | | | | 216,370. | 0. | 0. | |
| (10) | | | | | | | | | | | |
| (11) | | | | | | | | | | | |
| (12) | | | | | - | | - | | ., | | |
| (13) | | | | | | | | | | <u> </u> | |
| (14) | | | | | | | | | | | |
| ВАА | TEEA01 | l 107L | 08/03 | 3/18 | | | | | | Form 990 (2018) | |

| Part VII Section A. Officers, Directors, 1 | rustees, | ney | Emp | loye | es, | anc | u nigilest con | ipensaleu Em | ployees (continued) |
|---|---------------------|-----------------------------------|----------------------------------|--------------|------------------------------|------------|-------------------------------------|--|------------------------------|
| (A) | (B) Average | | | | e than o | | Renortable | (E) | (F) Estimated |
| Name and title | per week | offic | er and a | direc | tor/trust | tee) | compensation from | Reportable compensation from related organizations | amount of other |
| | (list any hours | Individual trustee or director | Instituti | (@ | la 링 | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099 MISC) | from the organization |
| | for related | rect | Officer Institutional trustee | Key employee | loyer | ner | | | and related organizations |
| | organiza - tions | o E | ᆲ | Joye | le ă | | | | 0.9220.0.03 |
| | below dotted | 🥞 | ZŽ. | ď | Dens | | : | | |
| | line) | | 8 | | Highest compensated employee | | | | |
| (15) | | | | | $\left \cdot \cdot \right $ | | | | |
| | | | | | | | | | |
| (16) | | | | | | ĺ | | | |
| (17) | | | +- | ╁— | - | | | | |
| | 1 | | | | | | | | |
| (18) | | | | | | | | | |
| (19) | | - | _ | ╁ | \vdash | | - | | - |
| | | 1 | | | | | | | |
| (20) | | | | | | | | | |
| (21) | | | | | | \dashv | | | |
| (21) | | 1 | | | | Ì | | | |
| (22) | 1 | | | | | | _ | | |
| (23) | ļ | | | | | | | | |
| (23) | | 1 | | | | | | | |
| (24) | | | - | | | | | | |
| (05) | <u> </u> | - | - | - | | | | | |
| (25) | | | | | | | | | |
| 1 b Sub-total | | J | | | ' | <u> </u> | 216,370. | 0 | . 0. |
| c Total from continuation sheets to Part VII, Sec | tion A | | | | • | - [| 0. | 0 | |
| d Total (add lines 1b and 1c) | | | | | | _ | 216,370. | 0 | |
| 2 Total number of individuals (including but not limite | ed to those I | sted a | bove) | who | receiv | ed i | more than \$100,00 | 0 of reportable com | pensation |
| from the organization 1 | | | | - | | | | | Yes No |
| 3 Did the organization list any former officer, dire | ector or tru | stee ! | kev er | nolo | vee. c | or h | ighest compensat | ed employee | 25 3 32 3 |
| on line 1a? If 'Yes,' complete Schedule J for su | ich individu | al | , | | , | | ng. reet eem per reet | ou omployee | 3 X |
| 4 For any individual listed on line 1a, is the sum the organization and related organizations great | of reportab | e con | npensa | ation | and o | othe | er compensation to | from | |
| the organization and related organizations grea | iter than \$1 | 50,00 | 0, 11 | res, | corn | piei | le Scriedule J lor | | 4 X |
| 5 Did any person listed on line 1a receive or accr | ue compen | sation | from | any | unrel | ate | d organization or | ındıvıdual | 5 X |
| for services rendered to the organization? If 'Yo Section B. Independent Contractors | es, compie | ie Sci | ieuuie | 3 10 | ir Suci | пре | ersori | | 5 X |
| 1 Complete this table for your five highest compe | nsated indi | epend | ent co | ntra | ctors | tha | t received more th | nan \$100,000 of | |
| compensation from the organization Report compe | | пе са | ienoar | year | enain | ig w | (B) | | (C) |
| (A) Name and business ad | dress | | | | | | Description of | of services | Compensation |
| | | | | | | | | | |
| | | | | | | | | | |
| | - | | | | | \dashv | | | |
| | | | | | | | | | |
| 2 Total number of independent contractors (including | | ted to | those | listed | abov | e) v | who received more | than Tx | 没多多是 |
| \$100,000 of compensation from the organization | n 🏲 0 | | | | | | | 1,57 | Section of the section of |

