Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the	2020 calend	dar year, or tax year beginning 1 January , 2020, and ending 31 D	ecember	, 20 20
В	Check if	applicable:	C Name of organization Open Research Institute, Inc.	D Emp	oyer identification number
	Address	change	Doing business as Open Research Institute, Inc.		82-3945232
$\overline{\Box}$	Name cl	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telep	hone number
\Box	Initial ref		#1873 3525 Del Mar Heights Road		858 350 7579
\Box	Final retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code		
\Box		ed return	San Diego, CA, USA, 92130	G Gross	s receipts \$
		ion pending			or subordinates? Yes Vo
	пррпоц				tes included? Yes No
$\overline{}$	Tax-exe	mpt status:			ist. See instructions
<u></u>				p exemption	
		organization:			
	art	<u> </u>	2010	M State	of legal domicile: CA
		Summa			A Commission of the commission
0	1		cribe the organization's mission or most significant activities: Open Research Inst		
20			oment organization which provides all of its work to the general public under the prin		
rna			Research. Scientific and engineering focus is digital communications for amateur rad		
Š	2		box ▶ ☐ if the organization discontinued its operations or disposed of more that	100	its net assets.
တိ	3		voting members of the governing body (Part VI, line 1a).		5
oŏ W	4		independent voting members of the governing body (Part VI, line 1b)	. 4	5
tie	5	Total numb	per of individuals employed in calendar year 2020 (Part V, line 2a)	. 5	0
Activities & Governance	6	Total numb	per of volunteers (estimate if necessary)	. 6	185
A	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12	. 7a	0
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11	. 7b	0
			Prior Y	ear	Current Year
a)	8	Contributio	ns and grants (Part VIII, line 1h) .	0	565932
u	9		ervice revenue (Part VIII, line 2g)	0	
Revenue	10	_	income (Part VIII, column (A), lines 3, 4, and 7d)	0	
ď	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	
	12		ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0	
_	13		similar amounts paid (Part IX, column (A), lines 1–3) .	0	
	14		aid to or for members (Part IX, column (A), line 4)	0	
	15		ner compensation, employee benefits (Part IX, column (A), lines 5–10)	0	
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)		
- G				0	0
X	17b		aising expenses (Part IX, column (D), line 25)	7	
	17		nses (Part IX, column (A), lines 11a–11d, 11f–24e)	0	
	18	•	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)	0	126183
. 0	19	Revenue le	ss expenses. Subtract line 18 from line 12 , , , , , , ,		596267
ts or		-	Beginning of C		End of Year
Net Assets Fund Baland	20		s (Part X, line 16)	13417	689403
et A	21		ties (Part X, line 26)	0	0
	22		or fund balances. Subtract line 21 from line 20	13417	689403
Pa	art II	Signatu	re Block		
			I declare that I have examined this return, including accompanying schedules and statements, and to e. Declaration of preparer (other than officer) is based on all information of which preparer has any know		my knowledge and belief, it is
_		m	ich an thomason		
Sig	an	Signatu	rre of officer D	ate	
He		m	ichelle Thompson CEO	13m	ay 2021
		Type o	reprint name and title		72021
	W		preparer's signature Date	Classel	if PTIN
Pa			- Toparor o digitatoro	Check self-em	200
	epare	Cincele man		_	
Us	e Onl	Firm's nan		m's EIN ▶	
Ma	v the IE	Firm's add	his return with the preparer shown above? See instructions	one no.	. Yes No
ivid	v uic ir	I GENJEIN CI	mo retain with the preparet shown above; declinativelions	and the last of	

