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

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

Open to Public Inspection

Department of the Treasury internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

A	For t	ne 2020 calendar year, or tax year beginning ar	nd ending		
В	Check applica	if ble: C Name of organization		D Employer identif	ication number
	cha				
_	Nan cha	pge Doing business as		52-15962	259
L	Initi	m Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	======================================
L	Fina retu tern	m/ 3939 Felider Drive	200	703-273-	-8829
_	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,988,882.
Ļ	iretu			H(a) Is this a group r	return
	tion	F Name and address of principal officer: Ms. Lisa Whetzel		for subordinate	
		same as C above		H(b) Are all subordinates	included? Yes No
		xempt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 527	If "No," attach a	a list. See instructions
		ite: ▶ britepaths.org		H(c) Group exemption	
		of organization: X Corporation Trust Association Other	∟ Year	of formation: 1989 i	M State of legal domicile; VA
P	$\overline{}$	Summary		-	
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: $\underline{\text{See}}$	last p	aragraph of	Schedule
ř	2	Check this box if the organization discontinued its operations or disp	osed of more	than 25% of its net a	ssets
Ŏ O	3			3	14
න	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
es	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)		5	29
Σį	6	Total number of volunteers (estimate if necessary)		6	362
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	ŀ	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
	1			Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		1,400,076.	2,987,051.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
Ŗ.	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		64.	1,831.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
-	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,400,140.	2,988,882.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		333,442.	1,500,866.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	828,978.	909,041.
ë	168	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 189,2		0.	0.
ă	_ b	Total fundraising expenses (Part IX, column (D), line 25)	247.	0.45 0.56	
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		245,276.	226,506.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,407,696.	2,636,413.
SE	19	Revenue less expenses. Subtract line 18 from line 12		-7,556.	352,469.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Be	ginning of Current Year	End of Year
Ass Bal	21	Total liabilities (Part X, line 26)		476,014. 67,069.	1,028,493.
Net	22	Net assets or fund balances. Subtract line 21 from line 20	·······	408,945.	761,414.
	art II			400,943.	701,414.
Und	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedul	les and stateme	ents and to the hest of m	knowledge and belief it is
true,	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of v	vhich preparer	has any knowledge	y Knowicage and Deliei, It is
		Stallm	vineir properti	las dily knowledge	12
Sig	n	Signature of officer		Date	2021
Her	e	Ed Moore, Treasurer			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature.	0 0	ate Check	PTIN
Paid		Print/Type preparer's name Bernard M. Gordon Preparer's signature Second M. Sordon	SON 6	-28-2021 if self-employed	P01387337
-	arer	Firm's name Bernard M. Gordon, CPA, PLC			02-0789484
Use	Only	Firm's address 9010 Stoneleigh Court			
_		Fairfax, VA 22031		Рһопе по. 7 0	3-472-1503
May	the I	RS discuss this return with the preparer shown above? See instructions			X Yes No

Form **990** (2020)

2,230,733.

Total program service expenses

563,862 including grants of \$

267,953.) (Revenue \$

Form 990 (2020) Britepaths, Inc. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
2	If "Yes," complete Schedule A	1	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2	Х	-
•	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	-	X
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		X
•	the environment, historic land areas, or historic atrustures? If "Van " complete Schodule D. Bort II			x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7		
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	Ť		_
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	Ů		_
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X	14.0		
_	as applicable.		1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	X	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X_
e f	The state of the state of the madified in that A, line 23? If the state of the stat	11e	X	
'	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			77
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	\rightarrow	<u>X</u>
	Schedule D, Parts XI and XII	12a	х	
þ	was the organization included in consolidated, independent audited financial statements for the tax year?			
40	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 b	Did the organization maintain an office, employees, or agents outside of the United States?	14a	\rightarrow	<u>X</u>
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170	\neg	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.			v
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	-	<u>X</u>
	and 8a? If "Yes," complete Schedule G, Part II	18		X
19	bid the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		\neg	
_	complete Schedule G, Part III	19		<u>X</u>
20a	bid the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b 2₁	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	.		v
032003	12-23-20	21	200 (X