| | • | Check if Schedule O | contains a res | ponse or note to an | iy iine in this Part v | (111 | | |
|--|---------------------|--|---------------------|---------------------|--|--|--|--|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| fts, Grants r Amounts | b | Federated campaigns Membership dues Fundraising events Related organizations | 1a 1b 1c | | | | | |
| Contribut ons, Gifts, Grants and Other Similar Amounts | е | Government grants (contributions) All other contributions, gifts, generating amounts not included | ons) le | | | | | |
| ontri nd O | | Noncash contributions included Total. Add lines 1a-1f | f in lines 1a-1f \$ | - | | | | |
| | | Totali / laa iii laa ii | | Business Code | Controlled States of Color of | A MAN TO THE MAN THE STATE OF T | 5.257 (Shipe and a | Gallery of Control of |
| an a | 2 a | TO A DE ACCOC COMEED | ENCEC | 561000 | 340,254. | 340,254. | Lessace of Archives Privily | LUSTY US TAKES TWATER. |
| ě | _ | TRADE ASSOC CONFER | | 561000 | 119,302. | 119,302. | | |
| ė. | | MEMBER DUES & ASSE | | | | 4,939. | | |
| Program Service Revenue | d | MISCELLANEOUS RECE | | 561000 | 4,939. | 4,939. | | - |
| gram | e f | All other program service | e revenue | | | | | |
| Pro | g | Total. Add lines 2a-2f | | * | 464,495. | 第4章数数据的 表 | · · · · · · · · · · · · · · · · · · · | |
| | 3 | Investment income (incother similar amounts) | | ► | 24,469. | | | 24,469. |
| | 4 | Income from investmen | t of tax-exemp | t bond proceeds. > | | | | |
| | 5 Royalties | | > | | | | | |
| | | | (ı) Real | (ii) Personal | | | | Proceeding the process of the proces |
| | 6 a | Gross rents | | | Transfer and the second | A STATE OF THE STA | | |
| | þ | Less: rental expenses | | | | 2000 C. S. C. | | |
| | С | : Rental income or (loss) , | | | The little of the property of the party of the party of | | 的影響的影響 | Harry Marie Continued |
| | d | Net rental income or (lo | ss) | b | 1 | | | |
| | , . | Gross amount from sales of | (i) Securities | (II) Other | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | 1.5 1.6 mm (4.5 %) | 10000000000000000000000000000000000000 | CHIEF THE THE |
| | / d | assets other than inventory | | 1 | | | | |
| | | • | | | | The factor of the state of the | Profit in the Company of the Company | |
| | b | Less cost or other basis and sales expenses | | | | | | |
| | _ | | | | STATE OF THE STATE | | | |
| | | Gain or (loss) | | | Thrace said by say | THE CHANGE AND AND A | THE PROPERTY OF THE PARTY OF | [125A]92222&2018 911 |
| æ | | Net gain or (loss) Gross income from fund | draising events | · [| | | | |
| ĭ | | (not including \$ | | | | | | |
| ě | | of contributions reported | d on line 1c) | | | PASSES TRANSPORT | | 學變元分為於門所 |
| œ. | | See Part IV, line 18 | | a | | | | |
| Other Revenu | b | Less direct expenses | | b | 医影音器运动员 | | | 教を含むでであ |
| ర | C | : Net income or (loss) fro | m fundraising | events <u></u> | | 经产业的工程的证明 | | ****** |
| | 9 a | Gross income from gam See Part IV, line 19 | ning activities | a | | | | |
| | b | Less direct expenses | | b | | 医多种 经收入货款 | | |
| | c | : Net income or (loss) fro | m gaming acti | vities | 1 | | | |
| | | | | | 355 CO 2015 | CONTRACTOR | | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 |
| | IVa | Gross sales of inventory and allowances | y, less letuilis | a | | | | |
| | | Less cost of goods sole | | b | | 3 3 4 2 3 4 1 3 4 | | |
| | | : Net income or (loss) fro | | entory > | 1 146 (1 74 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 11. 27. 21. 128.221.221.129.27 | - c c " 18 14 5 4 14 4 5 4 4" 2 15 5 5 | Partie Safricital All Land |
| | <u> </u> | Miscellaneous Revenu | | Business Code | | 2. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | M. January & 18 18 18 18 | |
| | 11 - | ··· | ere · | 541800 | 18,785. | CONTRACTOR IN TO MAKE | 18,785. | Li Limit 1975 Table - A Table |
| | b | ADVERTISING | | 241000 | 10, 103. | | 10,103. | |
| | " | <u>,</u> | | | | | | <u> </u> |
| | ſ | , | | | | | | ' |
| | d All other revenue | | | <u> </u> | | 4.3.5 N . N/OR Y' | \$ 1.72 \$ 6.75 BM | + 470 San Cake - Frie Chin - 5 |
| | | Total. Add lines 11a-11 | | • | 18,785. | | 3 45 34 45 55 | 大学学院と変えて |
| | 12 | Total revenue. See inst | ructions | ▶ | 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.