Part	
-	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	ORI is a research institute that shares all of its work with the general public at no cost.
	ORI's primary mission is to provide open source designs and equipment for broadband digital microwave multiplexing radios suitable
	for both space and terrestrial use. These radios are intended for the amateur radio and amateur radio satellite communications
-	services. These services are established by the International Telecommunication Union (ITU) and regulated by national governments.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 79968 including grants of \$ 0) (Revenue \$)
	The largest program service as measured by expense was the Phase 4 Digital Multiplexing Transponder, or P4DX. Expenses for 2020
	were for laboratory and test equipment, software licenses for required toolchains, and legal expenses for two regulatory filings.
	Expenses were required to commence design, documentation, test, validation, verification, and hardware and software builds.
	Program activity is engaged in the design of open source radio equipment used to transmit and receive advanced digital waveforms.
	This radio design uses adaptive coding and modulation, software-defined radio, and optimal forward error correction coding.
	The design is available to the general public at no cost. All work is published as it is created, for learning, modification, and re-use.
	Regulatory filings included the following:
	A commodity classification request, submitted to the US Department of Commerce. (EAR) Request was successful.
	An advisory opinion request, submitted to the US Department of Commerce. Opinion currently being written.
	These filings produced explicit rullings related to the use of public-domain carve-outs in ITAR and EAR, which allow
	open source satellite work, including techincal education activities for the general public, to proceed with increased confidence.
4b	(Code:) (Expenses \$ 40,763 including grants of \$ 0) (Revenue \$ 156474)
	The second largest program service as measured by expense was GNU Radio Conference 2020. Expenses were for the
	internet technology and audio-visual services required to stream the 5-day event over the Internet, the creation of a full
	set of recordings available to the general public at no cost, a conference paper submission service, and a conference
	schedule creation and management service. The GNU Radio Conference is an annual event that gathers people from around
	the world. The participants at the conference include commercial, industrial, military, academic, amateur, and hobbyist developers.
	There are four full days of presentations and a day of open meetings with core developers. GNU Radio is the most important
	digital signal processing software framework available. It is entirely open source and is used to advance the state of the art
	of software-defined radios. The continued health and development of GNU Radio is central to ORI's research and development.
40	(Code) \(\frac{1}{2}\)\(\frac{1}{2}\
4c	(Code:) (Expenses \$ 4150 including grants of \$) (Revenue \$)
	The third largest program service as measured by expense was ITAR and EAR Strategy.
	Expenses were for legal work in support of a detailed regulatory filing to take advantage of public domain carve-outs in the International Traffic in Arms Regulations and Export Administration Regulations.
	The filing was successful. Most of the expenses were taken in 2019, but there were some expenses in 2020. This work provided the basis for the successful Commodity Classification Request to the US Department of Commerce
	and the ongoing work to craft an advisory opinion letter about open source satellite work being free from EAR.
4d	Other program services (Describe on Schedule O.)
4-	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 124881

124881

Part	IV Checklist of Required Schedules		· ·	
	Is the experience described in section EQ1(a)(2) or 4047(a)(1) (ather than a private foundation)? If "Vec."		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	1	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
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		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
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	11c		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		/
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		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		1
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		1
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		1
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1

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		1
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		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
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		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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		1
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		1
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		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	1	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			13781
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1	Milit	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	DEST	Milester

Part '	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		TO THE	W.	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a		3000	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax r	The state of the s	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction		1500		53(0)(1
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	-	3a		/
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Scheo	dule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other at				
	a financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		1
b	If "Yes," enter the name of the foreign country ▶			0.42	100
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According	The second secon	3129		BE
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	_	5a		/
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter training	A TOTAL CONTRACTOR OF THE PARTY	5b		1
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, organization solicit any contributions that were not tax deductible as charitable contributions?.		6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such congifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		1135	No.	Chr.
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and part	ly for goods	120		
	and services provided to the payor?		7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? .		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for w	hich it was			
	required to file Form 8282?		7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			Add of the	100
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene-	fit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co	ontract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a F	orm 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund mainta			CAM	
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.		115%	A CONTRACTOR	191
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		1
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		-
10	Section 501(c)(7) organizations. Enter:				195
а	Initiation fees and capital contributions included on Part VIII, line 12		ASSI		The state of
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b				Long !
11	Section 501(c)(12) organizations. Enter:		93		
а	Gross income from members or shareholders				
b	Gross income from other sources (Do not net amounts due or paid to other sources		100		A CONTRACTOR
	against amounts due or received from them.)			EW.	1 46
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			TRAN	DYN.
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		23334	Maria	200
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.		(E)		
b	Enter the amount of reserves the organization is required to maintain by the states in which		SEZ		
	the organization is licensed to issue qualified health plans		200		C2V 111
C	Enter the amount of reserves on hand		(SI)		Asset 1
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		/
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Sche		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in rem	Appropriate Color and			
	excess parachute payment(s) during the year?		15		1
	If "Yes," see instructions and file Form 4720, Schedule N.			The said	7,10
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	ent income?	16		/
	If "Yes," complete Form 4720, Schedule O.		1000	7	THE THE