Form 990 (2020) Britepaths, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	_		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
248	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
	bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
,	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		
25:	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
200	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		X
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
				х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b	-	
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	0.0		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		K E	
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?/f			
	"Yes," complete Schedule L, Part IV	28c		X
29	the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	bid the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
00	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
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			
350	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	_	<u>X</u>
		35a	_	X
~	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	l I		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
-	If "Yes," complete Schedule R, Part V, line 2			х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31	_	<u>~</u>
	Note: All Form 990 filers are required to complete Schedule O	38	x	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	00		_
	Check if Schedule O contains a response or note to any line in this Part V		ſ	
		T	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
þ	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			
_	(gambling) winnings to prize winners?	1c	Х	
032004	12-23-20	Form \$	90 (2	020)

Pa	irt V Statements Regarding Other IRS Filings and Tax Compliance (continued	32 13)\ f)	,233		age •	
	- January Printers	7		Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	Î I		163	INC	
	filed for the calendar year ending with or within the year covered by this return	2a 29	3		18	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax ret	urns?	2b	Х		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	nel	20			
3a	Did the organization have unrelated business gross income of \$1,000 as more dustrial to the control of the cont		3a		x	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedul	le ()	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or othe	r authority over a	OD.			
	financial account in a foreign country (such as a bank account, securities account, or other financial	l account/2	4a		x	
b	If "Yes," enter the name of the foreign country		70			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts (FRAR)		-		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Accounts (i DAiry.	5a		x	
b		action?	5b		X	
C		action?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the organization collect	30			
	any contributions that were not tax deductible as charitable contributions?	the organization solicit	6.		x	
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions or diffe	6a			
	were not tax deductible?		Oh.			
7	Organizations that may receive deductible contributions under section 170(c).		6b			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	Provided to the navor?	7-	- 51	X	
b	If "Voc " did the examination matified by description of the second seco		7a 7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	ugo roquirod	70	-	_	
	to file Form 8282?	vas requireu			Х	
d	If IVon I indicate the more bound of the company of		7c		Α	
е						
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?					
g						
h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintainer	d by the	7h			
	Sponsoring organization have excess business holdings at any time during the cond		8			
9	Sponsoring organizations maintaining donor advised funds.	***************************************				
а	Did the enoncoring organization make any toughts distributions to the special state of the sp		9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	•••••••	9b			
10	Section 501(c)(7) organizations. Enter:	***************************************				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	18	1.18		
11	Section 501(c)(12) organizations. Enter:		7.19	45		
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			T.	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state?	ľ	13a			
	Note: See the instructions for additional information the organization must report on Schedule O.				1,5	
b	Enter the amount of reserves the organization is required to maintain by the states in which the			7.1		
	organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indeed to be indeed to b		14a		Х	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O	14b		_	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	eration or				
	excess parachute payment(s) during the year?		15		Х	
	If "Yes," see instructions and file Form 4720, Schedule N.				1	

X

If "Yes," complete Form 4720, Schedule O.

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Form 990 (2020) Britepaths, Inc. 52–1596259 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14		100	
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		
	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		1 1	
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	It "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			Ewi
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			100
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	33		
_	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Ms. Austin Cooper - 7032738829			
	3959 Pender Drive, Suite 200, Fairfax, VA 22030			