| Sec | 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 i | not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses | | | | |
| 1 | Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 | 4,870. | 4,870. | | | | | | |
| 2 | Grants and other assistance to domestic individuals See Part IV, line 22 | | , , , , , | S. S | | | | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | | | | THE PROPERTY OF THE PARTY OF TH | | | | |
| 4 | Benefits paid to or for members | | | 学是这种 | はいた 発送できぬが | | | | |
| 5 | 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 | Other salaries and wages | 129,746. | 92,733. | 37,013. | | | | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | | | | | |
| 9 | Other employee benefits | | | | | | | | |
| 10 | Payroll taxes | 24,839. | 14,236. | 10,603. | | | | | |
| 11 | Fees for services (non-employees). | | | | | | | | |
| ā | a Management | | | | | | | | |
| t | Legal | 1,693. | | 1,693. | | | | | |
| C | Accounting | <u>16,275.</u> | | 16,275. | | | | | |
| C | Lobbying | | | | | | | | |
| € | Professional fundraising services See Part IV, line 17 | | 一致らればはは悪難 | 为为是在《新文化》 | | | | | |
| g | Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) | 00.500 | 00 400 | 0.070 | | | | | |
| | 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 20 | Conferences, conventions, and meetings Interest | 107,636. | 96,872. | 10,764. | | | | | |
| 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 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e | | | | | | | | |
| | expenses on Schedule O) | Carrier State Control | | Sec. 1. 28, 13, 30 85 35 35 35 | 多ないできる。 | | | | |
| | BOARD_MEETING | 27,760. | | 27,760. | | | | | |
| | P <u>SEMA_SHOW_EXPENSES</u> | 18,801. | 16,921. | 1,880. | | | | | |
| | BANK_CHARGES | 9,810. | | 9,810. | | | | | |
| | INVESTMENT ADVISOR FEES | 8,777. | 1 10= | 8,777. | | | | | |
| • | e All other expenses | 4,058. | 1,135. | 2,923. | | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 644,340. | 384,760. | 259,580. | 0. | | | | |
| 26 | the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here | | | | | | | | |
| | SOP 98-2 (ASC 958-720). | <u> </u> | | L | Fa 000 (0010) | | | | |
| BAA | | TEEA0110L O | 3/03/18 | | Form 990 (2018) | | | | |

| | ; | Check if Schedule O contains a response or note t | o any line in this Part X | | | |
|-----------------------------|------|--|---|-------------------------------------|--|--------------------|
| | | • | | (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. |
| | 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 | | | 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 | (3)(B), and contributing (9) voluntary employees' | | 6 | |
| ts | 7 | Notes and loans receivable, net | | | 7 | |
| Assets | 8 | Inventories for sale or use | | | 8 | |
| As | 9 | Prepaid expenses and deferred charges | <u> </u> | 9 | | |
| | 10 a | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D | 10a 6,313. | | 10°5. | |
| | ь | Less accumulated depreciation | 10b 3,999 | To an a decided in the state of the | 10 c | 2,314. |
| | 11 | Investments — publicly traded securities. | 3,333 | 783,759. | 11 | 702,828. |
| | 12 | Investments – other securities See Part IV, line 11 | 103,133. | 12 | 702,020. | |
| | 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. |
| 一 | 17 | Accounts payable and accrued expenses | 151. | 17 | 011,117. | |
| l | 18 | Grants payable | | 18 | | |
| | 19 | Deferred revenue | 41,445. | 19 | 102,570. | |
| | 20 | Tax-exempt bond liabilities | | | 20 | |
| es. | 21 | Escrow or custodial account liability Complete Part I | V of Schedule D | | 21 | |
| Liabilities | 22 | Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L | | | 22 | The second of |
| - | 23 | Secured mortgages and notes payable to unrelated th | ird parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third | parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Com | s to related third parties, plete Part X of Schedule D | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | | 41,596. | 26 | 102,570. |
| ses | | Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34. | re ► X and complete | | 激為 | |
| ä | 27 | Unrestricted net assets | | 911,653. | 27 | 708,549. |
| 33 | 28 | Temporarily restricted net assets | | | 28 | |
| ᅙ | 29 | Permanently restricted net assets | | 29 | | |
| Net Assets or Fund Balances | | Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34. | | | | |
| 2 | 30 | Capital stock or trust principal, or current funds | | 30 | THE THE PROPERTY AND THE STATE OF STATE | |
| 8 | 31 | Paid-in or capital surplus, or land, building, or equipm | ent fund. | | 31 | |
| As | 32 | Retained earnings, endowment, accumulated income, | or other funds | | 32 | |
| Ę | 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. |
| | | | TECA01111 00/02/10 | | | |