	Check if Schedule O contains a response or note to any line in this Part VI			₩ V
Secti	on 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	Section 1		
b	Enter the number of voting members included on line 1a, above, who are independent . 1b	75		Tall I
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		1
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		/
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
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		1
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		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			14-11
a b	The governing body?	8a 8b	1	
9	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 on Schedule O	9	V	/
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	_	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
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	/	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10		Dame!
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	1	
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	,	
13	Did the organization have a written whistleblower policy?	13	·	1
14	Did the organization have a written document retention and destruction policy?	14	1	
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		1
b	Other officers or key employees of the organization	15b		1
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	WAY.	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ► California	u, alai	VII.	ini
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain on Schedule O)	Γ (Sec	tion 5	501(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or and financial statements available to the public during the tax year.		A S	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	cords		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (B) (D) (E) (do not check more than one Name and title Average Reportable Reportable Estimated amount box, unless person is both an compensation compensation of other hours officer and a director/trustee) compensation per week from the from related Individual trustee employee Institutional trustee Key employee Highest compensated (list any organization organizations from the director hours for (W-2/1099-MISC) (W-2/1099-MISC) organization and related related organizations rganizations below dotted line) (1) Karen Rucker, Secretary 1 (2) Steve Conklin, CFO 10 (3) Michelle Thompson, CEO 20 0 (4) Keith Wheeler, Director 10 (5) Ben Hilburn, Director 1 (7) (10)(11)(12)(13)(14)

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Em	plo	yee	s, ar	nd F	lighest Compe	ensated Emplo	yees (co	ntinued
	(A) Name and title		box,	unles	Pos heck ss pe	ersor	e than is both or/trus	n an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related	Estimated of o	f) d amount ther nsation
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from organiza	
(15)												
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1b	Subtotal							>	0	0		(
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)							-	0	0		(
2	Total number of individuals (including bureportable compensation from the organ	t not limited					above	e) w				
									0		100000000000000000000000000000000000000	res No
3	Did the organization list any former employee on line 1a? If "Yes," complete										3	1
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$1	50,	000	? 1	f "Ye	s,"	complete Sched			1
5	Did any person listed on line 1a receive of for services rendered to the organization										5	1
Secti	on B. Independent Contractors						T.					
1	Complete this table for your five hig compensation from the organization. Rep											
	(A) Name and business add	W.						,-	(B) Description of serv		(C) Compensati	
2	Total number of independent contractor							th.	ose listed abov	e) who		

Form 990 (2020)								
Part VIII	Statement of Revenue							
	Check if Schedule O contains a response or note to any line in this Part VIII							

					Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a b	Federated campaigns Membership dues	1a 1b 1c	0				
	d	Related organizations	1d	0				
ig ig	е	Government grants (contributions)	1e	0				
utions, ner Sin	f	All other contributions, gifts, grants and similar amounts not included above		565932	2			
ontrib nd Oth	g	Noncash contributions included in lines 1a–1f	1g				Estatal.	
OB	h	Total. Add lines 1a-1f			565932			
o	0-	CNIII Padia Contanana		Business Code	450.50	4-0		
Program Service Revenue	2a b	GNU Radio Conference		611430	156474	156474	0	0
yram Ser Revenue	C							
T Ne	d							
Re	e							
Pro	f	All other program service revenue						
	g	Total. Add lines 2a-2f		>	156474			
	3	Investment income (including div	idend	s, interest, and	0.00			
		other similar amounts)			0	0	0	0
	4	Income from investment of tax-exe	ond proceeds ▶	0	0	0	0	
	5	Royalties			0	0	0	0
		(i) Re		(ii) Personal			16 10 19 72 321	
	6a	Gross rents 6a	0					
	b	Less: rental expenses 6b	0					
	C	Rental income or (loss) 6c Net rental income or (loss)					0	
	d	(1) (2)	ities	(ii) Other	0	0	0	
	7a	Gross amount from sales of assets other than inventory 7a	0	(4) 5 416.				
ner Revenue	b	Less: cost or other basis and sales expenses . 7b	0	0				
eve	c	Gain or (loss) 7c	0	0				
F.	d	Net gain or (loss)		🕨	0	0	0	0
Othe	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
	b	Less: direct expenses	8b	0				ASSIST
	C	Net income or (loss) from fundraisi	ng eve	nts >	0		0	0
	9a	Gross income from gaming activities. See Part IV, line 19 .	9a	0				
	b	Less: direct expenses	9b	0				
	С	Net income or (loss) from gaming a	ctivitie	s >	0	0	0	0
	10a	Gross sales of inventory, less returns and allowances	10a	0				
	b	Less: cost of goods sold	10b	0		ACTUAL PROPERTY AND A		
-	С	Net income or (loss) from sales of i	nvento		0	0	0	0
Miscellaneous Revenue	11a	AMSAT Payment Refund		Business Code 813410	44	0	44	0
scellaneo	b							
Re	d	All other revenue						
Ξ	e	Total. Add lines 11a-11d					A STANCE WAY	
	12	Total revenue. See instructions		>	722450	156474	44	0
_								

Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must complete				nn (A).
_	Check if Schedule O contains a response				
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	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	o	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		WE SELECTED TO
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	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	0	0	0	0
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11 a	Fees for services (nonemployees): Management	0	0	0	0
b	Legal	4150	4150	0	0
C	Accounting	0	0	0	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	0		CONTRACTOR DE LA CONTRA	0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	370	0	370	0
14	Information technology	427	0	427	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
10	Conferences, conventions, and meetings .	0	0	0	0
19 20		425	0	425	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	0	0	0	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)		A DE LA CONTRACTOR DE L		
		70000	70000	0	
a	P4DX Program Expenses GNU Radio Conference Expenses	79968	79968	0	0
b	AMSAT Member Society Dues	40763	40763	80	0
d	ANIOA I MEMBER SOCIETY DUES	80	0	0	0
e	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	126183	124881	1302	0
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)	120103	124861	1302	0

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	13417	1	609684
2	Savings and temporary cash investments	0	2	0
3	Pledges and grants receivable, net	0	3	0
4	Accounts receivable, net	0	4	0
5	Loans and other receivables from any current or former officer, director,	Charles and a little to		Assimilar Commence
	trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .			
7		. 0	7	0
7	Notes and loans receivable, net	0	8	0
8	그 바람이 가게 하면 하는 것이 되면 이 어려워 가게 되었다. 그렇는 그는 그렇게 되었다. 그런	0	_	0
9	Prepaid expenses and deferred charges	aperican and the second	9	Marking of the second of the second
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 74924			
b	Less: accumulated depreciation 10b 0	0	10c	74924
11	Investments—publicly traded securities	0	11	0
12	Investments—other securities. See Part IV, line 11	0	12	0
13	Investments—program-related. See Part IV, line 11	0	13	0
14	Intangible assets	0	14	4795
15	Other assets. See Part IV, line 11	0	15	0
16	Total assets. Add lines 1 through 15 (must equal line 33)	13417	16	689403
17	Accounts payable and accrued expenses		17	0
18	Grants payable	0	18	0
19	Deferred revenue	0	19	0
20	Tax-exempt bond liabilities	0	20	0
21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
100	controlled entity or family member of any of these persons	0	22	0
23	Secured mortgages and notes payable to unrelated third parties	0	23	0
24	Unsecured notes and loans payable to unrelated third parties	0	24	0
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
	of Schedule D	0	25	0
26	Total liabilities. Add lines 17 through 25	0	26	0
	Organizations that follow FASB ASC 958, check here ► ✓ and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	13417	27	689403
28	Net assets with donor restrictions	0	28	0
	Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds	0	29	0
30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
31	Retained earnings, endowment, accumulated income, or other funds	0	31	0
32	Total net assets or fund balances	13417	32	689403
33	Total liabilities and net assets/fund balances	13417	33	689403

100		-4	•
Pag	10	1	4

				rt XI Reconciliation of Net Assets	Part	
1				Check if Schedule O contains a response or note to any line in this Part XI		
722450		1	Total revenue (must equal Part VIII, column (A), line 12)	1		
126183		2	Total expenses (must equal Part IX, column (A), line 25)	2		
596267		3	Revenue less expenses. Subtract line 2 from line 1	3		
13417		4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		
0		5	Net unrealized gains (losses) on investments	5		
0			6	Donated services and use of facilities	6	
0			7	Investment expenses	7	
0			8	Prior period adjustments	8	
79719		9	Other changes in net assets or fund balances (explain on Schedule O)	9		
				Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	10	
89403	6		10	32, column (B))		
				t XII Financial Statements and Reporting	Part	
				Check if Schedule O contains a response or note to any line in this Part XII		
No	Yes					
	(Albert	- 1885		Accounting method used to prepare the Form 990: Cash □ Accrual □ Other □	1	
		1	explain	If the organization changed its method of accounting from a prior year or checked "Other," Schedule O.		
/		2a		Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	
			ompiled	If "Yes," check a box below to indicate whether the financial statements for the year were co reviewed on a separate basis, consolidated basis, or both:		
	BY V	a land		☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
1		2b	Were the organization's financial statements audited by an independent accountant?			
		1	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
				☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
	Control	f	versiaht	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	C	
		2c		the audit, review, or compilation of its financial statements and selection of an independent account	15	
			If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
1		3a		As a result of a federal award, was the organization required to undergo an audit or audits as set for Single Audit Act and OMB Circular A-133?	За	
		3b		If "Yes," did the organization undergo the required audit or audits? If the organization did not un required audit or audits, explain why on Schedule O and describe any steps taken to undergo such	b	