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

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

Check this box if neither the organization n	or any related	org	aniza	atior	n co	mpe	nsa	ted any current officer,	director, or trustee.	
(A)	(B)			(6	C)			(D)	(E)	(F)
Name and title	Average	(dc	not c	Pos	itior	า e than	one	Reportable	Reportable	Estimated
	hours per	box	c, unle	ss pe	erson	is bo	than one s both an compensation r/trustee) from		compensation	amount of
	week	-	Ter ar	Idat	T	Or/u us	stee		from related	other
	(list any hours for	irecto						the	organizations	compensation
	related	9 0.0	<u>s</u>			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	Laste	trus		93	E E		(VV-2/1099-WISC)		organization and related
	below	dualt	tiona		pley	ye St				organizations
	line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) Lisa Whetzel	35.00	Ī	-		Ť	1	Ë			
Executive Director				X				99,746.	0.	2,992.
(2) May Shallal	1.00									
President		X		X				0.	0.	0.
(3) Karen Rasmussen	1.00									
Vice President (Jan-May)		X		Х				0.	0.	0.
(4) Emily Barnes	1.00									
Vice President (Jun-Dec)		X		Х		Ш		0.	0.	0.
(5) Jennie DeVeaux	1.00									
Secretary (Jan-Feb)		X		Х				0.	0.	0.
(6) Sarah White	1.00									
Secretary (Mar-Dec)		X		X				0.	0.	0.
(7) Ed Moore	1.00									
Treasurer		X		X				0.	0.	0.
(8) Angie Delboy	1.00									
Director		Х						0.	0.	0.
(9) Karen Elliott	1.00									
Director		X						0.	0.	0.
(10) John McWilliams	1.00									
Director		X						0.	0.	0.
(11) Catherine Read	1.00									
Director		x						0.	0.	0.
(12) Dave Sands	1.00									
Director		x						0.	0.	0.
(13) Karen Wheeler	1.00									
Director		х						0.	0.	0.
(14) Dave Wiemer	1.00									
Director		х						0.	0.	0.
(15) Courtney Williams	1.00			\neg						
Director		X						0.	0.	0.
		_	_	_						
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			(2020) Britepaths,	Inc.			52-1596	259 Page 9
Pa	irt V	/11						
_		_	Check if Schedule O contains a response	or note to any i	ine in this Part VIII			L
					(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns 1a	10,885				
Contributions, Gifts, Grants and Other Similar Amounts	1		Membership dues 1b					
		C	Fundraising events1c		3/4 / / / / /			
ā G	1		Related organizations 1d				1.1	
Si.		е	Government grants (contributions) 1e 1,	,682,587		A - A		
를 가 S		f	All other contributions, gifts, grants, and				To State	
ĒĚ			similar amounts not included above 1f 1,	,293,579				
ğ	1	g	Noncash contributions included in lines 1a-1f 1g \$	31,342				
<u>8 0</u>	_	h	Total. Add lines 1a-1f		2,987,051.			
				Business Code				
9	2	а						
er V		b						
n Si		C	<u> </u>					
Zev Sev	'	d						
Program Service Revenue	'	е	0					
<u>α</u>	1	f						
_		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, inter-					
			other similar amounts)		1,831.			1,831.
	4		Income from investment of tax-exempt bond p					
	5		Royalties					
			(i) Real	(ii) Personal				
			Gross rents 6a		- 1			
			Less: rental expenses 6b			LA HARANA		
			Rental income or (loss) 6c	L				
	1		Net rental income or (loss)					
	7 :	а	Gross amount from sales of (i) Securities	(ii) Other				
	Ι.		assets other than inventory 7a		1 8 1	N. T. Control		
ø	'	D	Less: cost or other basis					
Revenue	١.	_	and sales expenses					
ě			Gain or (loss) 7c					
ja H			Net gain or (loss) Gross income from fundraising events (not	>				
Oth	0 6	a	- ,					
•			including \$ of contributions reported on line 1c). See					
			Part IV, line 18 8a		PART ILLE			
		h	Less: direct expenses 8b				- 57 / 1- 1-	
			Net income or (loss) from fundraising events	-				
			Gross income from gaming activities. See					
			Part IV, line 19 9a		1000			
	k	b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities	▶				
			Gross sales of inventory, less returns					
			and allowances 10a					
	Ł	b	Less: cost of goods sold 10b					
			Net income or (loss) from sales of inventory					
တ္				Business Code				
Miscellaneous Revenue	11 a	a						
en j	Ł	b						
€ ge		C	·					
Μis			All other revenue					
		<u>e</u>	Total. Add lines 11a-11d		2 222			
	12		Total revenue. See instructions		2,988,882.	0.	0.	1,831.