| Forr | m 990 (2018) CUSTOM AUTOMOTIVE NETWORK, INC. 5 | 2-1086811 | <u> </u> | Page 12 |
|---------|---|-----------|---|---------|
| Pa | rt 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. |
| Pa | rt 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 2: | Accounting method used to prepare the Form 990 Cash Accrual X Other SEE SCH. If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O a Were the organization's financial statements compiled or reviewed by an independent accountant? | 0 | 2a X | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both X Separate basis Both consolidated and separate basis | ewed on a | | \$ 3 m |
| i | 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 sep basis, consolidated basis, or both Separate basis Both consolidated and separate basis | | | |
| • | c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the auteview, or compilation of its financial statements and selection of an independent accountant? | ıdıt, | 2c X | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | | 200 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | |
| 3 | a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Singl Audit Act and OMB Circular A-133? | е | 3 a | Х |
| I | 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 in Schedule O and describe any steps taken to undergo such audits | | 3 b | 1 |
| 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 2018

Open to Public Inspection :

Department of the Treasury Internal Revenue Service

► 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

| • | Section 501(c)(4), (5), or (6) o | organizations Complete Part III | | | |
|------|--|--|---|--|---|
| Name | e of organization CUSTOM A | AUTOMOTIVE NETWORK, INC. | | Employer identific | cation number |
| | | | | 52-108681 | |
| | | rganization is exempt under sect | • | • | zation. |
| 1 | | organization's direct and indirect political on of 'political campaign activities') | campaign activities in | n Part IV | |
| 2 | Political campaign activity ex | xpenditures (see instructions) | | ► \$ | \$ |
| 3 | Volunteer hours for political | campaign activities (see instructions) | | | |
| Pại | rt I-B Complete if the o | rganization is exempt under secti | on 501(c)(3). | | |
| 1 | Enter the amount of any exc | cise tax incurred by the organization under | section 4955 | ▶ (| 3 |
| 2 | Enter the amount of any exc | cise tax incurred by organization managers | s under section 4955 | ► \$ | |
| 3 | If the organization incurred a | a section 4955 tax, did it file Form 4720 fo | r this year? | | Yes No |
| 4 : | a Was a correction made? | | | | ∏Yes ∏No |
| ı | b If 'Yes,' describe in Part IV | | | | ل ليا |
| Pai | rt I-C. Complete if the o | rganization is exempt under secti | on 501(c), excep | t section 501(c)(3) | |
| 1 | Enter the amount directly ex | pended by the filing organization for section | on 527 exempt function | on activities 🕨 🗦 | 3 |
| 2 | Enter the amount of the filing 527 exempt function activities | g organization's funds contributed to other is | organizations for sec | ction ► \$ | 3 |
| 3 | Total exempt function expen line 17b | ditures Add lines 1 and 2 Enter here and | I on Form 1120-POL, | ► \$ | |
| 4 | Did the filing organization file | e Form 1120-POL for this year? | | | Yes X No |
| 5 | organization made payments amount of political contribution | and employer identification number (EIN) s. For each organization listed, enter the a s received that were promptly and directly de il action committee (PAC). If additional sp | mount paid from the livered to a separate po | filing organization's fun olitical organization, such | which the filing ds. Also enter the as a separate |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds If none, enter 0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter 0- |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | _ |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| BAA | For Paperwork Reduction Act | Notice, see the Instructions for Form 990 or | 990-EZ. | Schedule C (Fo | rm 990 or 990-EZ) 2018 |

| Part/II-A Complete if section 501(| | on is exempt under s | ection 501(c)(3) and | d filed Form 5768 (| election_under |
|--|----------------------------------|---|---------------------------------------|----------------------------------|-----------------------------|
| | <u>`</u> | ngs to an affiliated group (ar | d list in Part IV each affil | iated group member's nar | né, |
| | | nd share of excess lobbying | | | , |
| | | ecked box A and 'limited o | | | |
| . The term | Limits on Lobb | ying Expenditures ans amounts paid or incu | rred.) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1 a Total lobbying expendit | <u> </u> | | | | |
| b Total lobbying expendit | | | | | _ |
| c Total lobbying expendit | | | · · · · · · · · · · · · · · · · · · · | | |
| d Other exempt purpose | • | • | | | |
| e Total exempt purpose e | expenditures (add l | nes 1c and 1d) | | | 1 |
| f Lobbying nontaxable ar | nount Enter the ar | nount from the following t | able in | | |
| If the amount on line 1e, col | umn (a) or (b) is | The lobbying nontaxable | e amount is | 秋色点型下层层 | |
| Not over \$500,000 | | 20% of the amount on line 1e | | | |
| Over \$500,000 but not over \$1 | ,000,000 | \$100,000 plus 15% of the exces | s over \$500,000 | | |
| Over \$1,000,000 but not over \$ | 1,500,000 | \$175,000 plus 10% of the exces | s over \$1,000,000 | | |
| Over \$1,500,000 but not over \$ | 17,000,000 | \$225,000 plus 5% of the excess | over \$1,500,000 | | |
| Over \$17,000,000 | | \$1,000,000. | | 可以明明 明明 明明 | 於 於 學學學 後以 |
| g Grassroots nontaxable | | | | | |
| h Subtract line 1g from lir | | | | | |
| i Subtract line 1f from lin | e 1c If zero or les | s, enter -0- | | | |
| If there is an amount other section 4911 tax for this | er than zero on eithe s year? | r line 1h or line 1i, did the o | rganization file Form 4720 | reporting | Yes No |
| (Som | | 4-Year Averaging Period at made a section 501(h) elow. See the separate ins | election do not have to | | |
| | Lob | bying Expenditures Durin | g 4-Year Averaging Per | iod | |
| 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 | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f Grassroots lobbying expenditures | | | | | |
| ВАА | | | | Schedule C (Foi | m 990 or 990-EZ) 2018 |

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)). | | | | | |
|---|----------|-----|-----|-------|------|
| For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity | | (a) | | (b) | |
| | | No | Ar | nount | |
| 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? | | | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | | |
| i Other activities? | | | | | |
| j Total Add lines 1c through 1: | | • | | | |
| 2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | 1 | ` [| - : | , , | ٠. , |
| b If 'Yes,' enter the amount of any tax incurred under section 4912 | 1 | | | | |
| c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 | | | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | 1 1 | ſ | • • | ` | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6). | 1(c)(5), | or | | | |
| | | | | Yes | No |
| 1. Were substantially all (90% or more) dues received nondeductible by members? | | | 1 | | > |

| | | | Yes | No |
|---|---|---|-----|----|
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | 1 | | X |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | X | |
| 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 | 7 | |
|--|-----|--------------|
| Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | |
| a Current year | 2 a | |
| b Carryover from last year | 2 b | |
| c 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

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

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

| | CUSTOM AUTOMOTIVE NETWORK, | INC. | 52-1086811 |
|----|---|---|--|
| Pa | rt Organizations Maintaining Dono | r Advised Funds or Other Similar Funds | |
| - | Complete if the organization answ | 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 | or advisors in writing that the assets held in donor organization's exclusive legal control? | advised funds Yes No |
| 6 | Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit? | rs, and donor advisors in writing that grant funds ca of the donor or donor advisor, or for any other pur | an be used only pose conferring Yes No |
| Pa | rt II. Conservation Easements. | | |
| | | wered 'Yes' on Form 990, Part IV, line 7. | |
| 1 | | | |
| | Preservation of land for public use (e.g., re | ecreation or education) Preservation of a l | historically important land area |
| | Protection of natural habitat | Preservation of a | certified historic structure |
| | Preservation of open space | | |
| 2 | | eld a qualified conservation contribution in the form of | a conservation easement on the |
| | last day of the tax year | _ | Hold at the End of the Tay Year |
| | | - | Tield at the Lind of the Tax Teal |
| | a Total number of conservation easements | | 2a |
| | b Total acreage restricted by conservation easer | | 2 b |
| | c Number of conservation easements on a certif | | 2 c |
| | structure listed in the National Register | n (c) acquired after 7/25/06, and not on a historic | 2 d |
| 3 | Number of conservation easements modified, tran tax year ► | sferred, released, extinguished, or terminated by the or | rganization during the |
| 4 | Number of states where property subject to conse | rvation easement is located > | |
| 5 | Does the organization have a written policy reg | garding the periodic monitoring, inspection, handlin | |
| | and enforcement of the conservation easemen | | ∐Yes ∐ No |
| 6 | Staff and volunteer hours devoted to monitoring, ii | nspecting, handling of violations, and enforcing conserv | vation easements during the year |
| 7 | Amount of expenses incurred in monitoring, inspe ►\$ | cting, handling of violations, and enforcing conservation | n easements during the year |
| 8 | Does each conservation easement reported or and section $170(h)(4)(B)(ii)^{9}$ | line 2(d) above satisfy the requirements of section | n 170(h)(4)(B)(i) Yes No |
| 9 | In Part XIII, describe how the organization reports include, if applicable, the text of the footnote t conservation easements | conservation easements in its revenue and expense st o the organization's financial statements that descr | tatement, and balance sheet, and ribes the organization's accounting for |
| Pa | HIII Organizations Maintaining College | ctions of Art, Historical Treasures, or Othwered 'Yes' on Form 990, Part IV, line 8. | her Similar Assets. |
| 1 | a If the organization elected, as permitted under | SFAS 116 (ASC 958), not to report in its revenue | statement and balance sheet works of |
| | 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 further cial statements that describes these items. | rance of public service, provide, |
| | b If 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 state or public exhibition, education, or research in furtherance | ement and balance sheet works of art, se 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 | istorical treasures, or other similar assets for financial (116 (ASC 958) relating to these items | gain, provide the following |
| | a Revenue included on Form 990, Part VIII, line | 1 | * \$ |
| | b Assets included in Form 990, Part X | | ► \$ |