Form 990 (2020) Britepaths, Inc. 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).

Do	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,500,866.	1,500,866.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	103,903.	87,505.	7,378.	9,020
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		0.7000	7,0101	3,020
7	Other salaries and wages	714,119.	342,266.	269,045.	102,808
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	17,597.		17,597.	·
9	Other employee benefits	14,260.		14,260.	
10	Payroll taxes	59,162.	31,082.	19,992.	8,088
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	13,000.		13,000.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)	7,938.	7,938.		
12	Advertising and promotion	1,899.	1,899.		=
13		15,884.	1,802.	10,915.	3,167
14	Office expenses Information technology	17,853.	2,410.	15,443.	3,107
15		17,055.	2,410.	13,443.	
16	Royalties	72,659.		72,659.	
17	Occupancy	464.	448.	12,000.	16.
18	Payments of travel or entertainment expenses	#04.	440.		10.
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,199.	266.	596.	337.
20	Interest				
21	Payments to affiliates	21,980.		21 000	
22 23	Depreciation, depletion, and amortization	9,222.		21,980.	
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	7,222		3,222.	
а	Dues and subscriptions	15,106.	2,936.	10,840.	1,330.
b	Postage and shipping	6,765.	3,614.	1,866.	1,285.
c	Staff training/seminars	767.	541.	226.	
d	Allocate indirect exp.	0.	240,617.	-303,227.	62,610.
e	All other expenses	41,770.	6,543.	34,641.	586.
25	Total functional expenses. Add lines 1 through 24e	2,636,413.	2,230,733.	216,433.	189,247.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or no	to to any		(A)	T	(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			234,926.	1	354,631
	2	Savings and temporary cash investments		2	434,213		
	3	Pledges and grants receivable, net	154,221.	3	135,045		
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se perso	ns		5	
	6	Loans and other receivables from other disqua	ified pers	ons (as defined			
		under section 4958(f)(1)), and persons describe		6			
ş	7	Notes and loans receivable, net	4,502.	7	14,556		
Assets	8	Inventories for sale or use	7,362.	8			
⋖	9	B 11			12,427.	9	21,384
	10a	Land, buildings, and equipment: cost or other	1 1				
		basis. Complete Part VI of Schedule D	10a	86,280.			
	b	Less: accumulated depreciation		56,791.	40,960.	10c	29,489
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			3,850.	14	2,101
	15	Other assets. See Part IV, line 11	17,766.	15	37,074		
	16	Total assets. Add lines 1 through 15 (must equ	476,014.	16	1,028,493		
	17	Accounts payable and accrued expenses		32,464.	17	75,886	
	18	Grants payable		18			
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete	Part IV o	Schedule D		21	
ß	22	Loans and other payables to any current or form	ner office	r, director,			
		trustee, key employee, creator or founder, subs	tantial co	ntributor, or 35%			
Liabilities		controlled entity or family member of any of the	se perso	ns		22	
1	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate	d third p	arties		24	160,000.
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24).	Complete Part X			
		of Schedule D	34,605.	25	31,193.		
	26	Total liabilities. Add lines 17 through 25			67,069.	26	267,079.
,		Organizations that follow FASB ASC 958, che	ck here	► X			
Net Assets of Fund Balances		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27	Net assets without donor restrictions	378,945.	27	761,414.		
<u> </u>	28	Net assets with donor restrictions	30,000.	28	0.		
		Organizations that do not follow FASB ASC 9	58, chec	k here 🕨 📖			
		and complete lines 29 through 33.					
3	29	Capital stock or trust principal, or current funds				29	
000	30	Paid-in or capital surplus, or land, building, or ed				30	
ا ځ	31	Retained earnings, endowment, accumulated in				31	
	32	Total net assets or fund balances			408,945.	32	761,414.
- 1	33	Total liabilities and net assets/fund balances			476,014.	33	1,028,493.

Form **990** (2020)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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

3h

Form 990 (2020)