| Schedule D (Form 990) 2018 CUST | OM AUTOMO | TIVE | NETWORK, | INC | | _ | 52-108 | 86811 | | Page 2 |
|--|-------------------------|----------------|-----------------------------|--------|----------------------------------|----------------|-------------------------|------------|-----------|--------|
| Part III Organizations Mainta | ining Colle | ctions | of Art, Hist | orica | d Treasures, c | or Oth | er Similar Ass | sets (d | continu | ıed) |
| 3 Using the organization's acquisition items (check all that apply) | i, accession, a | nd other | , | | | | nificant use of its | collection | on | |
| a Public exhibition | | | ├ | | change programs | 5 | | | | |
| b Scholarly research | | | e [] Othei | ſ | | | · · · | | | |
| c Preservation for future gener | | | | | | | | | | |
| 4 Provide a description of the organize Part XIII 5 During the year, did the organization | | | · | - | - | | | _ | | |
| to be sold to raise funds rather the | han to be mai | ntained | as part of the | organ | zation's collection | n? | | Yes | | No |
| Part IV Escrow and Custodia line 9, or reported an | I Arrangem amount on | rents. Form | Complete if 990, Part X, | the c | organization ar 21. | nswere | ed 'Yes' on Fo | orm 99 | 00, Pai | t IV, |
| 1 a Is the organization an agent, trus on Form 990, Part X? b If 'Yes,' explain the arrangement | | | | | | her ass | ets not included | Yes | ; [| No |
| bili res, explain the arrangement | . III Fall Alli a | na com | piete the lollow | ing ta | bie | | | Amour | ·+ | |
| c Beginning balance | | | | | | - | 1 c | AHIOUI | | |
| d Additions during the year | | | | | | | l d | · | | |
| e Distributions during the year | | | | | | | l e | | | |
| f Ending balance | | | | | | _ | · · | | _ | |
| 2 a Did the organization include an a | amount on For | m 990. | Part X. line 21. | for e | scrow or custodia | | | Yes | | No |
| b If 'Yes,' explain the arrangement | | | | | | | | | | |
| Part V Endowment Funds. C | omplete if | the ord | anization ar | iswe | red 'Yes' on F | orm 9 | 90, Part IV, Iir | ne 10 | | |
| | (a) Current | | (b) Prior yea | | (c) Two years bac | | d) Three years back | | Four year | s back |
| 1 a 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 | | | | | | | | | | |
| Provide the estimated percentage | e of the currer | nt year e | | ne 1g, | column (a)) held | l as | | | | |
| a Board designated or quasi-endowm | | | % | | | | | | | |
| b Permanent endowment ► | % | | | | | | | | | |
| c Temporarily restricted endowmer | | | _% | | | | | | | |
| The percentages on lines 2a, 2b, ar | nd 2c should ed | qual 100' | % | | | | | | | |
| 3 a Are there endowment funds not in to organization by | he possession | of the or | ganization that a | are he | ld and administere | d for the | • | 1 | Yes | No |
| (i) unrelated organizations | | | | | | | | 3a(i) | | |
| (ii) related organizations | | | | | | | | 3a(ii) | | |
| b If 'Yes' on line 3a(ii), are the rela | ited organizat | ions liste | ed as required | on Sc | hedule R? | | | 3b | | |
| 4 Describe in Part XIII the intended | duses of the o | organiza | ition's endowm | ent fu | nds | | | | | |
| Part VI Land, Buildings, and | | | | | | | | | | |
| Complete if the organi | ization ansv | wered | 'Yes' on For | m 99 | 0, Part IV, line | e 11a. | See Form 99 | 0, Par | t X, III | те 10. |
| Description of property | | | or other basis vestment) | |) Cost or other basis (other) | d | Accumulated epreciation | (d) | Book va | lue |
| 1 a Land | | | | | | 1.44.6 | 2. 特権で会議。 | | | |
| b Buildings. | Ī | | | | | | | | | |
| c Leasehold improvements. | Ī | | | | | | | | | |
| d Equipment | Ī | | | | 6,313. | | 3,999. | | 2 | , 314. |
| e Other | | | | | | | | | | |
| Total. Add lines 1a through 1e (Column | ın (d) must eç | ual Fori | n 990, Part X, | colum | n (B), line 10c) | | > | | 2. | , 314. |

BAA

2,314. Schedule D (Form 990) 2018

| | (b) Book value | 00, Part_IV, line 1.1b. See Form-990, Part_X, line (c) Method of valuation Cost or end-of-year market value | 12 |
|--|--------------------------|---|---|
| (a) Description of security or category (including name of security) | (b) Book value | (C) Welliou of Valuation Cost of end-of-year market value | |
| (1) Financial derivatives | | | |
| (2) Closely-held equity interests | ļ | | <u>-</u> _ |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) (E) | | | |
| | | | |
| (F) (G) | | | |
| (H) | | | |
| (1) | | | _ |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 12 | | 大学的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人 | * 461 |
| Part VIII Investments — Program Related. | | N/A | -54 |
| Complete if the organization answered | l 'Yes' on Form 99 | 0, 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 valu | e_ |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| (10) | · | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13) | | 一个人的 "我们是我们的一个人的一个人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人 | 14.5 |
| Part IX Other Assets. | N/A 'Yes' on Form 990 |) 0, Part IV, line 11d. See Form 990, Part X, line 1 | 15 |
| | scription | (b) Book value | <u> </u> |
| (1) | <u> </u> | | |
| (2) | | | |
| (2) | | | |
| (3) | | | |
| (3) (4) | | | |
| (3) (4) (5) | | | |
| (3) (4) (5) (6) | | | |
| (3) (4) (5) (6) (7) | | | |
| (3) (4) (5) (6) (7) (8) | | | |
| (3) (4) (5) (6) (7) (8) (9) | | | |
| (3) (4) (5) (6) (7) (8) (9) (10) | 3) line 15) | > | |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) | 3) line 15) | > | |
| (3) (4) (5) (6) (7) (8) (9) (10) | | | |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. | | 1e or 11f. See Form 990, Part X, line 25. | |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on Figure 1.00 (a) Description of liability (1) Federal income taxes | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | Service of |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on Figure (a) Description of liability (1) Federal income taxes (2) (3) (4) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | できるのかできるというという |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | できるかられているというと |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | できるのではそのできるというというというというというというというというというというというというというと |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on Fi (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | これではないのできない。 とうこう |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | こうできるからないできない。 こうこう はんしょう こうしょう |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | これであるというというというというというというというというというというというというというと |
| (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) | orm 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25. | いているのかにないましたがあるというというというというというというというというというというというというというと |

| . | | | | | |
|------------------|-----------|--------|------------|----------|-----|
| Schedule D (Form | 990) 2018 | CUSTOM | AUTOMOTIVE | NETWORK, | INC |

52-1086811

Page 4

| ochedale D (1 drift 350) 2010 COSTOM AUTOMOTIVE NEIWORK, INC. | | 32 1000011 1 age 4 |
|---|------------------------|--------------------|
| Part XI Reconciliation of Revenue per Audited Financial Statement | ents With Revenue per | Return. N/A |
| 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 |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| a Net unrealized gains (losses) on investments | 2 a | l' l |
| b Donated services and use of facilities | 2 b | |
| c Recoveries of prior year grants | 2c | |
| d Other (Describe in Part XIII) | 2 d | 7 '. |
| 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 | | 4 c |
| 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 | ') | 5 |
| Part XII Reconciliation of Expenses per Audited Financial Statem | nents With Expenses pe | er Return. N/A |
| Complete if the organization answered 'Yes' on Form 990, | , Part IV, line 12a. | |
| Total expenses and losses per audited financial statements | | 1 |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| a Donated services and use of facilities | 2 a | |
| b Prior year adjustments | 2 b | |
| c Other losses | 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 IX, line 25, but not on line 1 | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | <u> </u> |
| b Other (Describe in Part XIII) | 4 b | |
| c Add lines 4a and 4b | 2. | 4c |
| 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 | 3) | 5 |
| 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 - FIN 48 FOOTNOTE

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

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 1

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.

OMB No 1545 0047

2018

Open to Public

Name of the organization

CUSTOM AUTOMOTIVE NETWORK, INC.

52-1086811

Employer identification number

| Part | I Questions Regarding Compensation | | | | |
|------------|---|---|--|---------------|--|
| <u> </u> | | | | Yes | No |
| 1 a (| Check the appropriate box(es) if the organization provided an VII, Section A, line 1a Complete Part III to provide any r | ny of the following to or for a person listed on Form 990, Part relevant information regarding these items | | 2.73 | |
| | First-class or charter travel | Housing allowance or residence for personal use | 7 2. S. | *** | 1 |
| | Travel for companions | Payments for business use of personal residence | 45 m | £ \$ \$ \$ | 19.75 |
| | Tax indemnification and gross-up payments | Health or social club dues or initiation fees | 1 m | 35 | 1 45 |
| | Discretionary spending account | Personal services (such as maid, chauffeur, chef) | 1.54 | \$ 100 mg | \$1°C. |
| | f any of the boxes on line 1a are checked, did the organization from the expenses described the expenses described. | | 1 b | y Ergy | 2 |
| | Did the organization require substantiation prior to reimbi rustees, and officers, including the CEO/Executive Direct | | 2. | (B) | 14. K. 2 |
| (| ndicate which, if any, of the following the filing organization L CEO/Executive Director Check all that apply Do not che establish compensation of the CEO/Executive Director, bi | ck any boxes for methods used by a related organization to | 1) 25 / 10 / 10 / 10 / 10 / 10 / 10 / 10 / 1 | | |
| | Compensation committee | Written employment contract | | 3, 3, 3,77 | 35 |
| | Independent compensation consultant | Compensation survey or study | | 1200 | 3 |
| | Form 990 of other organizations | $\overline{\mathrm{X}}$ Approval by the board or compensation committee | 1,57 | 100 CC | 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 4 [| During the year, did any person listed on Form 990, Part organization or a related organization | VII, Section A, line 1a, with respect to the filing | | | |
| a F | Receive a severance payment or change-of-control paym | ent? | 4 a | | Χ |
| | Participate in, or receive payment from, a supplemental r | · | 4 b | | X |
| | Participate in, or receive payment from, an equity-based | | 4 c | | X |
| l | f 'Yes' to any of lines 4a-c, list the persons and provide t | the applicable amounts for each item in Part III | | | 18 W.B. |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organiza | | 5 | 10,000 | 왕) 소 (소설) |
| 5 F | For persons listed on Form 990, Part VII, Section A, line 1a, contingent on the revenues of | did the organization pay or accrue any compensation | 10 mm | \$300 |) |
| | The organization? | | 5 a | | <u> </u> |
| | Any related organization? | | 5 b | | <u></u> |
| ١ | f 'Yes' on line 5a or 5b, describe in Part III | | \$33 | | |
| 6 F | For persons listed on Form 990, Part VII, Section A, line 1a, contingent on the net earnings of | did the organization pay or accrue any compensation | | 13 | |
| a | The organization? | | 6 a | `~~ | M 24 0 21 |
| b/ | Any related organization? | | 6 b | | |
| 1 | f 'Yes' on line 6a or 6b, describe in Part III | | 1 , 12 . 2 . 1 2 . 4 . 1 | ().E. | 17. |
| 7 F | For persons listed on Form 990, Part VII, Section A, line payments not described on lines 5 and 67 If 'Yes,' describ | 1a, did the organization provide any nonfixed be in Part III | 7 | , | |
| t | Nere any amounts reported on Form 990, Part VII, paid on the initial contract exception described in Regulations of 'Yes,' describe in Part III | | 8 | | |
| 9 I | f 'Yes' on line 8, did the organization also follow the rebuttable | le presumption procedure described in Regulations | 9 | | |

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

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018 CUSTOM AUTOMOTIVE NETWORK, INC.

| Partil | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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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)(i)-(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 | Breakdown of W-2 and/or 1099-MISC compensation | Compensation | 100000000000000000000000000000000000000 | | , | |
|--------------------|------------|------------------------------------|--|---|---|---|--|---|
| (A) Name and Title | | () Base compensation | (II) Bonus & incentive compensation | (iii) Other reportable compensation | and other deferred compensation | (b) Nontaxable benefits | (c) lotal of columns(B)(i)-(D) | (r) Compensation in column (B) reported as deferred 5n prior Form 990 |
| TRACIE NUNEZ | ⊜⊜ | 216,370 | 0 - | 0 0 | .0 | 0 - 0 - 0 | -216,370. | |
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| 13 | (E) | | | | | | | |
| 14 | (1) | | | | | | 1 1 1 1 1 1 1 | |
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| ВАА | | | TEEA4102L 10/29/18 | 81 | | | Schedule. | Schedule J (Form 990) 2018 |

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Pattills, Supplemental Information

Schedule J (Form 990) 2018

CUSTOM AUTOMOTIVE NETWORK, INC.

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.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

52-1086811

CUSTOM AUTOMOTIVE NETWORK, INC.

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